

1300 S. E ergreen Park Dr. SW P.O. Box 47250

Olyn pia, WA 98504-7250 Phone: 360-664-1222

Fax: 360-586-1181 TTY: 360-586-8203 or

1-800-416-5289 e-mail; Transportation@utc.wa.gov

# APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICE CERTIFICATE

Application Fee and Initial Regulatory Fees due at time of application: \$200 PLUS \$25 PER VEHICLE

Passenger Charter and Excursion Carr	ier Services <u>Fee Required</u>
Application fee (Application for new certificate, to reinstate a previous) an existing certificate to a new owner or business struct	
Name Change (Application to change a company's corporate name, ch or change the surname of an individual owner or partne	
Regulatory Fee (per vehicle)	\$ 25.00
TYPE O	F PAYMENT
□ Cash □ Check □ Money Order  Credit Card Information (if applicable)	□ AMEX □ MasterCard ★ Visa  Exp Date  Month/Year
CERTIFICATION: I, the undersigned, under per	nalty for false statement, certify that the following ced to execute and file this document on be alf of the ent and valid.  Date: 12/5/12
(For Commission Use Only)  111 0268 232 01 200.00  (Company ID:  112 0268 232 01 200.00  Date Filed:	Docket TE- Safety Inspection:
<b>*VO45</b> 155	Page 2 of 3

DBCS

	<u> </u>	<u>ECTION 1 – A</u>	<u>PPLICAN</u>	T INFOR	<u>MATION</u>	<u>/</u>		
Name of	Applicant:_	Funk	Lay b	GOL	LC.			
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City	Ken	4	City	Ken	4		J30.	2
State/Zip	WA	98032	State/Zip	WA	982	030		
Phone Nu	mber: <u>20</u>	-914 35d	5 Fax Num	ber: <u>25</u>	3-37	3-1574		
UBI #:	<u> 03-30</u>	0-101 ON	E-Mail:_	dana	2dba	omp scr	y. Con	
Type of	f business s idual	tructure:  ☐ Partnership	□ Corp	oration	Othe	r (LP, LLP, LL	C)	
List the n		d percentage of pa	rtner's share	or stock dis	tribution fo	or major		
Jerr		(wayne) Sa	nyson	Title - mbe	mg e	Stock Distrib	· ·	
List other	r certificates o	or permits held wit	h the commi	ssion:			· · ·	
online at	USDOT #_www.fmcsa.c	24038/ lot.gov/online-regi e.)				ve one you car State Patrol at		
			N 2 – EQ	UIPMENT  if necessary)	<u>r</u>			
Licens	se Number	Year And Mak Vehicle		chicle ID Nu	ımber	Seating Capa	ity	
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#### <u>SECTION 3 – SAFETY AND OPERATIONS</u>

DBCS

In each of the categories shown 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 Guice to Achieving a Satisfactory Safety Rating" for assistance with requirements.

#### SARRINARESPONSIBILIDIES

- COMMERCIAL DRIVER'S LICENSE (CDL) STANDARDS REQUIREMENTS AND PENALTIES (Title 49, Code of Federal Regulations Part 383). If you operate commercial motor vehicles, your drivers must have a valid CDL.
- DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regula ions Part 391). Each of your drivers must meet minimum qualification requirements. You must maintain driver qualification files for each driver.
- DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395). Each of your drivers must maintain hours of service logs. You must maintain true and accurate hours of service records for each driver.
- CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code
  of Federal Regulations Part 382 and Part 40) If you operate commercial motor vehicle, your
  drivers must be in a Controlled Substance and Alcohol Use and Testing program. You must
  have a alcohol and controlled substances testing program.
- INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396). You must systematically inspect, repair and maintain all motor vehicles.
- SAFETY REGULATIONS, GENERAL (Title 49, Code of Federal Regulations Part 390). You must follow safety regulations.
- DRIVING COMMERCIAL MOTOR VEHICLES (Title 49, Code of Federal Regulations Part 392). You must follow regulations for driving commercial motor vehicles.
- PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393). You must maintain parts and accessories in safe condition.

Name: Jerriland Sampson	Position: mbe/max	
COPERATIONALR	ESPONSIBLE HEES	
List the person and position responsible for unde of each category shown below.	rstanding and complying with the requirer	ents
ANNUAL REPORTS AND REGULATORY pay regulatory fees by December 31 of each year	· · · · · · · · · · · · · · · · · · ·	rt and
Name: Jerriland Samoson STATE OF WASHINGTON GENERAL LAV	Position: mpe-mal.	
STATE OF WASHINGTON GENERAL LAY comply with the regulations of local, state, and for	VS, RULES AND REGULATIONS. Yo deral agencies such as, but not limited to:	must
Department of Labor and Industries, Department Revenue, Internal Revenue Service and Employr	of Licensing, Secretary of State, Departm	
Name: Ciriland Sampson	Position mbr/mer	

Revised 08-11

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### SECTION 4 – DECLARATION OF APPLICANT

I understand that filing this application does not in itself constitute authority to operate as passenger charter and excursion carrier.

**DBCS** 

As the applicant for a passenger charter and excursion certificate, I understand the responsibilities of a charter and excursion carrier, 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 Levelunds	angon & Dona B	ely POS
Signature of applicant Lengthern	ampon By Dana Brang	Lt 5
Date 12/5/13 Cour	nty, State King Wa	· .

Revised 08-11

## WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION P.O. BOX 47250 Olympia, WA 98504-7250

CHARTER AND EXCURSION REGULATORY FEE CALCULATION SCHEDULE

Company Name Fun /

In accordance with RCW 81.70.350 "Regulatory Fees", the Commission requires Charter and Excursion companies to file reports of the number of vehicles operated by the company and pay the sum of \$25 for each vehicle operated. There is a minimum fee of \$25.

1 Total number of vehicles operated

2 Total Regulatory Fees owed (enter amount from line 1)

8 × 25.00 = \$200

There is a minimum fee of \$25.00.

(For Commission Use Only) 001-111-02-68-232-01

Docket TE-

Certificate No:

Reception Number:

Revised 08-11

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