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PART A	TV#_/3158
WASHINGTON UTILITIES AND TRANSPORTATION 1300 S Evergreen Park Dr SW, PO Box 47250, Olympia Telephone (360) 664-1222 - Fax (360) 586-1000 Carrier Operating Aution APPLICATION FOR PERMIT (excluding Household Goods and Common Carrier Brown Household Goods and Common Carrier Brown Carr	a, WA 98504-7250 1181 hority
FOR OFFICIAL USE ONLY	Carrier ID#:
Digital Vaca	mployee:
TYPE @F APPLICATION (check one) New Common Carrier Permit Authority, or Extension of Com	nmon Carrier Permit Authority
Transfer of Existing Permit Number	inion Carner Femilic Authority
	RAL COMMODITIES, Including DRED CAR SERVICE
	RAL COMMODITIES, Including
\$275 GENERAL COMMODITIES, Including \$100 GENE	ERAL COMMODITIES, including RDOUS MATERIALS and ARMORED CAR
\$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 Usa emy:
THE OF PAYMENT	
☐ Check ☐ Money Order ☐ Amex ☐ Discover ☐ Mastercard ☑ Visa	Expiration Date
CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the that I am authorized to execute and file this document on behalf of the applicant, and the valid.	following information is true and correct, at all information on file is current and
Name (printed): 8-6	26-13
Signature: Title: 1/1004	resident
CC#: / - \n 7 US DOT# - \	CINESS IDENTIFIED (UR) #
1000 100 100 100 100 100 100 100 100 10	SINESS IDENTIFIER (UBI) #
APPLICANT NAME: PHON B.D. AIR Freight, INC 253	1E#: 926 8326
d/b/a: FAX #:	
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) 2004 48 A18 Court Bas (city, state, zip)	39268237
(street address, P.O. Box) 3009 98 714 COUT 1305 (city, state, zip)	t ste A
Fife, wa 98424	
PHYSICAL ADDRESS: (street address, if different)	
Same	

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				SS STRUCTURE	
☐ INDIVIDU		RTNERS	HIP X CORPO	RATION (LP, LLP, LLC) OF INCORPORATION)
NAME	T IT	ı F	ADDR		STOCK DISTRIBUTION OR
Bruce 1		reside	1 2004.	48+ AUR CT E IFE WA 98424	PERCENTAGE OF SHARE
	ence but		ce frombent	same	49
10.		TE	angeroer	erma number	
holder a	section if you a and permit nur of the permit	are transfe	erring an existing p	ermit to a new owner.	List name of <u>current</u> permit must sign below to authorize the
NAME ON PER	RMIT:			PER	MIT NUMBER:
Signature of c	urrent permit l	holder			Date
	it e de la	VSULEAN The William	NGERIOURIEN Onderscheining	VENTS (must check coepiable insurance is	ione).
You will not it hazardous mate quantity. You we operate vehicle GVWR of less to pounds. You me \$300,000 in Pul and Property De Insurance. You need to complete	naul prials in any ill only s with a han 10,000 ust obtain olic Liability amage do not te Part B.	☐ You wind hazardou any quan operate vor GVWR of or more. `\$750,000 and Proposition of the complete of the co	ill not haul us materials in utity. You will vehicles with a f 10,000 pounds You must obtain in Public Liability erty Damage 2. You must Part B.	You will hau! hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sec 1 and 2.	hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.
UNIT#	LICENS		STATE		VIN#
	Bldg75	4A	wa	J8DC4B	16067012020
Property Commencer			en Signal	Units of the state	
l, 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.					
A	497				8-26-13
MJ	Signature	r(S)	_		Date

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., Sulte 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.

	llead ^{er} Sontall	ed Substances and Alcohol Testing
Name: Bruce	Aldrich	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.

	Commerci	al Drivers License (CDL) Requirements
Name: Bruce	Aldrich	Position: Prosident

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.

	in in Merceual (real)	n Regulæments 🗊		
Name: Bruce Aldi	1Ch	Position: P05		
vehicles as required by FMC exclusively in intrastate com-	SR Part 391.51 and by the ' merce within Washington ha	WSP in WAC 446-65-0 ave limited exemptions.	ployee authorized to drive motor 10. Owner/operators that work Owners/operators that conduct other driver that they may use.	
		eof Service		
Name: Bruce Ala	rich	Position: Pres	dent	
Each company must maintain vehicle as required by the FM	n true and accurate hours of ICSA in 49 CFR, Part 395.1	service records for ea (e) and by the WSP in	ch individual that drives a motor WAC 446-65-010.	
	Vehicle Inspection Rec	etr and Maintenan	el la	
Name: Bruce A.		11	oldent	
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.				
	on formula de l'acceptant de la company		and the second of the proposed of the second	
	Signat	ure with the little		
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			7-76-13 Date	