## PART A

# WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-725₹ECEIVED

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

Intrastate Common Carrier Operating Authority

JUN 282012

(excluding Household Goods and Common Carrier Brokers)							
FOR OFFICIAL USE ONLY WASH, U. & I.P. CON							
Reception Number: 039276 Safety: 7-5	Carrier ID#: W5374						
111 0268 200 02 ・スチ5・00 Insurance: ナー	-5-12 Formy Employee: Kup						
	CATION (check one)						
New Common Carrier Permit Authority, or Transfer of Existing Permit Number  Extension of Common Carrier Permit Authority							
\$275 GENERAL COMMODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE						
\$275 GENERAL COMMODITIES, including ARMORDED CAR SERVICE	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS						
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE						
\$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE							
\$100 REINSTATEMENT OF CANCELLED COMN (Must be filed within 10 months of cancellation)	For Commission Use Only: Auth #:						
TYPE O	F PAYMENT						
Check □ Money Order □ Amex □ Discover	☐ Mastercard ☐ Visa						
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): Ron Creech  Date:							
Signature: Pon Creech	Title: Office Clerk						
	ER IDENTIFICATION						
CC#:11101 US DOT# 623323	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 600-596-640						
APPLICANT NAME:	PHONE#:						
Harold Sorensen Trucking, Inc. 360-864-4921							
b/a: FAX #: 360-864-4914							
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) 112 Plomondon Roa	ıd						
(city, state, zip) Toledo, WA 98591							
PHYSICAL ADDRESS: (street address, if differen	<u>nt)</u>						

NAME  TITLE  ADDRESS  STOCK DISTRIBUTION OR PERCENTAGE OF SHARE  Lard Service Pres 112 Planordon Ration, With 100 feet and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number.  NAME ON PERMIT:  Signature of current permit holder  INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul  CORPORATION (LP, LLP, LLC)  STATE OF INCORPORATION 1/A/A  ADDRESS  STOCK DISTRIBUTION OR PERMIT NOW  PERCENTAGE OF SHARE  (00 feet and permit holder with a new owner. List name of current permit holder must sign below to authorize the transfer of the permit number.  PERMIT NUMBER:  Date	
NAME  TITLE  ADDRESS  STOCK DISTRIBUTION OR PERCENTAGE OF SHARE  Harold Screnger, Pres. 112 Plannadon Rd, Toledo, With 100 to 12 Plannadon Rd, Toledo, Rd, Tole	
TRANSFER OF PERMIT NUMBER  Complete this section if you are transferring an existing permit to a new owner. List name of <u>current</u> 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:	
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  INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul	<u>~~~</u>
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:  Signature of current permit holder  INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul	
Signature of current permit holder  INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul	
INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul  You will haul	
INSURANCE REQUIREMENTS (must check one)  A permit will not be issued until acceptable insurance is received  You will not haul  You will haul  You will 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.  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 C, Sections 1 and 2.  hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.  hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.  MOTOR VEHICLE LIST (Attach additional pages if necessary)	in
UNIT# LICENSE# STATE VIN#	
SEE ATTIMORED LIST	
Signature Signature specific to application does not in itself constitute outbority to	
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.	. 1
Signature(s)  6-25-2012 Date	. <b>-</b> -

## MOTOR VEHICLE LIST HAROLD SORENSEN TRUCKING UBI 600-596-640

UNIT#	LICENSE#	STATE	VIN#
2	B99073B	WA	1NKWL29X7FS326001
3	20828U	WA	109362
5	04154W	WA	150511S
6	77802X	WA	156087S
8	A91018K	WA	181490S
12	A05238P	WA	1NKWLB9X7JS506314
14	A05240P	WA	1NKWLB9X8HS349712
16	A05239P	WA	1M2P141CPKW006533
17	A49624W	WA	1XKWDL9X7B5192366
18	19750L	WA	1XKWDN9X7BS195120
65	20829U	WA	183547S
68	A90773L	WA	1NKDLBOX5LS554188
70	04405W	WA	1NKDLR9X7PS598839
71	A48390C	WA	1NKDLR9X2RR627545
73	A91017K	WA	1NKDLR9X2SS684391
74	A33186B	WA	1NKDLR9X4VR755697
84	B53648A	WA	1XKDPRTXX1R869880

### **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.

### **Controlled Substances and Alcohol Testing**

Name: Donald H. Sorensen Position: Management

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.

## Commercial Drivers License (CDL) Requirements

Name: Donald H. Sorensen Position: Management

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	n Require	ments
Name: Donald H. Sorensen	Position:	Management
Each company must maintain a complete Driver Qualificate vehicles as required by FMCSR Part 391.51 and by the Wexclusively in intrastate commerce within Washington have any interstate operations must maintain a complete file or	/SP in WA0 re limited ex	C 446-65-010. Owner/operators that work xemptions. Owners/operators that conduct
Drivers Hours	of Servic	
Name: Donald H. Sovensen	Position:	Management
Each company must maintain true and accurate hours of vehicle as required by the FMCSA in 49 CFR, Part 395.1(		
Vehicle Inspection, Rep	air, and M	laintenance
Name: Donald H. Sorens en	Position:	Management
Each company must prepare a written "Driver Vehicle Ins required by the FMCSA in 49 CFR, Part 396.11 and by th company must maintain certain required records for each FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 4  Identification of the vehicle.  The nature and due date of various inspections, repairs and maintenance.	e WSP in V vehicle tha 46-65-010: tion and ma	WAC 446-65-010. In addition, each at includes the following, as required by the aintenance operations to be performed.
All companies must conduct periodic inspections as requi WSP in WAC 446-65-010.	red by the	FMCSA in 49 CFR, Part 396.17 and by the
. Signat	ure	
My signature below certifies that I understand my comply with all the safety requirements which ap		
Pon Creech		06-25-2012
Signature of applicant		Date

NS374 Pendue

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

Filed with Washington Utili	ties & Transportation	Commission		(herein after called Agency)
	(Name of Agency)			
This is to sortify that the Lihe	erty Northwest Insuranc	a Cornoration		
This is to certify that the	(Name of Company)	e Corporation		
(h	Liberty Centre ,650 N E	Holladay Stroot	Portland OP 97232	
(herein after called Company) of One	(Home Address of Compa		- Orthand , OK , 37232	
	(			
HAROLD SOR				
has issued to TRUCKING, IN			N RD TOLEDO WA	<u> 98591-9709</u>
(Name	of Motor Carrier)	(Add	ress of Motor Carrier)	
A policy or policies of insurance effe	07/03/2012	12:01 A M et	andard time at the address	of the insured stated in said
policy or policies of insurance effe				
Damage Liability Insurance Endorse				
covering the obligations imposed up				
regulations promulgated in accorda				3 , .
Whenever requested the Con	npany agrees to furnish the Age	ency a duplicate origina	l of said policy or policies a	nd all endorsements thereon
	sement described herein may n			
cancellation may be effective by the	•		, ,	
commence to run from the date noti			in witing to the State Agen	icy, such thirty (50) days hollow
	is a decadary reserved in the st	noo or tho rigorioy.		
650 NE Holla	dav			
Countersigned at Portland		OR 97232	This <u>05th</u> day	of <u>Jul</u> 20 <u>12</u>
	(Address)		(Day)	(Month) (Year)
<b>.</b>				
Insurance Company File No. C24		_	Jerry Strawn	
	(Policy No)		(Authorized Compa	any Representative)

Underlying Limit: 0.00 Liability Limit: 1,000,000.00