PART A

TV#/30298

WASHINGTON UTI 1300 S Evergreen P	LITIES AND T ark Dr SW, PO E one (360) 664-12	ox 47250, Olym	pia, WA 985	MISSION 04-7250RECEIV	ED
Intrasta	te Common Car	rier Operating A	uthority	FEB 272	.013
	APPLICATION			, 47-1	
CK# 3226 (excluding	ng Household Goods	INVESTIGATION OF THE PROPERTY	Brokers)	WASH JIT & T	P COMM
Reception Number: O. A. A. A. O. O.	Safety:	AL USE ONLY	Carrier ID#:	4506	
111 0268 200 02 275.00	Insurance:		Employee:	A	
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New Common Carrier Permit				rier Permit Author	itv
Transfer of Existing Pe				inor i crimic Addition	
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\$275 GENERAL COMMODITIE HAZARDOUS MATERIALS an SERVICE					
\$100 REINSTATEMENT OF CA (Must be filed within 10 months of c		N CARRIER PERM		Commission Use Only: h #:	
		PAYMENT			
Check Money Order Ame	x □ Discover □	Mastercard □ Visa	Ex	piration Date	
CERTIFICATION: I, the undersigned that I am authorized to execute and to valid.	, under penalty for false ile this document on be	chalf of the applicant, a	t the following info and that all informa	ormation is true and corre ation on file is current and f	ct,
Name (printed:	· · · · · · · · · · · · · · · · · · ·	Date:	4/23/	75	
Signature: 1		Title: OU	INER		
W' M	OTOR CARRIER	DENTIFICATIO)N		
CC# 48 44 US DOT#	der 10,000	WA UNIFIE		DENTIFIER (UBI)#:	
APPLICANT NAME: PEDRO	SALin	JAS PI	HONE#: (253)	548.553	4
d/b/a: 08/30/99	Pedro Salina	S Deliver HA	X #:		coon V
DUCINECO (MANUNO) ADDDECO	E-1	MAIL - PE	cordat	PS@yanoo.	1
BUSINESS (MAILING) ADDRESS	5617 7:	Sth. AVE	CT. WE.	PS@Yahoo. ST PLACE, W	77. /A
PHYSICAL ADDRESS: (street add			CT. WE.	ST PLACE, W 9846	77 7

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INDIVIDUA			IP CORPOR		LP, LLC)		
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Signature of cu	CARTE OF THE OWNER, OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,					Date	-
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UNIT#	LICEN	ISE#	STATE		V	/IN#	
01	8730	03W	WA	1FT	RE14 W6	6HB13331	
			Signa	ture			4
operate and the	at no opera and affirm	tions may	/ be conducted ur	ntil a permit i	is received from pplication is tr	Institute authority to m the Commission. If the to the best of my $2/25/13$	
	Signatu	ure(s)	5			Date	

DS.

WASHINGTON INSURANCE IDENTIFICATION CARD

COMPANY NUMBER	COMPANY		COMMERCIA	AL PERSONAL
19232	Allstate Insura	nce		
POLICY NUMBER 648562745 YEAR MAKE/MODEL 2006 FORD ECONOLIN	EFFECTIVE DATE 12-15-2012		1	XPIRATION DATE 2-15-2013 VEHICLE IDENTIFICATION NUMBER 1FTRE14W66HB13331
AGENCY/COMPANY ISSUING C. LARSON FINANCIAL 3560 BRIDGEPORT WY W UNIVERSITY PLACE, WA	ARD STE A2 A2			

NSURED
PEDRO SALINAS
3012 S WARNER ST
TACOMA, WA 98409-4812

IDCARDWA 10-11 SEE IMPORTANT NOTICE ON REVERSE SIDE

> Pedro Salinas Deliveries (253) 548.5534 recordarés a yahoo.com



PEDRO MARTIN SALINAS PEDRO SALINAS DELIVERIES 3012 S WARNER ST TACOMA WA 98409-4812

DETACH BEFORE POSTING

004150



BUSINESS LICENSE

Sole Proprietorship

PEDRO MARTIN SALINAS PEDRO SALINAS DELIVERIES 3012 S WARNER ST TACOMA WA 98409 4812

TAX REGISTRATION

REGISTERED TRADE NAMES: PEDRO SALINAS DELIVERIES Unified Business ID #: 603 214 561

Business ID #: 1 Location: 1

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Brad Flohesty

WASHINGTON DRIVER LICENSE



4d LIG# SALINPM317NT
1 SALINAS TOLEDO
2 PEDRO MARTIN

3 DOB 08-30-1969 44 ISS 02-19-2013

3 5617 75TH AVENUE CT W UNIVERSITY PLACE WA 98467-4513

15 Sex M 16 Hgt 6-88 17 Wgt 238 18 Eyes BRN 9 Class sa End NONF

46 EXP 08-30-2016

12 Restrictions NONE

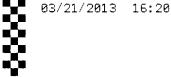
Rev 89-16-2889

TEMP EXP 04-05-2013

5 DD SALINPM317NT33138583G1641

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Larson Financial & Insurance

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Att: Susan	FROM: Kevin Klein DATE: 3/21/2013		
COMPANY: Alistate			
FAX NUMBER: 1 360 586 1181	sender's fax number: 253-565-8895		
PHONE NUMBER:	sender's phone number: 253-565-8890		
	e-mail address kevinklein@allstate.com		
√ URGE	NT PLEASE RECYCLE		

NOTES/COMMENTS:

Please see attached for Pedro Salinas.

State Filing has been made through Allstate and Form E generates from Chicago Headquaters from underwriting and should be received by you soon.

If anything else is needed please let me know.

Thank you

Kevin

