PART A

TV#13

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504 1250

Telephone (360) 664-1222 - Fax (360) 586-1181

Intrastate Common Carrier Operating Authority

APPLICATION FOR PERMIT (a) All and Manager and Common Carrier Brokers)					
(excluding Household Goods and Common Carrier Brokers) FOR OFFICIAL USE ONLY					
Reception Number: 045556 Safety:	Carrier ID#:				
111 0268 200 02 275.00 Insurance:	Employee:				
	ATION (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				
\$276 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE					
\$100 REINSTATEMENT OF CANCELLED COMM (Must be filed within 10 months of cancellation)	ON CARRIER PERMIT For Commission Use Only: Auth #: \(\int \) \(\int \) \(\int \) \(\int \)				
	PAYMENT				
☐ Check ☐ Money Order ☐ Amex ☐ Discover D	☐ Mastercard ■ Visa Expiration Date 1/1/5				
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): Robert Court Date: US-11-2013					
Tible: Michael					
Signature:) Lake Source MOTOR CARRIER IDENTIFICATION					
CC#: 105052 US DOT#	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:				
PHONE#: Pobert Lowe 253-229-6434					
d/b/a: Robert Lowe 253-841-8872					
BUSINESS (MAILING) ADDRESS:					
7608 25# 5750 Pujallyp.	WA 78374				
PHYSICAL ADDRESS: (street address, if different) Same					

			T OF DUONICS	C CTDUCTURE	
	(ahaal	TYP individual	E OF BUSINES	S STRUCTURE ership/corporation in	formation)
1 INDIVIDUAL		TNERSHI	P CORPORA	ATION (LP, LLP, LLC)	
M HADIAIDOVE		4 hay) 4 💝 / 111	STATE OF	INCORPORATION	
NAME	TITL	<u>E</u>	ADDRE	<u>ss</u>	STOCK DISTRIBUTION OR PERCENTAGE OF SHARE
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		TD	ANGEED OF DE	RMIT NUMBER	
O	otion if you	en transfe	rring an existing pe	mit to a new owner.	List name of <u>current</u> permit
Complete this se holder and perm of the permit num	it number to	be transfe	rred. The current p	permit holder must si	gn below to authorize the transfe
NAME ON PERM	MIT:		nlA	PEF	RMIT NUMBER:
		1			Date
Signature of cu	rrent permit	holder	CE DECUIDES	MENTS (must chec	
	A pe	rmit will no	ot be issued until a	ceptable insurance	s received
You will not he		You wi	ll not haul	☐ You will haul	Li You will haul
hazardous mate			s materials in	hazardous material	
quantity. You wi	ll only	any quan	tity. You will	requiring \$1 million	in requiring \$5 million in Public Liability and
operate vehicles		operate v	rehicles with a	Public Liability and Property Damage	Property Damage
GVWR of less th			f 10,000 pounds You must obtain	Insurance. You mu	
pounds. You mu			in Public Liability	complete Part C, S	V
\$300,000 in Pub			erty Damage	1 and 2.	Sections 1 and 2.
and Property Da Insurance, You			e. You must	, 4,14 2.	
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ueed to combier	MOTO	R VEHI	CLE LIST (Attac	h additional pages	If necessary)
UNIT#		OR VEHICLE LIST (Attach additional pages if necessary) NSE# STATE VIN#		VIN#	
mal .	399239	11	WA	1XKT049x	(645) 397906
	07/27/	<u> </u>			
			Clane		
			Signa	I CUI O	
l as englisant	understen	d that the	filing of this appli	ication does not in	itself constitute authority to
	4	stiana ma	v ha canducted u	nfii a nermit is rece	
hereby declar	e and affirm	that the	information conta	ined in this applica	tion is true to the best of my
knowledge an	d belief.				
-					
- James	11.7				08-11-2013
Jone (Signal	ruro(e)			08-11-2013 Date
/	aign#i	M1 & (9)			
Received Time	Aug. 14. 20	13 9:33A	M No. 0187 5		

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.

Controlled Substances and Alcohol Testing		
Name: Posert Lowe	Position:	owner
Any driver who operates a vehicle that meets the must have a valid CDL. The definition of a comme has a gross combined weight rating of 26, weight rating of more than 10,000 pounds has a gross vehicle weight rating of 26,00 is designed to transport 16 or more passe is of any size and is used to transport haz hazardous materials regulations. Any person who drives a commercial motor vehicle and alcohol testing program as required by FMCS in WAC 446-65-010.	ercial motor verticle is ,001 pounds that incli ;; or in pounds or more; or engers, including the eardous materials of a	driver; or amount that requires placarding under a participate in a controlled substance
Commercial Driver	s License (CDL) R	equirements
Name: Robert Lowe	Position:	Dunch
Any driver who operates a vehicle that meets the	definition of a comm	nercial motor vehicle as described below Department of Licensing. The definition of

must have a valid CDL, as required by the Washington State Department of Licensing. The 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.

	Driver Qualification Requirements		
Name: Robert	Lowe	Position: OWNER	
Each company must movehicles as required by	aintain a complete Driver FMCSR Part 391.51 and	Qualification File for each employee authorized to drive motor by the WSP in WAC 446-65-010. Owner/operators that work ngton have limited exemptions. Owners/operators that conduct ete file on themselves and any other driver that they may use.	
		rs Hours of Service	
Name: Robert	Lowe	Position: Ocener	
		e hours of service records for each individual that drives a motor Part 395.1(e) and by the WSP in WAC 446-65-010.	
	Vehicle Inspect	ion, Repair, and Maintenance	
12 . h. t		Position: cxunex	
company must mainta FMCSA in 49 CFR, Pa Identific The na A record	in certain required record art 396.3 and by the WSF cation of the vehicle. Iture and due date of varion and of inspections, repairs to conduct periodic inspection	i and by the WSP in WAC 446-65-010. In addition, each is for each vehicle that includes the following, as required by the in WAC 446-65-010: ous inspection and maintenance operations to be performed, and maintenance indicating their date and nature. Ins as required by the FMCSA in 49 CFR, Part 396.17 and by the	
		Signature	
My signature belo	w certifies that I unde a safety requirements	rstand my responsibility as a motor carrier and I will which apply to my operations.	