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	PART	A		TV# 13/6/
WASHINGTON	UTILITIES AND T	TRANSPORT	ATION COM	AMISSION
1300 S Evergre	n Park Dr SW, PO	Box 47250 Ok	MUUN CUN 89 AW sinm	504-7250 1 <b>2</b>
; l' <del>(</del>	Pphone (360) 664-12	222 – Fax (360)	586-1181	304-1230 all
Intr	astate Common Ca	rrier Operating	Authority	Mass,
Colo	APPLICATION	N FOR PERM	AIT	0.00
	luding Household Goods	ALUSEONLY	rier Brokers)	
Reception Number: 04550			- Carrier ID#:	94/2
111 0268 200 02 275.00	Insurance:	unc	Employee:	THE
	TYPE OF ARPLIE	ATION (check		
New Common Carrier Per	nit Authority, or			rier Permit Authority
Transfer of Existing	Permit Number		COMMINON ÇEN	There is entitle Additionity
\$275 GENERAL COMMO	ITIES ONLY	\$100	GENERAL COMM ARMORED CAR S	MODITIES, including ERVICE
\$275 GENERAL COMMODE ARMORDED CAR SER	ICE	\$100	GENERAL COMM HAZARDOUS MAT	MODITIES, including
\$275 GENERAL COMMON HAZARDOUS MATERI	TIES, including LS		GENERAL COMI HAZARDOUS MATE SERVICE	MODITIES, including RIALS and ARMORED CAR
\$275 GENERAL COMMOD HAZARDOUS MATERIA SERVICE	TIES, INCLUDING and ARMORED CAR			
\$100 REINSTATEMENT OF (Must be filed within 10 months	or cancellation)		<b>VI</b> IT For a	Commission Use Only:
□ Check □ Moss ○ □	TYPE OF I			
The street of th	hey Dispover M	Mantaner ⊓ Vice	Ext	piration Date
055	11		1	
CERTIFICATION: I, the undersi that I am authorized to execute valid.	ed, under penalty for false d file this document on bel	statement, certify the half of the applicant,	at the following info and that all informa	rmation is true and correct, tion on file is current and
Name (printed): Rosalin da	eucs	Date:	1/6/13.	
Signature:	•	Title:	Bookkeene	0
	MOTOR CARRIER	IDENTIFICATION	ON	
CC#: 607 14 US DO				ENTIFIER (VBI) #:
<u> </u>	5676	60		050
APPLICANT NAME:			HONE#:	
d/b/a:	reizes		509-7U	0-1537
PIC Transport	+ ~	F	AX #:	- 0.77-
BUSINESS (MAILING) ADDRE	- A	<del></del>	509-71d	>-9710
PO Box 2151	Warden	DA 988S	57	
PHYSICAL ADDRESS: (street a	dress, if different)	300 S Fir	Warden	WA 98857
	4_	<u></u>		
Received Time Aug. 26. 2013	   4:58PM No. 0385			
1 I				

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

Signature(s)

8-20-13

## PART B

## SAFETY FITNESS SURVEY FOR ALL APPLICAINTS 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 (W\$P) 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 Associated, 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., \$103 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 564-2333. Willamette Traffic Bureau, 1630 NE Cameron Blvd, Portland, OR 97230-5630, www.wtbtraffic.com, (503) 236-1183.
- US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.

## Confrolled Substances and Alcohol Testing

Position: DOEKKLODE 12

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 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

Position:

Any driver who operates a vehiclathat 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 15 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: Apalmaa Ho	Position: Bookkeeper
exclusively in intrastate commerce	npiete Driver Qualification File for each employee authorized to drive motor to 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work within Washington have limited exemptions. Owners/operators that conduct tain a complete file on themselves and any other driver that they may use.
	Drivers Hours of Service
Name: Junia Cardos	Jeyes Position: Owner
Each company must maintain true a vehicle as required by the FMCSA i	nd accurate hours of service records for each individual that drives a motor 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.
Vehic	e Inspection, Repair, and Maintenance
Name: June Cardos I	eys Position: <u>Fioner</u>
required by the FMCSA in 49 CFR company must maintain certain requirements of the view of the part of	
All companies must conduct periodic WSP in WAC 446-65-010.	inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the
	Signature
My signature below certifies the comply with all the safety requi	at I understand my responsibility as a motor carrier and I will rements which apply to my operations. $8-70-13$
Signature of applicant	Date
Received Time Aug. 26. 2013	4:58PM No. 0385
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