

PART A

TV# 132180

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)

RECEIVED
NOV 25 2013
WASH. UT. & TP. COMM

FOR OFFICIAL USE ONLY

Reception Number: 047929 111 0268 200 02	Safety: 275.00	Carrier ID#: 75a6
	Insurance:	Employee: MD

TYPE OF APPLICATION (check one)

New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
<input type="checkbox"/> \$275 GENERAL COMMODITIES ONLY	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
<input checked="" type="checkbox"/> \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE	Pay ID# 7782

<input type="checkbox"/> \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation)	For Commission Use Only: Auth #:
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TYPE OF PAYMENT

Check Money Order Amex Discover Mastercard Visa Expiration Date

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.

Name (printed): Kristine Chumley Date: 11/18/13
Signature: Kristine Chumley Title: Sec / Trans

MOTOR CARRIER IDENTIFICATION

CC#: 65206	US DOT#: 144 8795 a	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 602-189-549 a
APPLICANT NAME: Scout Lake Construction Inc		PHONE#: 509 698-0752
d/b/a:		FAX #: 509 698-0751
BUSINESS (MAILING) ADDRESS: PO BOX 1060 Selah WA 98942		
PHYSICAL ADDRESS: (street address, if different) 830 Nagler Rd Selah WA 98942		

TYPE OF BUSINESS STRUCTURE

(check individual or complete partnership/corporation information)

INDIVIDUAL PARTNERSHIP CORPORATION (LP, LLP, LLC)
STATE OF INCORPORATION WA

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>STOCK DISTRIBUTION OR PERCENTAGE OF SHARE</u>
RODNEY CHUMLEY	PRESIDENT	830 Nagler Rd Selah WA	100
KRISTINE CHUMLEY	Sec/Treas	830 Nagler Rd Selah WA	0

TRANSFER OF PERMIT NUMBER

Complete this section if you are transferring an existing permit to a new owner. List name of current 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: _____ PERMIT NUMBER: _____

Signature of current permit holder _____

Date _____

INSURANCE REQUIREMENTS (must check one)

A permit will not be issued until acceptable insurance is received

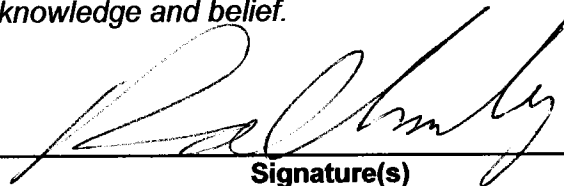
- | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage Insurance. You do not need to complete Part B. | <input type="checkbox"/> You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. You must obtain \$750,000 in Public Liability and Property Damage Insurance. You must complete Part B. | <input checked="" type="checkbox"/> You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2. | <input type="checkbox"/> You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

MOTOR VEHICLE LIST (Attach additional pages if necessary)

UNIT#	LICENSE#	STATE	VIN#
	see list		

Signature

I, 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.


Signature(s)

11/18/13
Date

SLC Heavy Trucks

Number	Vehicle	VIN	Lic Plate	Scale Wt	GWT/Tonage	GWT EXP
T1	2005 Peterbilt Tractor	1XPFD80X45D877113	B40840P	18212	10200	9/18/2014
T2	1993 Peterbilt Tractor	1XP8DB9X9PD326023	B96818B	18000	90000	11/8/2014
DT1	2004 Peterbilt Dump Truck	1NPAXB0X14D813251	B64754L	18289	105500	3/18/2014
DT2	2000 Kenworth Dump Truck	1NKDXB0X4YR867817	B11416U	25240	105500	9/2/2014
DT3	1993 Peterbilt Tractor (Dump Truck)	1XPAL69X0PD326705	A72946W	21400	100000	3/3/2014
DT4	1991 Kenworth Dump Truck	1NKDLR0X9MJ567350	B30236K	25640	96000	1/22/2014
DT5	1991 Autocar Dump Truck	4V2SCBCH2MU508219	B13581U	25180	60000	9/18/2014
DT6	2007 Peterbilt Dump Truck	1NPF140X07D733862	B44700Z	24500	105500	11/14/2014
FT1	1989 Ford N8F/TRK (Fuel)	1FDXR82A2KVA55611	B45124Y	16660	40000	10/14/2014
WT1	2005 Peterbilt Water Truck	2NPLLZ0X65M857576	B89402U	22760	60000	4/12/2014
	15001 2003 Chevrolet TRK/FB (Ill Brutis)	1GBE5E1123F513946	B133867	16400	26000	8/27/2014
#7	2007 Ford F550 (Mechanic)	1FDASF57P77EB48299	B58248D	11515	18000	12/31/2014

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., Suite 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.

Controlled Substances and Alcohol Testing

Name: Kristine Chumley Position: Sec/Treas

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.

