Aug. 15. 2012 11:29AM Licensing Services

PART A	TV# 121316
WASHINGTON UTILITIES AND TE	RANSPORTATION COMMISSIPHEIVED
1300 S Evergreen Park Dr SW, PO B	ox 47250, Olympia, WA 98504-7250
Telephone (360) 664-122 Intrastate Common Carr	ior Operating Authority AUS 0 9 2012
(excluding Household Goods a	and Common Carrier Brokers) WASH UL & IT WIN
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Reception Number: 039450 Safety: M	Carrier ID#:
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New Common Carrier Permit Authority, or	Extension of Common Carrier Permit Authority
Transfer of Existing Permit Number	GEASURES
\$275 GENERAL COMMODITIES ONLY	\$100 GARMERAL 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 COMMO (Must be filed within 10 months of cancellation)	N CARRIER PERMIT For Commission Use Only:  Au(h #:
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D'Check ☐ Money Order ☐ Amex ☐ Discover ☐	Mastercard □ Visa Expiration Date
CERTIFICATION: I, the undersigned, under penalty for false that I am authorized to execute and file this document on be valid.  DAYJO LITLE JOHN	e statement, certify that the following Information is true and correct, that of the applicant, and that all information on file is current and
Name (printed): DAVE SITTLE JOHN	Date: 8/6//2
Signature: David Litelyohn	Tille: MAUR LITTLE ONL LOGGING
MOITORCARNIE	IDENIURICATION SERVEY CONTRACTOR
CC#: US DOT# 1987792	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:
ARRIGANT NAME LIHIBJOHN LOGGI	PHONE#: 352-5868
DAVE LITLETOHN LOGGE	360-705-4103
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) //946	CASE Rd. SW.
(city, state, zip) 0/4mpiA, WA. 985)	
PHYSICAL ADDRESS: (street address, if different)	SAME AS ABOUE

Aug. 15. 2012 11:3 AM Licensing Services

No. 5475 P. 2/2

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MANAGE	DLITTLE	LE Johan	11946		OCK DISTRIBUTION OR REENTAGE OF SHARE	
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holder a		are transf mber to b	erri <b>n</b> g an existing p	ermit to a new owner. List n current permit holder must si		
NAME ON PER	MT;			PERMIT N	UMBER;	
Signature of cu					Date	
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KV #3	HX 95	48	WASh.	53474600	<del>2</del>	
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Oa	seig L Signatu	italj	ohn	· 8/	6/12	
	Signatu	r =(3)			Date	

DAVE LITTLEJOHN LOGGING

601-071-551

Attachment to: Application for renewal of Common Carrier Permit Authority

Type of Business: Partnership

Partners: Each partner has 20% ownership

David Littlejohn Dwaine Littlejohn Daniel Littlejohn Darren Littlejohn

Thomas Holmes Jr.

Aug. 15. 2012 11:30AM Licens ng Services

#### 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 mandaled 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. 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.

Composited Selections	enari (Alice) incol incolonici
Name: DWAINE LITTLESONN	

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.

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Nama	DWAINE	LITTLETOHN	Position: _	DRIVER	

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.

Aug. 15. 2012 11:31AM Licensing Services

No. 5475 P. 1/2

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Name: DWAINE LITTLE JOHN	Position: DRIVER
Each company must maintain a complete Driver Qualificativehicles 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 on	SP in WAC 446-65-010. Owner/operators that work imited exemptions. Owners/operators that conduct
JOHANGER HERONG	ส (53 กังกับวั
Name DWAINE LITTESONN	
Each company must maintain true and accurate hours of sivehicle as required by the FMCSA in 49 CFR, Part 395.1(e	ervice records for each individual that drives a motor e) and by the WSP in WAC 446-65-010.
Vehicle Urgani Joh, Gept	e and Memierenes
Name: DUPINE CITIESOHO	Position: DRIVER
Each company must prepare a written "Driver Vehicle Insprequired by the FMCSA in 49 CFR, Part 396.11 and by the company must maintain certain required records for each vFMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 44 ldentification of the vehicle.	WSP in WAC 446-65-010. In addition, each rehicle that includes the following, as required by the 6-65-010.  In addition, each representation in the performed by the performed.
All companies must conduct periodic inspections as require WSP in WAC 446-65-010.	ed by the FMCSA in 49 CFR, Part 396.17 and by the
S/Glue v Ju	
My signature below certifies that I understand my comply with all the safety requirements which app	responsibility as a motor carrier and I will ly to my operations.
Signature of applicant	9/6/12 Date
	•
7	



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/17/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

