

**PART A**

TV# 190272

**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)

Reception Number: <u>049201</u>	Safety: <u>MD</u>	Carrier ID#: <u>7700</u>
111 0268 200 02 <u>2750</u>	Insurance:	Employee: <u>MJ</u>

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	

**\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT**  
(Must be filed within 10 months of cancellation)

For Commission Use Only:  
Auth #: 014615

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): Laura Gomez Date: 2-14-14

Signature: Laura Gomez Title: Common Carrier - POA

CC#: <u>65287</u>	US DOT# <u>1864919</u>	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: <u>602-905-373</u>
LEGAL NAME: <u>Carlos Antonio Diaz</u>		PHONE#: <u>509-839-7867</u>
d/b/a: <u>Diaz Trucking</u>		FAX #: <u>509-837-8229</u>
BUSINESS (MAILING) ADDRESS: <u>PO Box 1590 Sunnyside WA 98944</u>		
PHYSICAL ADDRESS: (street address, if different) <u>8108 Beauchene Rd Maryle City, WA</u>		
EMAIL ADDRESS: <u>98936</u>		



## 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.

Name: Carlos A Diaz Position: Owner

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.

Name: Carlos A Diaz Position: Owner

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.

Name: Carlos A Diaz Position: Owner

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.

Name: Carlos A Diaz Position: Owner

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.

Name: Carlos A Diaz Position: Owner

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.

***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.***

Gaura Gomez  
Signature of applicant

2/14/14  
Date

**PROGRESSIVE**

Progressive  
P.O. Box 94739  
Cleveland, OH 44101  
1-800-895-2886

**Policy number: 01308009-0**

Underwritten by:  
United Financial Casualty Company  
February 24, 2014  
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## Certificate of Insurance

**Certificate Holder**

WUTC  
1300 S EVERGREEN PARK DR SW  
OLYMPIA, WA 98504

**Insured**

CARLOS A DIAZ  
DIAZ TRUCKING LSE  
8108 BEAUCHENE RD  
MOXEE, WA 98936

**Agent**

TOW&TRUCK SPECIALIST  
747 ALPA DRIVE  
HIGHLAND HEIGHTS, OH 44143

This document certifies that insurance policies identified below have been issued by the designated insurer to the insured named above for the period(s) indicated. This Certificate is issued for information purposes only. It confers no rights upon the certificate holder and does not change, alter, modify, or extend the coverages afforded by the policies listed below. The coverages afforded by the policies listed below are subject to all the terms, exclusions, limitations, endorsements, and conditions of these policies.

Policy Effective Date: Jan 13, 2013

Policy Expiration Date: Jan 13, 2014

**Insurance coverage(s)**

**Limits**

Bodily Injury/Property Damage

\$1,000,000 Combined Single Limit

Motor Trucking Cargo

\$100,000 w/\$1,000 Ded

Refrigeration Breakdown Endorsement

\$100,000 w/\$2,500 Ded

**Description of Location/Vehicles/Special Items**

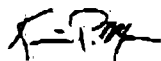
**Scheduled autos only**

2000 PTRB 379 1XP5DB9XZYD469115

**Certificate number**

05514JKA009

Please be advised that the certificate holder will not be notified in the event of a mid-term cancellation.



Form 5241 (10/02)