### 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

	arrier Operating Authority
	ON FOR PERMIT ds and Common Carrier Brokers)
	CIAL USE ONLY AO 0 1
Reception Number: Safety:	Carrier ID#:
111 0268 200 02 235.00 Insurance: 🗘	Employee:
TYPE OF APPLI	CATION (check one)
New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
\$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 COMM (Must be filed within 10 months of cancellation)	For Commission Use Only: Auth #:
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Check  Money Order  Amex Discover	☐ Mastercard ☐ Visa
	alse statement, certify that the following information is true and correct, behalf of the applicant, and that all information on file is current and  Date: 5-30-13  Title: Presidant
	ER IDENTIFICATION
CC# 249143 US DOT#	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:
APPLICANT NAME:	PHONE#: 360-459-7625
d/b/a: Lesco Construction Inc.	FAX #: 360-495-7625
BUSINESS (MAILING) ADDRESS: 5342 Johnson Pt. Rol. NE. Oly	repice, Wa 985/6
PHYSICAL ADDRESS: (street address, if differen	nt)

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□ INDIVIDUA		RTNERSH	HP NX CORPOR	RAT	TION (LP, LLP, LLC) NCORPORATION	
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NAME ON PER	MIT:				PERMIT N	UMBER:
Signature of cu	ırrent permit	holder				Date
		NSURAI	NCEREQUIRE	ИE	NTS (must check one)	A Comment of the Comment
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				n ac	iditional pages if neces	sary)
UNIT#	LICEN	ISE# 	STATE		\	/IN#
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Two	A7990	NOC X	Wa		16BJK342X	SE284148
			Signa	tur	9	

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is received from the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Signature(s)

5-29-13

### **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.

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Name: Leonal Suley

\_\_\_\_\_ Position: President

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 Drivers License (CDL) Requirements

Name: Lecrand Steley

Position:

president\_

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.

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	Driver Qual	ification Requiren	nents	
Name: Leward	Steley	Position:	Preside	J
Each company must maintal vehicles as required by FMC exclusively in intrastate company interstate operations must be seen as a seen and interstate operations.	CSR Part 391.51 and Imerce within Washin	by the WSP in WAC gton have limited ex	446-65-010. Owr emptions. Owners	ner/operators that work s/operators that conduct
	Drivers	Hours of Service		
Name: Leanand	Staley	Position:	Presiden	f
Each company must mainta vehicle as required by the Fi	in true and accurate h MCSA in 49 CFR, Pai	nours of service reco rt 395.1(e) and by th	rds for each indivi e WSP in WAC 4	idual that drives a motor 46-65-010.
	Vehicle Inspectio			
Name: Lanad	Staley	Position: ,	President	<u> </u>
The nature ar	9 CFR, Part 396.11 ai ain required records f	nd by the WSP in W. for each vehicle that was WAC 446-65-010:	AC 446-65-010. In includes the following the	n addition, each wing, as required by the ons to be performed.
All companies must conduct WSP in WAC 446-65-010.	periodic inspections a	as required by the Fl	MCSA in 49 CFR,	, Part 396.17 and by the
		Signature		
My signature below cert comply with all the safet	ifies that I understa by requirements wh	and my responsit nich apply to my d	oility as a moto operations.	r carrier and I will
			Z-1	6 ()

Date

Signature of applicant

1727

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

iled with Washington Utilities &	Transportation	Commi	ssion				(herein afti	er called	d Agency)
	Name of Agency)								
This is to certify that the American		Compan	ıy						
	Name of Company)								
nerein after called Company) of 4333 Brookl	yn Avenue NE ,S	eattle ,V	VA ,98186	5					
(	Home Address of Compar	ny)							
as issued to LESCO CONSTRUCT	ION INC	5342	IOHNSON	POINT R	D NE (	OLYMP	IA WA	985	16
(Name of Motor	Carrier)		(Add	Iress of Moto	r Carrier)				
policy or policies of insurance effective from	n <u>08/20/2012</u>		12:01 A.M. s	tandard time	at the ad	dress of	he insure	state	d in said
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Underlying Limit: 0.00

Liability Limit :1,000,000.00

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