

TG-131946



RECEIVED

OCT 11 2013

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE TO OPERATE AS A SOLID WASTE COLLECTION COMPANY UNDER CHAPTER 81.77 RCW

1300 South Evergreen Way, Drive SW
P.O. Box 47250
Olympia, WA 98504-7250

PHONE 360-664-1222
FAX 360-586-1181
TTY 360-586-8203 TTY TOLL FREE 1-800-416-5289
WEBSITE: www.utc.wa.gov
The UTC has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1133.

WASH. UT. & TP. COMM

| Type of Solid Waste Authority Requested | Fee Required |
|--|--------------|
| <u>Expedited Temporary Authority</u> (to meet an urgent need for up to thirty days) - Complete entire application and Attachment A (WAC 480-70-136) | \$ 25 |
| <input type="checkbox"/> <u>Temporary Authority</u> (to meet an immediate or urgent need) – Complete entire application and Attachment A | \$ 25 |
| <u>New Permanent Authority</u> (including extension of authority)– (check appropriate box below) Complete entire application and submit a proposed tariff as outlined in the standard tariff form | \$200 |
| <input checked="" type="checkbox"/> New Certificate | |
| <input type="checkbox"/> Extension of Existing Certificate No. G- _____ | |
| <u>Permanent Authority to Transfer</u> (WAC 480-70-090) (check appropriate box below) – Complete entire application and Attachments B | \$200 |
| <input type="checkbox"/> All of Certificate No. G- _____ | |
| <input type="checkbox"/> Portion of Certificate No. G- _____ | |
| <input type="checkbox"/> <u>Reinstatement of Cancelled Certificate</u> (must be filed within 30 days of cancellation) –Include a statement justifying the reinstatement and complete sections 1, 2 and 8 | \$200 |
| <input type="checkbox"/> <u>Name Change</u> – does not include changes resulting in change in ownership – Complete section 1 and Attachment C | \$ 35 |
| <input type="checkbox"/> <u>Mortgage of Certificate</u> – Complete section 1 and Attachment D | \$ 35 |
| <u>Lease of Authority</u> – Complete entire application and Attachment B | \$200 |
| <input type="checkbox"/> All of Certificate | |
| <input type="checkbox"/> Portion of Certificate No. G - _____ | |

SECTION 1 – APPLICATION INFORMATION

| | | |
|---|------------------------------|--|
| Name of Applicant: Everett Fuel & Lumber Distributors, Inc. | | |
| Trade Name(s) (if applicable): | | |
| Phone Number: (360) 659-6223 | Fax Number: (360) 659-4383 | E-Mail: rhgentry@clearwire.net |
| Business Address | | Mailing address (if different from Business Address) |
| Street 7300 112TH ST NE | | Street |
| City Arlington | | City |
| State/Zip WA 98223 | | State/Zip |

| FOR OFFICIAL USE ONLY | | | |
|-----------------------------|---------------------|---------------------|------------------|
| Date Filed: 10/15/13 | Docket #: TG- | Tariff: | Permit Issued G- |
| Staff Assigned: [Signature] | Insurance | ID#: M33055 | Map: |
| DOL/SOS [Signature] | Reception #: 046489 | 227-02: 200-032-05: | Related App ID: |

Type of business structure:

Individual Partnership Corporation Other (LP, LLP, LLC) _____

UBI No. C601-706-859 *ew*

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

| <u>Name</u> | <u>Title</u> | <u>Stock Distribution or Percentage of Shares</u> |
|---------------|----------------|---|
| Dalton Gentry | President | 40% |
| Ron Gentry | Vice President | 30% |
| Evelyn Hanson | Secretary | 30% |

Indicate below the commodity to be hauled and the territory in which you wish to operate. **PLEASE NOTE** Territory must be described using boundaries such as streets, avenues, roads, highways, townships, ranges, city limits, county boundaries or other geographic descriptions. In addition to describing the territory, you must file a map that meets the requirements of WAC 480-70-056 and clearly shows the described territory.

We will be hauling recycling materials from CDL Recycle, located at 7201 E Marginal Way South, Seattle, WA 98108 to Anderson Rock, located at 41 Rocky Top Rd Yakima, WA 98908.

State below the conditions that justify the granting of this application. If you are applying for temporary certificate authority, be sure your statement addresses and supports the question of "immediate and urgent need."

Drywall Recycling Services Inc. requested our services to haul recycling material from CDL Recycling, Seattle WA to Anderson Rock, Yakima WA.

