## E1161#VI PART A 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 Carrier ID# 7-12-12 Safety: Reception Number Insurance: 2-12-12 - Foun E Employee: 111 0268 200 02 TYPE OF APPLICATION (check one) **Extension of Common Carrier Permit Authority** New Common Carrier Permit Authority, or Transfer of Existing Permit Number GENERAL COMMODITIES, including $\Box$ \$100 \$275 GENERAL COMMODITIES ONLY Ø ARMORED CAR SERVICE GENERAL COMMODITIES, including \$100 \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS ARMORDED CAR SERVICE GENERAL COMMODITIES, including \$100 \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR HAZARDOUS MATERIALS SERVICE \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE For Commission Use Only. \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT Auth #:69///12 (Must be filed within 10 months of cancellation) TYPE OF PAYMENT Money Order 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 Name (printed) Signature MOTOR CARRIER VIDENTIFICATION WA UNIFIED BUSINESS IDENTIFIER (UBI) #: US DOT# APPLICANT NAME d/b/a: Sane BUSINESS (MAILING) ADDRESS: (sheet address, P.O. Box) (city, state, zip) PHYSICAL ADDRESS: (street address, if different) Sane

INDIVIDUAL   PARTNERSHIP   CORPORATION (LP, LLP, LLC)   STATE OF INCORPORATION   LP, LLP   LLC)   STATE   LLC				na wa sa San San San San San San San San San Sa	
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## 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.

<ul> <li>Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbfraffic.com, (503) 236-1183.</li> <li>US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.</li> </ul>
Controlled Substances and Alcohol Testing
Name: Share Poland Position: Manager Jounes
<ul> <li>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:</li> <li>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</li> <li>has a gross vehicle weight rating of 26,001 pounds or more; or</li> <li>is designed to transport 16 or more passengers, including the driver; or</li> <li>is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.</li> </ul>
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 Privers License (CDI.) Reculements
Name: Shayne Ichael Position: Mainger Jaunes
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

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.

DEVE CHANGE AND COMMENTS	Racuraments			
Name: Shayne Poland	Position: Owner Imanages			
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.				
Dillors Hours	of Service			
Name: Sharpe Polare	Position: Owner / Manager			
Each company must maintain true and accurate hours of vehicle as required by the FMCSA in 49 CFR, Part 395.1	service records for each individual that drives a motor (e) and by the WSP in WAC 446-65-010.			
Vaniale lesce tion Re	alf, and Malinerance			
Name: Shay.e. Paland	Position: Bune / Manager			
Each company must prepare a written "Driver Vehicle Instruction of the FMCSA in 49 CFR, Part 396.11 and by the company must maintain certain required records for each FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC Indentification of the vehicle.  The nature and due date of various inspections, repairs and maintains.	ne type in type 446-65-010. In addition, each of vehicle that includes the following, as required by the 446-65-010:  Section and maintenance operations to be performed.			
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.				
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.				
A for Cascade Water	Tarkers In 6-26-12			
Signature of applicant	Date			

## Form E

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

6962 RECEIVED

(Executed in Triplicate)

Filed with

WASHINGTON UTILITIES & TRANSPORTATION COMMISSION (Name of Commission)

(hereinafter called Commission)

WASH, UT, & TP. COMM

This is to certify, that the

UNIGARD INSURANCE COMPANY

(Name of Company)

(hereinafter called Company) of

15805 NE 24TH ST. BELLEVUE, WA 98008

(Home Office Address of Company)

has issued to CASCADE WATER TANKERS, INC. (Name of Motor Carrier)

of 3721 AIRPORT WAY, E WENATCHEE, WA 98802

(Address of Motor Carrier)

a policy or policies of insurance effective from 7/9/2012 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 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 cancelled 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. \*NEW FILING\*

Countersigned at

15805 NE 24TH ST.

**BELLEVUE** 

<u>WA</u> (State) 98009 (Zip Code)

this

9TH

(Street Address) day of

JULY

20 12

Insurance Company File No.

CM014501

(Policy Number)

Karen Johnston

(Authorized company Representative)

MC 1633A (ED 8-99) UNIFORM INFORMATION SERVICES. INC

LRB 3539B