

140145

TV# 7672

PART A

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-47250

Telephone (360) 664-1222 – Fax (360) 586-1181

Intrastate Common Carrier Operating Authority

APPLICATION FOR PERMIT

(excluding Household Goods and Common Carrier Brokers)

RECEIVED

JAN 22 2014

WASH UT & TD COMM

| | | |
|---------------------------------|------------|--------------------------|
| Reception Number: 049040 | Safety: | Carrier ID#: 7672 |
| 111 0268 200 02 275.00 | Insurance: | Employee: MM |

| New Common Carrier Permit Authority, or Transfer of Existing Permit Number | Extension of Common Carrier Permit Authority |
|---|---|
| <input checked="" 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 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 | |

| | |
|---|---|
| <input type="checkbox"/> \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation) | For Commission Use Only: Auth #: 277209 |
|---|---|

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): NAVJOT SINGH Date: 01/20/14
 Signature: Navjot Singh Title: OWNER

| | | |
|-------------------|---------------|--|
| CC#: <u>65262</u> | US DOT# _____ | WA UNIFIED BUSINESS IDENTIFIER (UBI) #: <u>6033AS405</u> |
|-------------------|---------------|--|

| | |
|-------------------------------------|-------------------------------|
| APPLICANT NAME: <u>NAVJOT SINGH</u> | PHONE#: <u>(206)-778-5803</u> |
| d/b/a: <u>BAWA</u> | FAX #: _____ |

BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) 1429 32nd ST NE
 (city, state, zip) AUBURN, WA, 98002

PHYSICAL ADDRESS: (street address, if different)

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

NAME TITLE ADDRESS STOCK DISTRIBUTION OR PERCENTAGE OF SHARE

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

- | | | | |
|--|--|---|---|
| <input checked="" 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 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. |
|--|--|---|---|

| UNIT# | LICENSE# | STATE | VIN# |
|-------|----------|------------|-------------------|
| 1 | B748SSZ | WASHINGTON | JHMFA36297S015370 |
| | | | |
| | | | |
| | | | |

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.

Nguy T. Kim

 Signature(s)

01/20/14

 Date