What is your USDOT number: **537450** *ew* If you currently don't have one, you can go online and apply at www.fmcsa.dot.gov/online-registration or contact (360)596-3812 for assistance.

Do you currently hold, or have you ever held, a solid waste certificate?

No Yes If yes, please indicate your certificate number: G-_____

Have you ever applied for and been denied a certificate to transport solid waste?

No Yes If yes, please explain: _____

Please tell us about your experience and knowledge of transportation or solid waste, including motor carrier driver and equipment safety requirements.

We have been operating as a Common Carrier for over 40 years. We have maintained our fleet of trucks and our driver personnel according to all DOT and Federal Motor Carrier Safety Regulations. We have maintained a Satisfactory safety rating throughout our entire history in the transportation business.

Have you been cited for violation of state laws or Commission rules? No Yes

If yes, please explain _____

SECTION 3 – RATES AND TARIFFS

Is this application to operate under a contract?

No Yes If yes, submit the original or a duplicate original of each contract under which service will be performed. The contract must contain all the elements stated in WAC 480-70-146.

If this application is for temporary authority, a new certificate, or extension of existing certificated authority, you must attach two copies of your proposed tariff using either the standard tariff format included in this package, or an approved alternate format. All tariffs submitted must comply with the provisions of WAC 480-70-226 through WAC 480-70-351.

If this application is a transfer or a lease of authority from an existing certificate, you must either file a new tariff at the same rate levels as on file, or you must adopt the current certificate holder's tariff. To file a new tariff, use the standard tariff format attached to this application or an approved alternate format. Indicate which option you will use:

- Adopt
 File a new tariff

SECTION 4 – FINANCIAL STATEMENT

You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available.

| ASSETS | | LIABILITIES | |
|----------------------|-------------|--|-----------|
| Cash in Bank | \$ Attached | Salaries/Wages Payable | \$ |
| Notes Receivable | \$ | Accounts Payable | \$ |
| Accounts Receivable | \$ | Notes Payable | \$ |
| Investments | \$ | Mortgages Payable | \$ |
| Other Current Assets | \$ | Contracts and Bonds Payable | \$ |
| Prepaid Expenses | \$ | TOTAL LIABILITIES | \$ |
| Land and Buildings | \$ | NET WORTH | |
| Trucks and Trailers | \$ | Preferred Stock | \$ |
| Office Furniture | \$ | Common Stock | \$ |
| Other Equipment | \$ | Retained Earnings | \$ |
| Other Assets | \$ | Capital | \$ |
| TOTAL ASSETS | \$ | TOTAL LIABILITIES AND NET WORTH | \$ |

SECTION 5 – EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheets if necessary). Vehicles must pass inspection and be issued a valid Commercial Vehicle Safety Alliance inspection decal before your application may be granted.

| Year | Make | License Number | Vehicle ID Number | Gross Vehicle Weight | Type of vehicle |
|------|---------|----------------|-------------------|----------------------|------------------------|
| 2003 | 9900I | B89010G | 3HSCHAPR43N055716 | 105,500 | INTERNATIONAL TRI-AXLE |
| 2005 | 9900I | A43559Z | 3HSCHAPR65N030223 | 105,500 | INTERNATIONAL TRI-AXLE |
| 2005 | 9900I | B55368B | 3HSCHAPR85N030224 | 105,500 | INTERNATIONAL TRI-AXLE |
| 2001 | TRAILER | 4219PB | 1PLE053491PC29385 | | PEERLESS LIVE FLOOR |
| 2002 | TRAILER | 4225PB | 5DN1453462B000426 | | WESTERN LIVE FLOOR |
| 1999 | TRAILER | 8734RK | 1PLE0534XXPF29400 | | PEERLESS LIVE FLOOR |
| 2005 | TRAILER | 0011SE | 1PLE053435PM54288 | | PEERLESS SHUFFLE FLOOR |
| 2006 | TRAILER | 2083VA | 1PLE053496PH54776 | | PEERLESS LIVE FLOOR |
| 2009 | TRAILER | 5719YA | 5DN1553499B000119 | | WESTERN EXPRESS |

SECTION 6 – SAFETY AND OPERATIONS

In each of the categories show below, list the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State laws and rules. Please refer to the WAC rules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVERS LICENSE (CDL) REQUIREMENTS (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle must have a valid CDL.

