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WASH. UT. & TP. COMM

1300 South Evergreen Park Drive
 SW
 PO Box 47250
 Olympia, WA 98504-7250
 Phone (360) 664-1222
 Fax (360) 586-1181
 Web Site: www.utc.wa.gov

COMMON CARRIER OF PROPERTY
 (excluding Household Goods carriers and Brokers)

TV-132042

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE
FEE: \$50.00

Application for Change of Name or Business Structure may be used **ONLY** in the following circumstances:

- Changes of carrier's name, with no change in ownership or business structure.
- Change of business structure from individual to corporation to incorporate an individual's business when the individual is the majority stockholder or, by an individual to a partnership, when the individual is the majority partner or, from a corporation to a proprietorship of the majority shareholder or, by a partnership to a proprietorship of the majority partner.
- Change of name resulting from a change in business structure from a partnership to a corporation established to incorporate the partnership business, when the partners are the majority stockholders in the same proportionate ownership.
- Change of name resulting from a change in business structure from a corporation to another corporation where both corporations are wholly owned by the same stockholders in the same proportions.

TYPE OF PAYMENT

Cash Check Money Order AMEX MasterCard Visa
 Exp Date
 Credit Card Information (if applicable) Month/Year

Amount \$ _____ COMPANY NAME: _____

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.

Cardholder's signature: _____ Date _____

For Commission Use Only

111-0268-200-02	Received date: <i>11/4/13</i>	ID: <i>7567</i>
<i>047296</i>		Insurance: <i>OK</i>

B.C. Balmelli Trucking

Holder of Permit CC-56583 asks the UTC for authority to change the name of or the business structure of the carrier named below under 81.80 RCW and WAC 480-14 to:

NEW BUSINESS INFORMATION

7567

New Name: B.C. Balmelli Trucking, LLC	Phone #:360-740-6215
Trade Name:	Fax #:360-740-1559
Mailing Address:	Physical Address: (if different)
Street/P.O. Box P.O. Box 959	Street 113 Heden Rd
City, State Zip Chehalis, WA 98532	City, State Zip Chehalis, WA 98532

USDOT # 666683 *aw* (If you don't have one, you can apply online at www.fmcsa.dot.gov/online-registration or contact 360-596-3812 for assistance.)

Unified Business Identifier Number (UBI): 603 342 872 *aw*

Individual Partnership Corporation – State of Incorporation LLC - WA
(LP, LLP, LLC)

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
<u>Brian Balmelli</u>	<u>Pres</u>	<u>698 Hwy 603, Chehalis, WA 98532</u>	<u>100%</u>

CURRENT BUSINESS INFORMATION

5425

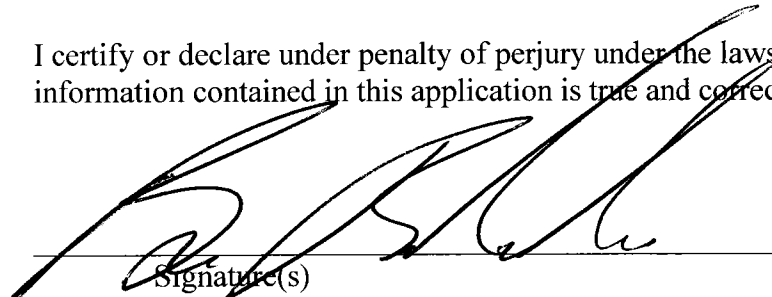
Current Name: Balmelli Contracting, Inc.	Phone #:360-740-6215
Trade Name:	Fax #:360-740-1559
Mailing Address:	Physical Address:
Street/P.O. Box P.O. Box 959	Street 113 Heden Rd
City, State Zip Chehalis, WA	City, State Zip Chehalis, WA 98532

Individual Partnership Corporation (LP, LLP, LLC) State of Incorporation LLC - WA

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
<u>Brian Balmelli</u>	<u>Pres</u>	<u>698 Hwy 603, Chehalis, WA</u>	<u>100%</u>

CERTIFICATION: Carrier affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. The undersigned applicant requests that the Commission enter an order granting its petition as provided in 81.80 RCW.

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


Signature(s)

10-31-13
Date

FORM E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE
(Executed In Triplicate)

AMENDED

Filed with Washington Utilities & Transportation Commission (hereinafter called Commission)
(NAME OF COMMISSION)

This is to certify, that the Sentry Select Insurance Company
(NAME OF COMPANY)
(hereinafter called Company) of 1800 North Point Drive, Stevens Point, Wisconsin 54481
(HOME ADDRESS OF THE COMPANY)

has issued to B.C. BALMEILLI TRUCKING, LLC
(NAME OF MOTOR CARRIER)
PO BOX 959 CHEHALIS WA 98532
(ADDRESS OF MOTOR CARRIER)


a policy or policies of insurance effective from 05/16/2013, 12:01 A.M. standard time at the address of the insured stated in said policy of policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at P.O. Box 8036, Stevens Point, WI 54481-8036
(STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

this 14TH day of NOVEMBER 2013



AUTHORIZED COMPANY REPRESENTATIVE

Insurance Company File No. CT788088-5012-131
(POLICY NUMBER)

MC 1633 (Ed. 8-99)

IRB 3539 B

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