

PART A

TV# 13221

2001/004

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

	PLICATION ousehold Goods				
· · · · · · · · · · · · · · · · · · ·	FOR OFFICIA				
	fety: MD			Carrier	D#. 7599
111 0268 200 02 275, W Ins	surance:			Employ	iee: MD
TYPE	OF APPLICA	ATION	(check	(one)	
New Common Carrier Permit Au Transfer of Existing Perm		Exte	nsion c	of Common	Carrier Permit Authority
\$275 GENERAL COMMODITIES			\$100		COMMODITIES, including
\$275 GENERAL COMMODITIES, I ARMORED CAR SERVICE	ncluding		\$100		COMMODITIES, including SMATERIALS
\$275 GENERAL COMMODITIES, I HAZARDOUS MATERIALS	ncluding		\$100	GENERAL HAZARDOUS SERVICE	COMMODITIES, including MATERIALS and ARMORED CAR
\$275 GENERAL COMMODITIES, I HAZARDOUS MATERIALS and AR SERVICE			. =		,
\$100 REINSTATEMENT OF CANC (Must be filed within 10 months of cance		N CAR	RIER PE	RMIT	For Commission Use Only: Auth #: 0 0422
	TYPE OF	PAYN	IENT		
☐ Check ☐ Money Order ☐ Amex	☐ Discover ☐	Master	card 🖫 V	isa	Expiration Date
CERTIFICATION: I, the undersigned, understand that I am authorized to execute and file the valid. Name (printed):	der penalty for false nis document on be	e statem chalf of t	nent, certify the applica	int, and that all in $1/-26$	information on file is current and
Signature: LOW L- Mune	27		Title: /	TUCK	712
	OR CARRIER	IDEN	ITIFICA	TION	
cc#65204 us pot#	624			FIED BUSINE	ESS IDENTIFIER (UBI) #:
LEGAL NAME: `	U02				509-582-5177
d/b/a:				FAX #.	
BUSINESS (MAILING) ADDRESS:	506 S		VANO	COUVER	st.
PHYSICAL ADDRESS: (street addres	ss, if different)	32	66		
EMAIL ADDRESS:			•		
	4				

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			PE OF BUSINE				
M INDIVIDUA			al or complete part IIP CORPOR		ship/corporation information	on)	
		KINEKSH			NCORPORATION		
NAME	ш	TE 7.	J ADDRE	<u> 282</u>	STO	CK DISTRIBUTION OR RCENTAGE OF SHARE	
Jose I	Mynor	3 Truc	King 506	<u>, S</u>	VANCOUVERSE	COLITIAGE OF GITAINE	
			<u>Keni</u>	<u>10</u>	WICK WH 9933C		
On well and Alaka	17 76		ANSFER OF PI				
	nit number to				it to a new owner. List na mit holder must sign belov	w to authorize the transfer	
NAME ON PER	MIT;				PERMIT NU	JMBER:	
Signature of cu	irrent nermit	holder				Date	
Olghatare or ce			NCE REQUIRE	MEI	NTS (must check one)	Date	
	A pe	ermit will no	ot be issued until a	ccep	ptable insurance is receiv		
You will not h hazardous mate quantity. You wi operate vehicles GVWR of less to	erials in any Il only s with a nan 10,000	hazardou any quar operate v GVWR o	ill not haul us materials in ntity. You will vehicles with a f 10,000 pounds	ha rec Pu Pr	You will haul zardous materials quiring \$1 million in ablic Liability and operty Damage	☐ You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage	
pounds. You mu \$300,000 in Pub and Property Da Insurance. You need to complet	olic Liability amage do not e Part B.	\$750,000 and Prop Insurance complete		1 a	surance. You must implete Part C, Sections and 2.	Insurance. You must complete Part C, Sections 1 and 2.	
UNIT#	LICEN		STATE	II QL		/IN#	
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			Signa	tur	9		
operate and the	at no opera and affirm	tions may	be conducted ur	ntil a	on does not in itself cor a permit is received froi I in this application is tr	m the Commission. I	
Jose	Signatu	uwoz ire(s)	5			11-26-13 Date	

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.
- Willarnette 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: —	1056	2	MUNOZ	Position: Truck	DriveR	

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.

		Com	mercial Drivers Licen	se (CDL) Requirements	
Name: —	Jose	<u> </u>	MUNOZ	Position: Truck	Driver

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.

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		••	Driver Qualif	fication Requi	remen	ts		
Name: ————————————————————————————————————	OSL	<u>\</u>	Nyvoz	Position	u: —	Truck	C Dr	iver
ehicles as re exclusively in	equired by I	FMCSR P commerca	omplete Driver Q Part 391.51 and be within Washing aintain a complete	by the WSP in Witten that the interest in the	AC 446 exemp	i-65-010. (tions. Ow	Owner/openers/ope	perators that we rators that cond
	1.		Drivers	Hours of Serv	ice		7.	
Name:	ose	<u>)</u> W	JUNUZ	Positio	n:	ruck	Dri	vel.
Each compan rehicle as rec	ny must ma quired by th	intain true e FMCSA	e and accurate he A in 49 CFR, Part	ours of service re t 395.1(e) and by	ecords y the W	for each in SP in WA	ndividual C 446-65	that drives a m 5-010.
	1	Veh	nicle Inspection	n, Repair, and	Maint	enance		
lame:	os-e		MUNOZ	Positio	n:	Truch	<u> </u>	Sriver
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Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

7599 Pending

Filed with Washington Utilities and Transportation Commission (hereinafter called Commission)

This is to certify, that **State Farm Insurance Company** (hereinafter called Company)

Of Bloomington, IL has issued JOSE J MUNOZ, 506 S VANCOUVER ST, KENNEWICK, WA 99336 a policy or policies of insurance effective from 12-28-2012 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 1000 Wilmington Dr, DuPont, WA 98327 this 8TH day of January 2014

Insurance Company File No 193 7628-47 (Policy Number)

Dean Hosni (Authorized Company Representative)