Name: RON GENTRY

Position: MANAGER

DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: RON GENTRY

Position: MANAGER

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: RON GENTRY

Position: MANAGER

CONTROLLED SUBSTANCES AND ALCOHOL TESTING (Part 382) All persons who drive commercial vehicles requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirements (49 CFR Part 382 and 49 CFR Part 40).

Name: EVELYN HANSON

Position: OFFICE MANAGER

INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.

Name: GENE PIERSON

Position: MECHANIC

OPERATIONAL RESPONSIBILITIES

List the person and/or position responsible for understanding and complying with the requirements of each category shown below.

TARIFF RATES AND CHARGES (WAC 480-70-226 through WAC 480-70-351) Companies must file with the Commission a tariff showing all rates and charges it will charge its customers, together with rules that govern how rates and charges will be assessed.

Name: RON GENTRY

Position: MANAGER

ANNUAL REPORTS and REGULATORY FEES (WAC 480-70-071 & 076) Companies must annually file a report of their financial operations and pay regulatory fees.

Name: RON GENTRY

Position: MANAGER

BIOMEDICAL WASTE (WAC 480-70-426 through 476) Companies that transport biomedical waste must handle and transport that waste according to the appropriate requirements of the federal hazardous materials regulations (49 CFR Parts 170-189) and the additional requirements in these rules.

Name: N/A

Position:

CUSTOMER SERVICE –Person responsible for customer service complaints, customer notice requirements, and compliance with county solid waste plans.

Name: RON GENTRY

Position: MANAGER

STATE OF WASHINGTON – general laws, rules and regulations: Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the state of Washington, such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue, Internal Revenue Service (taxes); and Employment Security.

Name: RON GENTRY

Position: MANAGER

SECTION 7 – HEARING INFORMATION

If the Commission assigns this application for formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.

Number of witnesses: 5-10

Amount of time: 0-60 MINUTES

Will an attorney be representing you? If yes, complete the following:

Attorney's name: IF NEEDED

Attorney's phone number:

Attorney's address:

Fax Number:

Street

E-mail:

City, State, Zip

TYPE OF PAYMENT:

Check Money Order AMEX Discover MasterCard Visa

Credit Card Information:

Expiration Date:

Amount: \$200.00

693604

SECTION 8 – DECLARATION OF APPLICANT

I understand that filing this application **does not** in itself constitute authority to operate as a solid waste collection company.

As the applicant for a solid waste collection company certificate, I understand the responsibilities of a solid waste collection company, and I am in compliance with all local, state, and federal regulations governing business in the state of Washington.

I certify under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

I certify that I am authorized to execute and file this document.

Printed name of applicant: Ron Gentry

Signature of Applicant: Ron Gentry

Date, County, State: October 9, 2013, Snohomish County, Washington

1:54 PM

10/09/13

Accrual Basis

Everett Fuel & Lumber Dist., Inc.

Balance Sheet

As of August 31, 2013

| | <u>Aug 31, 13</u> |
|---|----------------------------|
| ASSETS | |
| Current Assets | |
| Checking/Savings | |
| 103-01 · Quarterly Accrual Acct | 11,000.00 |
| 103-02 · Cash in Bank - Fir Island | 10,732.87 |
| 103-08 · Checking - Banner | 23,323.67 |
| 103-09 · Savings - Banner Bank | 48,806.89 |
| Total Checking/Savings | 93,863.43 |
| Accounts Receivable | |
| 134-01 · A/R Hire B-7 | 217,788.61 |
| 138-02 · A/R - Farm (Fir Island) | 48,649.38 |
| Total Accounts Receivable | 266,437.99 |
| Other Current Assets | |
| 200-01 · Pre-Paid Property Taxes | -198.56 |
| 200-02 · Pre-Paid Auto Insurance | 5,857.59 |
| 200-03 · Pre-Paid Highway Use | -550.05 |
| 200-04 · Pre-Paid Business Insurance | 4,306.34 |
| Total Other Current Assets | 9,415.32 |
| Total Current Assets | 369,716.74 |
| Fixed Assets | |
| 213-01 · Trucks | 3,821,141.12 |
| 215-01 · Office Equipment | 14,499.00 |
| 217-01 · Shop Equipment | 201,402.94 |
| 229-01 · Accumulated Depreciation | -3,110,682.00 |
| Total Fixed Assets | 926,361.06 |
| Other Assets | |
| 282-01 · Loan Fees | 62,718.90 |
| 285-01 · Amortization Of Loan | -24,520.00 |
| Total Other Assets | 38,198.90 |
| TOTAL ASSETS | <u>1,334,276.70</u> |
| LIABILITIES & EQUITY | |
| Liabilities | |
| Current Liabilities | |
| Accounts Payable | |
| 300-01 · Accounts Payable - Trade | 166,908.41 |
| Total Accounts Payable | 166,908.41 |
| Other Current Liabilities | |
| 328-01 · State Unemployment Tax Payable | 3,752.54 |
| 329-01 · Federal Unemployment Tax Pybl. | 7.11 |
| 330-01 · Labor & Industries Payable | 29,549.37 |
| 334-01 · Sales & B & O Tax Payable | 8,973.10 |
| 336-01 · Use tax payable | 3,381.61 |
| 390-01 · Current Portion - LTD | 176,000.00 |
| Total Other Current Liabilities | 221,663.73 |
| Total Current Liabilities | 388,572.14 |
| Long Term Liabilities | |
| 402-01 · Banner Bank - Loan | 86,109.71 |
| 405-01 · Banner Bank SBA-Loan | 975,672.40 |
| 490-01 · (Less) Current Portion LTD | -176,000.00 |
| Total Long Term Liabilities | 885,782.11 |
| Total Liabilities | 1,274,354.25 |
| Equity | |
| 495-01 · Common Stock | 103,176.93 |
| 498-01 · Retained Earnings | 40,999.05 |

