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08/10/2008 08:58 FAX 3805481181 PART - A WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION 1300 S Evergreen Park Dr SW, PO Box 47250 Olympia, WA 98504-7250 Telephone (360) 664-1222 - Fax (360) 586-1181 Intrastate Common Carrier Operating Authority APPLICATION FOR PERMIT (excluding Household Goods and Common Carrier Brokers) DE CALLED **正月乙八日**第 Cerrier ID#: 7 W 047794 Employee: All Reception Number. 275.00 Insurance: N TYPE OF APPLICATION (check one) 111 0268 200 02 Extension of Common Carrier Permit Authority New Common Carrier Permit Authority, or Transfer of Existing Permit Number GENERAL COMMODITIES, including ARMORED CAR SERVICE 100 GENERAL COMMODITIES ONLY GENERAL COMMODITIES, including 女 HAZARDOUS MATERIALS \$100 \Box \$275 GENERAL COMMODITIES, including ARMORDED CAR SERVICE GENERAL COMMODITIES, Including MAZARDOUS MATERIALS and ARMORED CAR. ם 9100 \$275 GENERAL COMMODITIES, Including HAZARDOUS HATERIALS \$275 GENERAL COMMODITIES, INCLIDES HAZARDOUS MATERIALS and ARRESTED GAR. For Commission Use Only: SERVICE BENT OF CANCELLED COMMON CARRIER PERMIT ALITH #: \$100 REDISTATIONENT OF CAN (Most be Red within 10 months of eas TYPE OF PAYMENT Excitation Date Arnex. Discover N Mestercard Visa Money Order Check CERTIFICATION: I, the understand, under penelty for take eletement, certify that the following information is true and correct, that I am entired to execute any the this document on behalf of the applicant, and that all information on the is our rent and valid: 1 ARZA Dets: BODICICEEPER Name (printed): Title: MOTOR CARRIER IDENTIFICATION Signatures WA UNIFIED BUSINESS IDENTIFIER (UBI) #: us dot# CC#: HONE# APPLICANT NAME .Oc LZAZ d/b/a: BUSINESS (MAILING) ADDRESS (street address, P.O. Box) 93 YX (city, state, zip)

PHYSICAL ADDRESS: (street address, if different)

| | Drivers Hours of Service (Part 395) |
|---|--|
| NOACS | LI VELAZQUEZ Position: OWN EX |
| nch company must ma ives a motor vehicle. iver," a record of duty | Intain true and accurate hours of service records for each individual that the company's operations meet all requirements of the "100 air mile radius status is acceptable. A driver must complete a driver's daily log book when air-mile radius or he/she exceeds 12 hours. R. Part 395.1(e) and WAC 480-14-380 |
| | Service and Maketenance (Part 396) |
| | ELT VEAZOUEL Position: CWN EA |
| lame: HAC | ELT VEH 2002C Position: |
| Part 396.11 requires th | at drivers prepare a written "Driver Vehicle Inspection Report" on each vehicle drivers prepare a written "Driver Vehicle Inspection Report" on each vehicle drivers prepare a written "Driver Vehicle Inspection Report" on each vehicle of the required content of this report. The Part 396.11 for a description of the required content of this report. |
| ised each day. Kelei | maintain certain required records for each vehicle that includes the follow |
| Each motor carrier mul (see Part 396.3(b)). | Maintain certain requires |
| < identification | of the vehicle |
| anarotinna t | d by and and an analysis of the second analysis of the second analysis of the second and an analysis of the second and analysis of the second and an analysis of the second and an analysi |
| A moont of | be performed. Inspections, repairs and maintenance indicating their date and nature. |
| < A record of | imply with Part 396.17 dealing with Periodic Inspections. Each motor carried inspected, all motor vehicles subject to its control at least once during the |
| A record of All companies must or must inspect, or have preceding 12 months. | Inspections, repairs and maintenance included inspections. Each motor came imply with Part 396.17 dealing with Periodic Inspections. Each motor came inspected, all motor vehicles subject to its control at least once during the inspected, all motor vehicles subject to its control at least once during the |
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| All companies must companies must inspect, or have preceding 12 months. My signature below comply with all the | inspections, repairs and maintenance inspections. Each motor carried amply with Part 396.17 dealing with Periodic inspections. Each motor carried inspected, all motor vehicles subject to its control at least once during the inspected, all motor vehicles subject to its control at least once during the cartifies that I understand my responsibility as a motor carrier and I was safety requirements which apply to my operations. 11/19/13 Date |

PART - B

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SAFETY FITNESS SURVEY - SECTION 1 GENERAL SAFETY

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Regulations (FMCSR).

