

RECEIVED

FEB 10 2012

1300 South Evergreen Park Drive
 SW
 PO Box 47250
 Olympia, WA 98504-7250
 Phone (360) 664-1222
 Fax (360) 586-1181
 Web Site: www.wutc.wa.gov

WASH. UT. & TP. COMM

COMMON CARRIER OF PROPERTY
 (excluding Household Goods carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE
FEE: \$50.00

Application for Change of Name or Business Structure may be used ONLY in the following circumstances:

- Changes of carrier's name, with no change in ownership or business structure.
- Change of business structure from individual to corporation to incorporate an individual's business when the individual is the majority stockholder or, by an individual to a partnership, when the individual is the majority partner or, from a corporation to a proprietorship of the majority shareholder or, by a partnership to a proprietorship of the majority partner.
- Change of name resulting from a change in business structure from a partnership to a corporation established to incorporate the partnership business, when the partners are the majority stockholders in the same proportionate ownership.
- Change of name resulting from a change in business structure from a corporation to another corporation where both corporations are wholly owned by the same stockholders in the same proportions.

TYPE OF PAYMENT

Cash Check Money Order AMEX MasterCard Visa
 Exp Date
 Credit Card Information (if applicable) Month/Year

Amount \$ 50.00 COMPANY NAME: FRANKLIN TRUCKING LLC

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.

Cardholder's signature: Donna Franklin Date 2-9-12

#6065

TV-120185

For Commission Use Only

111-2068-200-02	<u>50.00</u>	Received date: <u>2/10/12</u>	ID: <u>6819</u>
			Insurance: <u>[Signature]</u>

done 2/15/12

58119

Holder of Permit CC-~~275024~~ asks the UTC for authority to change the name of or the business structure of the carrier named below under 81.80 RCW and WAC 480-14 to:

NEW BUSINESS INFORMATION

6819

New Name: FRANKLIN TRUCKING LLC

Phone #: 360-876-5487

Trade Name:

Fax #:

Mailing Address:

Physical Address: (if different)

Street/P.O. Box PO BOX 485

Street 12100 CARRIAGE PL SE

City, State Zip OLALLA WA 98359

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USDOT # 561037 (If you don't have one, you can apply online at www.fmcsa.dot.gov/online-registration or contact 360-596-3816 or 360-596-3803 for assistance.)

Unified Business Identifier Number (UBI): 603 093 561

Individual Partnership Corporation - State of Incorporation _____ (LP, LLP, LLC)

NAME	TITLE	PERCENTAGE OF SHARES
<u>William FRANKLIN</u>	<u>owner</u>	<u>80%</u>
<u>Kevin FRANKLIN</u>	<u>part owner</u>	<u>20%</u>

CURRENT BUSINESS INFORMATION

M33098

Current Name: Bill & Donna Franklin

Phone #: 360 876 5487

Trade Name: FRANKLIN TRUCKING

Fax #:

Mailing Address:

Physical Address:

Street/P.O. Box PO BOX 485

Street 12100 CARRIAGE PL SE

City, State Zip OLALLA WA 98359

City, State Zip OLALLA WA 98359

Individual Partnership Corporation - State of Incorporation _____

NAME	TITLE	PERCENTAGE OF SHARES
<u>Bill & Donna FRANKLIN</u>	<u>owners</u>	<u>100%</u>

CERTIFICATION: Carrier affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. The undersigned applicant requests that the Commission enter an order granting its petition as provided in 81.80 RCW.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Donna Franklin
Signature(s)

02-09-12
Date

6819

WN059938

561037 US

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE
(Executed in Triplicate)

Filed with WASHINGTON Utilities & Transportation Comm (Name of Commission) (hereinafter called Commission)

This is to certify, that the NORTHLAND INSURANCE COMPANY (Name of Company)

(hereinafter called Company) of 385 Washington Street, Saint Paul, MN 55102 (Home Office Address of Company)

has issued to FRANKLIN TRUCKING LLC (Name of Motor Carrier)

of PO Box 485 Olalla WA 98359 (Address of Motor Carrier)

a policy or policies of insurance effective from 02/10/2012 12:01 a.m. standard time at the address of the insured stated in said policy or policies and continuing until canceled 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 Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Counter/signed at 385 Washington Street, Saint Paul, MN 55102 this 14th day of February, 2012 (Address)

Insurance Company File No. WN059938 Authorized Company Representative [Signature] (Policy Number)