Commercial Drivers License (CDL) Requirements

Name: Justin Door Position: Project Manager

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.

Driver Qualification Requirements

Name: JUSTIN DOOR Position: PROJECT MANAGER

Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.

Drivers Hours of Service

Name: JUSTIN DOOR Position: PROJECT MANAGER

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

Vehicle Inspection, Repair, and Maintenance

Name: JOE SCHANTZ Position: MECHANIC

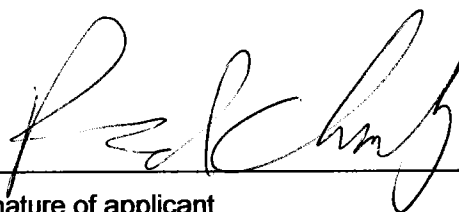
Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required 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.

Signature

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

11-18-13
Date

PART C – SECTION 1

SAFETY FITNESS SURVEY FOR HAZARDOUS MATERIALS APPLICANTS

Companies applying to transport hazardous materials must complete this survey.

1. Name the person or position responsible for maintaining and understanding current hazardous material regulations.

JUSTIN DOOR

2. Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600? Yes No

3. Are drivers trained in the use of Emergency Response Information? Yes No

4. Is the Emergency Response Information carried in the vehicle? Yes No

5. Name the person or position responsible for providing training to all employees handling hazardous materials as required by Title 49 CFR, Part 177.800 and 177.816.

JUSTIN DOOR

6. Are you familiar with accident reporting requirements in Title 49 CFR, Part 177, Subpart D? Yes No

7. Who is responsible for completing hazardous materials shipping papers?

Vehicle Driver

8. Where are hazardous material shipping papers located during transportation?

Within Reach of the buckled driver at right of Seat.

9. If you transport Radioactive Materials, name person or position that will be familiar with and provide training to employees for all transportation under CFR, Part 173, Subpart I - Radioactive Materials.

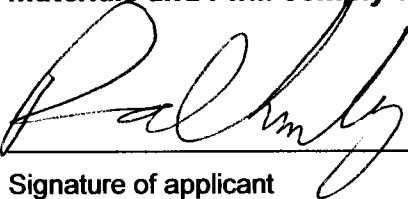
N/A

10. Please attach a copy of your US Pipeline and Hazardous Materials Safety Administration (PHMSA) permit.

N/A

Signature

My signature below certifies that I understand my responsibility as a transporter of hazardous materials and I will comply with all the safety requirements which apply to my operations.


Signature of applicant

11-18-13

Date

PART C – SECTION 2

HAZARDOUS MATERIALS QUESTIONNAIRE

Companies applying to transport hazardous materials must complete the following questions.

1. Please indicate if you plan to transport:

- | | | |
|-----------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| • Petroleum or petroleum products in bulk in tank-type vehicles | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Radioactive substances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| • Explosives | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| • Corrosives | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

2. As part of transporting any of these four materials, do you or your company intend to build, or have someone else build, install or otherwise create a new structure, or a new addition to an existing structure? Yes No

• If yes, does the proposed construction require a building permit by a city, county or other governmental agency? Yes No

• If yes, which governmental agency will issue the permit? _____

• If yes, please explain what you intend to build: _____

3. In granting an application for hazardous materials transportation, the commission is required to consider possible impacts such transportation may have on the environment. Please answer the following questions related to possible environmental impacts:

a. Do you understand you are required to comply with Washington State Patrol safety standards for hazardous materials transportation, as defined in WAC 446-65-010?

Yes No

b. Do you understand that you are required to comply with Washington State Patrol noise emission standards for commercial motor vehicles, as defined in WAC 446-65-010?

Yes No

c. Do you understand that in the case of a hazardous materials spill, you must immediately contact the local emergency services agency, such as the 911 operator?

Yes No

• If your answer to a, b, or c is no, please explain: _____

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

2598
Pending

Filed with Washington Utilities & Transportation Commission (herein after called Agency)
(Name of Agency)

This is to certify that the American States Preferred Insurance Company
(Name of Company)
(herein after called Company) of 350 E 96th St, Indianapolis, IN, 46240
(Home Address of Company)

has issued to SCOUT LAKE CONSTRUCTION INC (Name of Motor Carrier) of 830 NAGLER RD, SELAH, WA 98942
(Address of Motor Carrier)

A policy or policies of insurance effective from 11/21/2013 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 Agency has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Agency 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 effective by the Company or the insured giving thirty (30) days' notice in writing to the State Agency, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Agency.

Countersigned at 650 NE Holladay OR 97232 This 05th day of Dec 20 13
Portland (Address) (Day) (Month) (Year)

Insurance Company File No. 01-CI-616629 Jerry Strawn
(Policy No) (Authorized Company Representative)

Underlying Limit :0.00 Liability Limit :1,000,000.00