Copies of the FMCSR's are available from several vendors, these include, but are not limited to:

| J. J. Keller & | Ansociates, Inc. | 3003 W. Breezewood Lane, Neenah, William ME Compress Blad Confessed OR 9773 | sy, WA 98003, (600) 732-9019 or (253) 638-1650 54966 (677) 564-2333 0-5030, (503) 238-1183 , DC 20401 (868) 512-1600 or (202) 512-1800 | | | | | | |
|---|--|--|---|--|--|--|--|--|--|
| | | ntrolled Substances and Alcoho | | | | | | | |
| Name: | | 1 VEZAZQUEZPosition: | | | | | | | |
| Any pen Alcohol | son who drives Testing progra | a commercial meter vehicle requiring n that complies with the FMCSR in 49 | a CDL must be in a Controlled Substance and 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). | | | | | | | | | |
| | Com | nercial Drivers License (CDL) Re | quirements (Part 383) | | | | | | |
| Name; | ARACE | LI VELAZQUEZ Position | CWNER | | | | | | |
| must have a weig < has weig < has < is de < is of HM | a valid CDL. To a gross combing the rating of mo a gross vehicle asigned to trans any size and in regulations. | to definition of a commercial motor veloc design trating of 26,001 pounds that it than 10,000 pounds; or weight rating of 26,001 pounds or mo port 16 or more passengers, including used to transport hazardous material | it includes a towed unit with a gross vehicle re; or i the driver; or is of an amount that requires placarding under | | | | | | |
| (Definition shown above applies in reference to this section and that of controlled substance texting.) Contact local Department of Licensing office for additional infarmation | | | | | | | | | |
| | Driver Qualiffication Requirements (Part 391) | | | | | | | | |
| Name: | PLACEL | F VALAZQUEZ Position: | OWNER | | | | | | |
| casual, FMCSR | or intermittent) t Part 391.51 | authorized to drive motor vehicls. To | File for each employee (whether permanent, determine what information is required, review a within Washington have limited exemptions | | | | | | |
| that are | found in WAC | 480-14-370(7). Owners/operators tha | t conduct any Interstate operations must | | | | | | |

maintain a complete file on themselves and any casual or intermittent driver that they may use.

| TYPE OF BUSINESS STRUCTURE (check individual or complete partnership/corporation information) | | | | | | | | | |
|--|---|---|-----------------|--|---------------------------|--|--|--|--|
| | (Green | | | | | | | | |
| M INDIVIDUAL | □ PAR | NERSHIP CORPORATION - STATE OF INCORPORATION | | | | | | | |
| NAME | | MLE | STOCI | K DI | STRIBUTION OR PERC | ENTAGE OF SHARE | | | |
| NAME | | 15/AD | 012) | <u> </u> | INER 10 | 10 70 | | | |
| ARACEL: | | ELAZQUEZ OWNER 100 90 | | | | | | | |
| | | ED 6 | MACED OF DE | | NT NI IMPED | | | | |
| | | IRA | NSFER OF PE | .ru | II NUMBER | me of current permit | | | |
| Complete this section if you are transferring an existing permit to a new owner. List name of <u>current</u> permit holder and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number. | | | | | | | | | |
| NAME ON PERMIT | т. | | \sim | / | ∧ PERMIT N | MBER: | | | |
| NAME ON FERMI | '` | | | | | | | | |
| Signature of curre | nature of current permit holder Date | | | | | | | | |
| | IN | SURANC | E REQUIREM | ENT | \$ (must check one |) | | | |
| | (pet | , | | ept. | ible insurance is receive | | | | |
| The applicant WILL NOT HAUL hazardous materials in any quantity and WILL only operate vehicles less than 10,000 pounds gross weight rating—\$300,000 in Public Liability and Property Damage insurance is required. You do not need | | The applicant WILL NOT HAUL hazardous materials in any quantity — \$750,000 in Public Liability and Property Damage Insurance is required. Complete and submit the Safety Fitness Survey— Section 1. | | The applicant Will MAUL hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance and submit the Safety Fitness Survey Sections 1 and 2. | | The applicant WILL HAUL hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. Complete and submit the Safety Filness Survey — Sections 1 and 2. | | | |
| to complete the Sa | E ety | | | | | | | | |
| Fitness Survey. | <u> </u> | N IIDME | NT LIST /Attack | اسا | (itings) list if necessar | v) | | | |
| UNIT# | EQUIPMENT LIST (Attach additional list if necessary) UNITS LICEUSES STATE VINE | | | | | | | | |
| | | | WA | | IXPSDY9X8 | XD461465 | | | |
| | | | | | | | | | |
| I, as applicant, understand that the filling 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. | | | | | | | | | |
| | 5 | | | | | | | | |

7589

Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

Filed with the WASHINGTON UTILITIES & TRANSPORTATION COMMISSION-OPERATIONS DIVISION (hereinafter called Commission) of PO BOX 47250, OLYMPIA, WA 98504

This is to certify, that the United Financial Casualty Company (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to ARACELI VELAZQUEZ of PO BOX 353, OTHELLO, WA 99344-0000 a policy or policies of insurance effective from 11/16/2013 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled 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 cancelled 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 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143 this 2nd day of December, 2013

Insurance Company File No. CA 02485403

(Policy Number)

(Authorized Company Representative)

MC1633a(08/99)

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