PRODUCER				CONTACT DATE DATE		
Sunset Insurance Agency	LLC			NAME: Diana Rieland	-	
1429 West Bay Drive NW	<b></b>			[A/C, No. Fan. (300) 35/-3353	X C. No): (960) 35	7-8167
Olympia WA 98502				ADDRESS: dianar@sunsetagency.com		
				INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED				INSURER A: Progressive Insurance co.		NAIC #
				INSURER B :	<del>-</del>	
David LIttlejohn Logging 11946 Case Rd SW				INSURER C :		
				INSURER D :		
Olympia WA 98512-9127				INSURER E :		
001/50		-		INSURER F:	·	
COVERAGES CE	RTIF	CATI	NUMBER:			
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If yes, describe under DESCRIPTION OF OPERATIONS below		- }		E.L. DISEASE - EA EMPLO	<del></del>	
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				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE THE EXPIRATION DATE THEREOE NOTICE THE	CANCELLED	
WA TITE TITE				THE EXPIRATION DATE THEREOF, NOTICE WILL ACCORDANCE WITH THE POLICY PROVISIONS	BE DELIVER	EFORE
WA Utilities & Transp P.O. Box 47250	orta	tio	n Commission	ACCORDANCE WITH THE POLICY PROVISIONS.		
= 10: <b>20 4</b> / <b>2 5 0</b>			<b>)</b> —	HORIZED REPRESENTATIVE		
Olympia, WA 98504-725	0		į			
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ORD 25 (2010/05)				/		

#### PART A

# WASHINGTON UTILITIES AND TRANSPORTATION COMMISSIONEIVED 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

		•	_			
	PLICATION ousehold Goods			WASH	LUT & TP COM	
	FOR OFFICIA	L USE ONLY		Mr	M/O	
Reception Number: 039450 Sat	fety:	•	Carrier ID	)#:/	040	
	urance:		Employe	e:		
TYPE	OF APPLICA					
New Common Carrier Permit Aut		Extension	Common (	Carrier Per	mit Authority	
Transfer of Existing Permi		\$100	REASURED		• • • • • • • • • • • • • • • • • • •	
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	6	17				
CERTIFICATION: I, the undersigned, undersigned, undersigned to execute and file the valid.	der penalty for falso his document on be	e statement, certify half of the applica	y that the following ant, and that all inf	g information is formation on file	true and correct, is current and	
Name (printed): BAVE LITTLE JOH	IN	Date:	8/6/12			
Signature: Lazid Litel Jo	hn	Title: <u> </u>	AUR LATILE	JOHN LO	99'NG	
	OR CARRIER		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE			
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APPLICANT NAME. LIHIB JOHN			PHONE#:	352-58	'5 <i>8</i>	
d/b/a:			FAX #:			
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) 11946 CASE Rd. SW.						
(city, state, zip) Olympia, Wh	. 9851	2			·	
PHYSICAL ADDRESS: (street addres		SAMI	E AS Abo	UE		

□ INDIVIDU	- 137	ck individu	PE OF BUSINE  Ual or complete par  HIP □ CORPOR  STATE OF	tnership/corpo	ration informa LP, LLC)	tion)
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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.

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- 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 Substan	ces and Alcohol Testing
Name: DWAINE	Position: DRIVER

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:

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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.

Se 1677	S. Comm	ercial Drivers License (CDL) F	Requirements
Name	DWAINE	Position:	DRIVER

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:

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- 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 Qualificatio	n Requireme	ents E. S.
Name: _	DWAINE		Position:	DRIVER
vehicles a	as required by FMCSR Par lv in intrastate commerce w	t 391.51 and by the V vithin Washington hav	VSP in WAC 44 ve limited exem	ach employee authorized to drive motor 46-65-010. Owner/operators that work aptions. Owners/operators that conduct and any other driver that they may use.
79 <b>6</b> - 95		Drivers Hours	of Service	
Name: —	DWAINE		Position:	DRIVER
Each com vehicle as	npany must maintain true a s required by the FMCSA in	nd accurate hours of n 49 CFR, Part 395.10	service records (e) and by the \	s for each individual that drives a motor WSP in WAC 446-65-010.
	. Vehic	le Inspection, Rep	air, and Main	ntenance:
Name: —	DUDINE		Position:	DRIVER
required becompany	by the FMCSA in 49 CFR, F must maintain certain requ in 49 CFR, Part 396.3 and b Identification of the ve The nature and due d	Part 396.11 and by the lired records for each by the WSP in WAC 4 Phicle. ate of various inspect	e WSP in WAC vehicle that inc 46-65-010: tion and mainte	" on each vehicle used each day as 2 446-65-010. In addition, each cludes the following, as required by the enance operations to be performed. ng their date and nature.
	nies must conduct periodic /AC 446-65-010.	inspections as requi	red by the FM0	CSA in 49 CFR, Part 396.17 and by the
175 ET		:⊫, Signat	ure K Dans	X Littlyohn "
My signa comply v	ature below certifies that with all the safety requi	at I understand my rements which ap	responsibil ply to my op	ity as a motor carrier and I will erations.
_ Da	rid Livelejohn			8/6/12
Signature	of applicant			Date