### TV# 120701 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					
Reception Number: 045052 Safety:	Carrier ID#:				
111 0268 200 02 275-00 Insurance: 000	MAY MAY				
THE STATE OF THE S	Extension of Common Carrier Permit Authority				
New Common Carrier Permit Authority, or 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 Only: Auth #:					
是我们就是我们的一种,我们就是一个人的人,我们就是我们的人,我们就是我们的人,我们就是这个人的人,我们就是这个人的人,我们就是这个人的人,我们就是这个人的人,他	PAYMENT				
☐ Check ☐ Money Order ☐ Amex ☐ Discover ■	Mastercard □ Visa Expiration Dat				
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):  OREO TYLLE RIPPE Date: 5 - 2 - 1 3					
Name (printed): JAKEO TYLEE KIDINES	Title: JTR TRUCKING				
	REDENTIFICATION				
CC#: 194906 US DOT# 2395617	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:				
APPLICANT NAME: JACED RIDGE	PHONE#: 425 367 2897				
d/b/a: 9-13-88 JTR Trudung Phist.					
BUSINESS (MAILING) ADDRESS: 731 1857 AVE NE SNOHOMISH, WA 98290					
PHYSICAL ADDRESS: (street address, if different) 731 185™ AVE NE					
SNOHAMISH, 48290					
Received Time_May. 2, _2013_12:43 PM_No. 89584					

M INDIVIDUAL	(check □ PART	individual	or complete partner CORPORA STATE OF	ership/corporation	n informatio LLC) ION	
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NAME ON PERM	IT:				PERMIT N	JMBER:
Signature of cur	rent permit h	rolder				Date
AND THE PROPERTY OF THE PROPER	the Participal State			JERS WILL		
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A	Signate	ure(s)	·		5	-2 -13 Date
Received Time_N		X	M_No. 89585			

### **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.
- 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.

	net all concerned than
Name: JARED RIDGE	Position: OWNER/OPERATOR

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.

Commercial Trace: Assess	SUNCERNATIONS TO THE
Name: SARED RIDGE	Position: OWNER OPERATOR

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.

### BITTY OF CHARLETTE BUILDING TOP CULTURE TO THE

Name: JARED RIDGE

3605631391

Position: OWNER/OPERATOR

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.

JARED RIDINE

Position: OUNER OPERATION

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

### Vernes respection Researce and Maintenance

SARGO RIDGE

Position: OWER OPERATUR

Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010:

- Identification of the vehicle.
- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspections, repairs and maintenance indicating their date and nature.

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.

Signature of applicant

3605631391



## **BUSINESS LICENSE**

Sale Proprietorship

Unified Business ID #: 602 876 901

Business ID #: 1 Location: 1

JARED TYLER RIDGE JTR TRUCKING 731 185TH AVE NE SNOHOMISH WA 98290 4424

TAX REGISTRATION

REGISTERED TRADE NAMES: JTR TRUCKING

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.

Director, Department of Revenue

Roxanne J. Swidrak Vice President Operations

# DOT Drug and Alcohol Program Enrollment Certificate of

# JTR Trucking

with Foley Carrier Services that meets the requirements of DOT Regulation 49 The Employer listed above has enrolled in a Drug and Alcohol Testing Program CFR Parts 382 & 40.

Snohomish, WA 98290 731 185th Ave NE JTR Trucking

Program Start Date: 4/1/13

Program is current through: 4/1/14

Client Code: 0000012732

Carrier Services
A BirdDog Company

Foley Carrier Services • 140 Huyshope Ave, Hartford, CT 06106 • 800-253-5506 • www.FoleyServices.com



### CERTIFICATE OF LIABILITY INSURANCE



DATE(MM/DD/YYYY) 5/3/2013

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.

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 certificate holder in lieu of such endorsement(s). PRODUCER CONTACT Stan Pease Shipley & Pease Insurance PHONE (A/C, No, Ext): 206 395 7872 E-MAIL ADDRESS: stan@shipleyins.com FAX (A/C, No):503 282 3345 PO Box 928 Woodinville, WA 98072 INSURER(8) AFFORDING COVERAGE NAIC# INSURER A: Sparta Insurance Company INSURED JTR Trucking INSURER B Jared Ridge dba INSURER C 731 185th Ave NE INSURER D Snohomish , WA 98290 INSURER E 425 367 2897 INSURER F **COVERAGES** CERTIFICATE NUMBER: REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE LIMITS POLICY NUMBER GENERAL LIABILITY EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY \$ CLAIMS-MADE OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE s GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ PRO-JECT POLICY OMBINED SINGLE LIMIT AUTOMOBILE LIABILITY 1,000,000 (Ea accident) BODILY INJURY (Per person) **ANY AUTO** 05/04/13 05/04/14 044CP02860 ALL OWNED AUTOS SCHEDULED BODILY INJURY (Per accident) \$ x Y x AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) \$ HIRED AUTOS s UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ EXCESS LIAB CLAIMS-MADE **AGGREGATE** \$ DED RETENTION \$ \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT N/A OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) This certificate is to serve as a 30-day Temporary Form E filing pending receipt of original from insurer. Certificate Holder is named an Addintont VED Insured and Loss Payee as respects Tractor and Trailer. MAY 06 2013 CERTIFICATE HOLDER CANCELLATION <u>WASH UT & TP COMM</u> WUTC - Permits & Ins. Section SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE P O Box 47250 THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Olympia, WA 98504-7250 Fax: 360 586 1181 AUTHORIZED REPRESENTATION

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