1:54 PM

10/09/13

Accrual Basis

Everett Fuel & Lumber Dist., Inc.

Balance Sheet

As of August 31, 2013

| | <u>Aug 31, 13</u> |
|----------------------------|---------------------|
| Net Income | -84,253.53 |
| Total Equity | <u>59,922.45</u> |
| TOTAL LIABILITIES & EQUITY | <u>1,334,276.70</u> |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/9/2013

PRODUCER (425) 827-8774 FAX: (425) 827-5177
 Totem Agencies, Inc
 P O Box 3419
 Kirkland WA 98083-3419

INSURED
 Everett Fuel & Lumber Distributors, Inc
 7300 112th St NE
 Arlington WA 98223

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

| INSURERS AFFORDING COVERAGE | NAIC # |
|---|--------|
| INSURER A: American States Insurance Co | |
| INSURER B: | |
| INSURER C: | |
| INSURER D: | |
| INSURER E: | |

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR ADD'L LTR | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YYYY) | POLICY EXPIRATION DATE (MM/DD/YYYY) | LIMITS | | | | | | | | |
|-----------------------------|--------------|--|----------------------------|------------------------------------|-------------------------------------|---|---------------------|--------|--------------------|--------------|----------------------------|--------------|-----------------------------|--------------|
| A | | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | 01CI0834586 | 10/1/2013 | 10/1/2014 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 | | | | | | | | |
| A | | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Comp. Ded \$1,000 <input checked="" type="checkbox"/> Coll. Ded \$1,000 | 24CC3093031 | 10/1/2013 | 10/1/2014 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ | | | | | | | | |
| | | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$ | | | | | | | | |
| | | EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ | | | | | | | | |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below | WA Stop Gap 01CI0834586 | 10/1/2013 | 10/1/2014 | <table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTI-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$ 1,000,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 1,000,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 2,000,000</td> </tr> </table> | WC STATUTORY LIMITS | OTI-ER | E.L. EACH ACCIDENT | \$ 1,000,000 | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 | E.L. DISEASE - POLICY LIMIT | \$ 2,000,000 |
| WC STATUTORY LIMITS | OTI-ER | | | | | | | | | | | | | |
| E.L. EACH ACCIDENT | \$ 1,000,000 | | | | | | | | | | | | | |
| E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 | | | | | | | | | | | | | |
| E.L. DISEASE - POLICY LIMIT | \$ 2,000,000 | | | | | | | | | | | | | |
| A | | OTHER Motor Truck Cargo Contractor Equipment | 01CI0834586 01CI0834586 | 10/1/2013 10/1/2013 | 10/1/2014 10/1/2014 | Limit: \$50,000 \$1,000 Ded Limit: \$210,952 \$1,000 Ded | | | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Washington Utilities Hauling

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

J Parthemer/JDP *Jennifer D. Parthemer*

Tariff No. 1

Cancels

Tariff No. _____

of

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Name of Solid Waste Collection Company)

