PART A

DBG, Inc.

TV# /

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 MON									
Reception Number: 044197 Safety:	Carrier ID#:								
111 0268 200 02 275.00 Insurance: NA	DUU UU () Employee:								
TYPE OF APPLICATION (check one)									
New Common Carrier Permit Authority, or Extension of Common Carrier Permit Authority									
Transfer of Existing Permit Number									
\$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 COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation) For Commission Use Columns Auth #:									
	PAYMENT								
☐ Check ☐ Money Order ☐ Amex ☐ Discover 🗷	Mastercard ☐ Visa Expiration Date								
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): Michael Kleemann Date: 2-22-13									
Signature: M VI	Title: Owner								
MOTOR CARRIER	RIDENTIFICATION								
CC#: 64843 US DOT# 10,000	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:								
APPLICANT NAME: PHONE#:									
Michael Kleemann 206-579-3179									
d/b/a: FAX #:									
BUSINESS (MAILING) ADDRESS:									
25035 108# Are SE F-103 Kent, WA 98030									
PHYSICAL ADDRESS: (street address, if different)									

TRANSFER OF PERMIT NUMBER Complete this section if you are transferring an existing permit to a new owner. List name of cur holder and permit number to be transferred. The current permit holder must sign below to author 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 hazardous materials in any quantity. You will operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability \$\frac{1}{3}\text{ OWR of 10,000 pounds} \text{ OF 10,000 pounds} O	p.1	2	253-852-5912			BG, Inc.	39a D	b 25 13 11:	
Check individual or complete partnership/corporation information									
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Altn: Tina



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/01/2013

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.

IMPORTANT: If the contificate heider is an ADDITIONAL INSURED, the policy(les) 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

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Vern Fonk Insurance Services Inc						[A/C, No. Ext]: 200-003-4034 [A/C, No.]: 200-003-40:				
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INSU	INSURED					INSURER 6 ;				
MICHAEL KLEEMANN						INSURER C ;				
	25035 108TH AVE SE F	103			INSURER D ;					
	KENT, WA 98030				INSURE	RE				
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