



RECEIVED

OCT 26 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.wulc.wa.gov

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

N-121701

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 \$ _____

COMPANY NAME: William Evans / Evans Outback Inc.

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: William Evans Date 10.23.12

For Commission Use Only

| | | |
|-----------------------|-------------------------|-------------------------------|
| 111-2068-200-02 \$50- | Received date: 10/26/12 | ID: 7086 |
| 040769 | | Insurance: <u>[Signature]</u> |

CK # 5046

dme 10/30/12

135395

Holder of Permit CC-59011 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 480-1419:

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NEW BUSINESS INFORMATION

| | |
|--|---|
| New Name: <u>Evans Outback Inc.</u> | Phone #: <u>509-952-3429</u> |
| Trade Name: | Fax #: <u>509-972-2079</u> |
| Mailing Address: | Physical Address: (if different) |
| Street/P.O. Box <u>PO Box 8207</u> | Street <u>11921 Wide Hollow Rd</u> |
| City, State Zip <u>Yakima, WA 98908</u> | City, State Zip <u>Yakima, WA 98908</u> |
| USDOT # <u>1904996</u> (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): <u>603-092-298</u> | |
| <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation - State of Incorporation <u>Washington</u> (LP, LLP, LLC) | |
| <u>NAME</u> | <u>TITLE</u> |
| <u>William Evans</u> | <u>President</u> |
| <u>PERCENTAGE OF SHARES</u> | |
| <u>100%</u> | |

WASH. UT. & TP COMM

CURRENT BUSINESS INFORMATION

| | |
|---|---|
| Current Name: <u>Evans, William</u> | Phone #: <u>509-952-3429</u> |
| Trade Name: <u>Evans Outback</u> | Fax #: <u>509-972-2079</u> |
| Mailing Address: <u>PO Box 8207</u> | Physical Address: |
| Street/P.O. Box | Street <u>11921 Wide Hollow Rd</u> |
| City, State Zip <u>Yakima, WA 98908</u> | City, State Zip <u>Yakima, WA 98908</u> |
| <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation - State of Incorporation _____ | |
| <u>NAME</u> | <u>TITLE</u> |
| <u>William Evans</u> | <u>owner</u> |
| <u>PERCENTAGE OF SHARES</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.

William Evans
Signature(s)

10.23.12
Date

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

Filed with **Washington Utilities and Transportation Commission** (hereinafter called Commission)

This is to certify, that the **Western National Assurance Company** (hereinafter called Company)
of **9706 4th Avenue NE Ste 200, Seattle WA 98115-2162**

has issued to **Evans Outback Inc of PO Box 9807 Yakima WA 98908**

a policy or policies of insurance effective from **10/15/12 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.

Countersigned at **9706 4th Avenue NW Ste 200, Seattle, WA 98115-2162**
this 15th day of October, 2012

Insurance Company File No. **CPP 1058159**
(Policy Number)

Janet K Thode
(Authorized Company Representative)