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Registered trade name of Solid Waste Collection Company)
Certificate Number G- _____

**NAMING RATES FOR THE COLLECTION, TRANSPORTATION, AND DISPOSAL OF
SOLID WASTE, AND IF NOTED, RECYCLING AND YARDWASTE
IN THE FOLLOWING DESCRIBED TERRITORY:**

(NOTE: If this tariff applies in only a portion of a company's certificate authority,
a map accurately depicting the area in which the tariff applies must be attached to the tariff)

Name of person issuing tariff _____

Mailing address of issuing agent: _____

City, State/Zip Code: _____

Telephone number, including area code: _____

FAX number, if any: _____

E-mail address, if any: _____

Official UTC requests for information regarding consumer questions and/or complaints should be referred to the following company representative:

Name: RON GENTRY
Title: MANAGER
Phone: 360-659-6223
E-Mail: rhgentry@clearwire.net
Fax: 360-659-4383

Issue date: _____

Effective date: _____

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Supplement(s) _____ is (are) the only
Supplement in effect at this time.

Supplement No. _____

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Name of Solid Waste Collection Company)

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Registered trade name of Solid Waste Collection Company)

Certificate Number G- _____

On and after the effective date hereof, the following supplemental provisions apply:

Name of person issuing supplement: _____

Mailing address of issuing agent: _____

City, State/Zip Code: _____

Telephone number, including area code: _____

FAX number, if any: _____

E-mail address, if any: _____

Issue date:

Effective date:

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Tariff No. 1

Cancels

Tariff No. _____

of

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Name of Solid Waste Collection Company)

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Registered trade name of Solid Waste Collection Company)
Certificate Number G- _____

**NAMING RATES FOR THE COLLECTION, TRANSPORTATION, AND DISPOSAL OF
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Name of person issuing tariff _____

Mailing address of issuing agent: _____

City, State/Zip Code: _____

Telephone number, including area code: _____

FAX number, if any: _____

E-mail address, if any: _____

Official UTC requests for information regarding consumer questions and/or complaints should be referred to the following company representative:

Name: RON GENTRY
Title: MANAGER
Phone: 360-659-6223
E-Mail: rhgentry@clearwire.net
Fax: 360-659-4383

Issue date: _____

Effective date: _____

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Supplement(s) _____ is (are) the only
Supplement in effect at this time.

Supplement No. _____

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Name of Solid Waste Collection Company)

EVERETT FUEL & LUMBER DISTRIBUTOR'S, INC.
(Registered trade name of Solid Waste Collection Company)

Certificate Number G- _____

On and after the effective date hereof, the following supplemental provisions apply:

