

PART A

TV# 120064

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-7250

Telephone (360) 664-1222 - Fax (360) 586-1181

Intrastate Common Carrier Operating Authority

APPLICATION FOR PERMIT

(excluding Household Goods and Common Carrier Brokers)

FOR OFFICIAL USE ONLY

Reception Number: 037427	Safety: 1-12-12	Carrier ID#: 6799
111 0268 200 02 275.00	Insurance: FORM E 1-12-12	Employee: KWC

New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
<input checked="" type="checkbox"/> \$275 GENERAL COMMODITIES ONLY	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE	

\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation)

For Commission Use Only
Auth #: M50242

TIME OF PAYMENT

Check Money Order Amex Discover Mastercard Visa

Expiration Date 08/12

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Name (printed): Randy C. Stockton Date: 1/10/2012

Signature: [Signature] Title: General Manager Theft Subs

MOTOR CARRIER INFORMATION

CC#: 64519	US DOT#: 1614621 OK	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 578 083 366
APPLICANT NAME: Northwest Center		PHONE#: 206-285-9140
d/b/a:	FAX #: 206-764-8965	
BUSINESS (MAILING) ADDRESS: PO Box 80827		
(street address, P.O. Box)		
(city, state, zip) Seattle, WA 98108		
PHYSICAL ADDRESS: (street address, if different) 7272 W. Marginal Way S.		
Seattle, WA 98108		

TYPE OF BUSINESS ENTITY

INDIVIDUAL PARTNERSHIP CORPORATION (LP, LLP, LLC)

STATE OF INCORPORATION WA - Non Profit

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>STOCK DISTRIBUTION OR PERCENTAGE OF SHARE</u>
Tom Everill	CEO	7272 W. Marginal Way S	N/A
James Wood	CFO	7272 W Marginal Way S	N/A

OK
NON-Profits

TRANSFER OF EXISTING PERMIT

Complete this section if you are transferring an existing permit to a new owner. List name of current permit holder and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number.

NAME ON PERMIT: _____ PERMIT NUMBER: _____

Signature of current permit holder _____

Date _____

HAZARDOUS MATERIALS

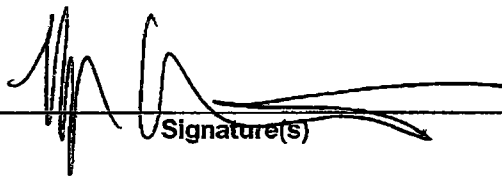
- | | | | |
|---|---|---|---|
| <input type="checkbox"/> You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage Insurance. You do not need to complete Part B. | <input checked="" type="checkbox"/> You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. You must obtain \$750,000 in Public Liability and Property Damage Insurance. You must complete Part B. | <input type="checkbox"/> You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2. | <input type="checkbox"/> You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2. |
|---|---|---|---|

VEHICLE INFORMATION

<u>UNIT#</u>	<u>LICENSE#</u>	<u>STATE</u>	<u>VIN#</u>
		Gee Attached	

Signature

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is received from the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.


Signature(s)

1/10/2012
Date

Northwest Center

61209	B24696U	Washington	JALC4W169C7001522
61210	B24697U	Washington	JALC4W16XC7001626
71729	A85078Z	Washington	1HTMMAAL57H361372
61113	B85168S	Washington	JALC4W167B7002845
61120	B85172S	Washington	JALC4W169B7002846
61114	B85169S	Washington	JALC4W167B7002988
61115	B85170S	Washington	JALC4W167B7003039
61116	B85165S	Washington	JALC4W168B7002997
61117	B85167S	Washington	JALC4W168B7003003
61118	B85171S	Washington	JALC4W168B7003020
61119	B85166S	Washington	JALC4W169B7003043
71809	B31097L	Washington	J8DE5W16X87900662

oh

PART B

SAFETY FITNESS SURVEY FOR ALL APPLICANTS THAT OPERATE A VEHICLE OVER 10,000 GVWR

Companies applying to transport any commodity must complete this survey.

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code (WAC) 446-65.

Copies of the FMCSR's are available from several vendors. These include, but are not limited to:

- Washington Trucking Association, 930 S. 336th St., Suite B, Federal Way, WA 98003, www.wtatrucking.com, (800) 732-9019 or (253) 838-1650.
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, (503) 236-1183.
- US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.

Company Representative

Name: NA Position: _____

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Any person who drives a commercial motor vehicle requiring a CDL must participate in a controlled substance and alcohol testing program as required by FMCSA in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65-010.

Company Driver

Name: NA Position: _____

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL, as required by the Washington State Department of Licensing. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Driver Qualification File Requirements

Name: Randy C. Stockton Position: General Manager Theft Sales

Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.

Driver Hours of Service

Name: Randy C. Stockton Position: General Manager Theft Sales

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

Vehicle Inspection Requirements

Name: Randy C. Stockton Position: General Manager Theft Sales


Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010:

- Identification of the vehicle.
- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspections, repairs and maintenance indicating their date and nature.


All companies must conduct periodic inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in WAC 446-65-010.

Signature

My signature below certifies that I understand my responsibility as a motor carrier and I will comply with all the safety requirements which apply to my operations.



Signature of applicant

1/10/2012 

Date

Pending
6794

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATION OF INSURANCE

Filed with Washington Utilities & Transportation Commission (herein after called Agency)
(Name of Agency)

This is to certify that the New Hampshire Insurance Company
(Name of Company)
(herein after called Company) of 175 Water St. 18th Floor, New York, NY, 10038
(Home Address of Company)

has issued to Northwest Center of PO Box 80827, Seattle, WA 98108
(Name of Motor Carrier) (Address of Motor Carrier)

A policy or policies of insurance effective from 01/08/2012 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Agency has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or policies and all endorsements thereon. This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effective by the Company or the insured giving thirty (30) days' notice in writing to the State Agency, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Agency.

Countersigned at 25 Lake Louise Marie Rd This 10th day of Jan 20 12
Rock Hill (Address) (Day) (Month) (Year)
NY 12775

Insurance Company File No. 01CA0062676237000 Shella Shaw
(Policy No) (Authorized Company Representative)

Underlying Limit :1,000,000.00 Liability Limit :1,000,000.00

FAX

To: '913605861181'

Company:

Fax: 913605861181

Phone:

From: Randy Stockton

Fax: 206-764-8262

Phone:

E-mail: rstockton@nwcenter.org

NOTES:

FW: Scanned image from MX-M363N

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