Name of person issuing supplement: _____

Mailing address of issuing agent: _____

City, State/Zip Code: _____

Telephone number, including area code: _____

FAX number, if any: _____

E-mail address, if any: _____

Issue date: _____

Effective date: _____

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____



Directions to Anderson Rock & Demolition Pit

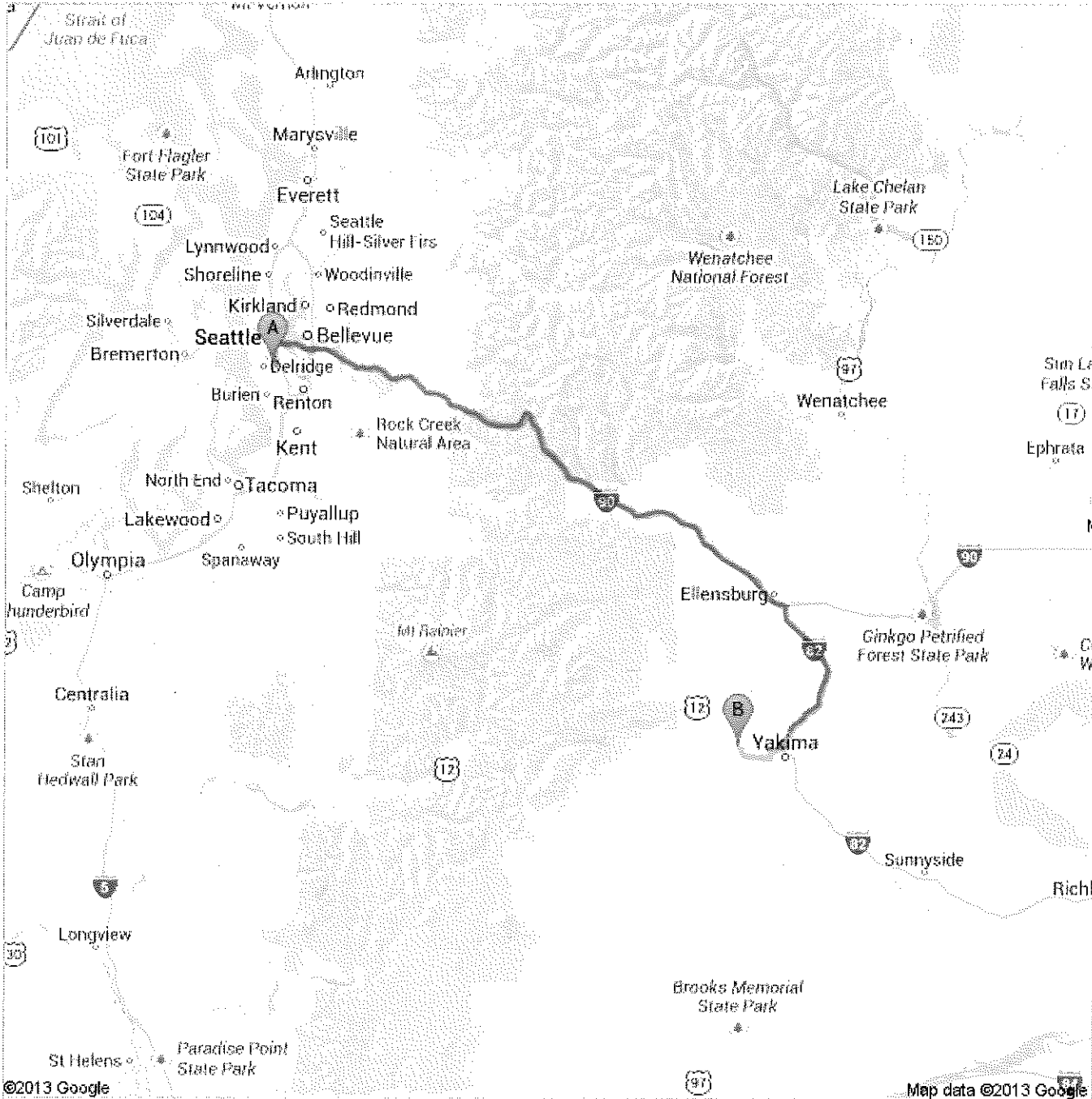
41 Rocky Top Rd, Yakima, WA 98908

154 mi – about 2 hours 28 mins

From:

CDL Recyclers

7201 East Marginal Way S, Seattle, WA 98108





EVERETT FUEL & LUMBER DISTRIBUTORS, INC.

Ron Gentry, General Manager
7300 – 112th Street N.E., Arlington, WA 98223
Tel: {360} 659-6223 ♦ Fax: {360} 659-4383

October 9, 2013

RECEIVED

Washington Utilities & Transportation Commission
1300 S. Evergreen Park Drive S.W.
P.O. Box 47250
Olympia, WA 98504-7250

OCT 11 2013

WASH. UT. & TP. COMM

Dear Sir/Madam:

Enclosed you will find our new application for a solid waste permit, two copies of the proposed tariff with map and proof of insurance. Please understand that we are providing commercial recycling transportation. Therefore, we only provided the first two pages of the tariff since the remaining pages do not apply.

We have been operating as a Common Carrier for over 40 years. We have maintained our fleet of trucks and our driver personnel according to all DOT and Federal Motor Carrier Safety Regulations. We have maintained a satisfactory safety rating throughout our entire history in the transportation business.

Over the years we have been operating in the forest products industry. The industry has declined severely over the past decade. Recently, we lost two of our biggest clients – Kimberly Clark and Sierra Pacific Industries. We were struggling to diversify and replace the loss of revenue and jobs when we were approached by Drywall Recycling Services to haul their recycling materials. They are in a growing industry and are unable to find trucking companies with sufficient capacity to haul for them. We are able to utilize our existing equipment for this hauling and put people back to work.

Thank you for your support and attention to this matter. Should you have any questions or require any additional information, please contact me at (360) 659-6223 or email: rhgentry@clearwire.net.

Respectfully Submitted,

A handwritten signature in black ink that reads "Ron Gentry". The signature is written in a cursive, flowing style.

Ron Gentry
Vice President/Manager