

UTILITIES AND TRANSPORTATION
COMMISSION

Olympia, WA 98504-1250
Phone: 360-664-1222
Fax: 360-586-1181
TTY: 360-586-6203
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 Carrier Services	Fee Required
Application fee (Application for new certificate, to reinstate a previously canceled certificate, or to transfer an existing certificate to a new owner or business structure)	\$200.00
Name Change (Application to change a company's corporate name, change a trade name, add a new trade name, or change the surname of an individual owner or partner)	\$ 35.00
Regulatory Fee (per vehicle)	\$ 25.00 <i>x2</i>
TYPE OF PAYMENT	
<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> AMEX <input type="checkbox"/> MasterCard <input checked="" type="checkbox"/> Visa	
Credit Card Information (if applicable) _____ Exp Date _____ Month/Year	
Amount \$ <i>205.450⁰⁰</i> Company Name: <i>Aspen Lime Tours</i>	
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.	
Cardholder's signature: <i>[Signature]</i>	Date: <i>2/29/14</i>

(For Commission Use Only) 111 0268 232 01 <i>50.00</i>	Company ID: <i>7732</i>	Docket TE-
111 0268 232 02 <i>200</i>	Date Filed: <i>3/4/14</i>	Safety Inspection:
111 0268 232 03	Reg Fees: <i>OK x2</i>	Insurance:
111 0268	DOL: <i>OK</i>	SOS: <i>OK</i>

049463

SECTION 1 - APPLICANT INFORMATION

Name of Applicant: ASPEN Lima Tours h/c per UBI

Trade Name(s) (if applicable): The Transporter

Mailing Address:

Physical Address:

Street 16420 SE McGillivray Blvd Ste 103/539

Street 5830 NE 109th Ave Por

City Vancouver

City Portland, Or

State/Zip wa 98683

State/Zip Oregon 97220

Phone Number: 503/274/9505

Fax Number: _____

UBI #: 602 271 694 001

E-Mail: David@aspenlimatours.com

Type of business structure:

- Individual
- Partnership
- Corporation
- Other (LP, LLP, LLC)

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

<u>Name</u>	<u>Title</u>	<u>Stock Distributions or Percentage of Shares</u>
<u>DAVID Williams</u>	<u>member</u>	<u>2</u>

List other certificates or permits held with the commission: _____

List your USDOT # 2360186 (If you don't have one you can go online at www.fmcsa.dot.gov/online-registration or contact the Washington State Patrol at 360-596-3812 for assistance.)

SECTION 2 - EQUIPMENT

(Attach additional sheets if necessary)

<u>License Number</u>	<u>Year And Make Of Vehicle</u>	<u>Vehicle ID Number</u>	<u>Seating Capacity</u>
<u>B013599</u>	<u>98 Ford E450</u>	<u>1GBJ5V1277F406856</u>	<u>30 pax 30</u>
<u>B013443</u>	<u>07 Gmc 5500</u>	<u>1FOXE40F1WHA32620</u>	<u>20 pax 20</u>

At 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 Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements.

SAFETY RESPONSIBILITIES

- **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 Regulations 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 vehicles, 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: *Transportation Specialties* Position: *consultant Floyd Ebl*

OPERATIONAL RESPONSIBILITIES

List the person and position responsible for understanding and complying with the requirements of each category shown below.

ANNUAL REPORTS AND REGULATORY FEES. You must file an annual safety report and pay regulatory fees by December 31 of each year.

Name: *Transportation Specialties* Position: *consultant Floyd Ebl*

STATE OF WASHINGTON GENERAL LAWS, RULES AND REGULATIONS. You must comply with the regulations of local, state, and federal agencies such as, but not limited to: Department of Labor and Industries, Department of Licensing, Secretary of State, Department of Revenue, Internal Revenue Service and Employment Security.

Name: *Transportation Specialties* Position: *consultant Floyd Ebl*

SECTION 4 - DECLARATION OF APPLICANT

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

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 DAVID WILLIAMS / ASPEN LIMO TOURS

Signature of applicant 

Date 2/29/14 County, State CLARK

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

CHARTER AND EXCURSION REGULATORY FEE CALCULATION SCHEDULE

Company Name Aspen Limo Tours LLC

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

2 Total Regulatory Fees owed (enter amount from line 1) 2 x 25.00 = \$ 50

There is a minimum fee of \$25.00.

(For Commission Use Only) 001-111-02-68-232-01 Reception Number:	Docket TE-	Certificate No:
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ANNUAL VEHICLE INSPECTION REPORT

1998 Ford E450

REPORT NUMBER	FLEET UNIT NUMBER
31060548	
DATE 12/17/2013	

MOTOR CARRIER OPERATOR ASPEN LIMO TOURS	INSPECTOR'S NAME (PRINT OR TYPE) Travis Lorton Master ASE
ADDRESS 16420 SE MCGILLVARY	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 393.10 YES
CITY, STATE, ZIP CODE VANCOUVER WA 98683	VEHICLE IDENTIFICATION (IF AND COMPLETE) <input checked="" type="checkbox"/> LIC. PLATE NO. <input type="checkbox"/> VIN <input type="checkbox"/> OTHER B013443
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) Gary's Auto Care

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
X			a. Service Brakes				a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	X			a. Tires on any steering axle of a power unit.
X			b. Parking Brake System				b. Protection against shifting cargo.	X			b. All other tires.
X			c. Brake Drums or Rotors			N/A	c. Container securement devices on intermodal equipment.	X			a. Lock or Side Ring
X			d. Brake Hose				a. Steering Wheel Free Play	X			b. Wheels and Rims
X			e. Brake Tubing				b. Steering Column	X			c. Fasteners
		N/A	f. Low Pressure Warning Device			N/A	c. Front Axle Beam and All Steering Components Other Than Steering Column	X			d. Welds
		N/A	g. Tractor Protection Valve				d. Steering Gear Box				Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
		N/A	h. Air Compressor			N/A	e. Pitman Arm				Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
		N/A	i. Electric Brakes				f. Power Steering				List any other condition(s) which may prevent safe operation of this vehicle.
X			j. Hydraulic Brakes	X			g. Ball and Socket Joints				
X			k. Vacuum Systems	X			h. Tie Rods and Drag Links				
		N/A	a. Fifth Wheels	X			i. Nuts				
		N/A	b. Pintle Hooks	X			j. Steering System				
		N/A	c. Drawbar/Towbar Eye	X			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.				
		N/A	d. Drawbar/Towbar Tongue	X			b. Spring Assembly				
		N/A	e. Safety Devices	X			c. Torque, Radius or Tracking Components				
		N/A	f. Saddle-Mounts	X			a. Frame Members				
X			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	X			b. Tire and Wheel Clearance				
X			b. Bus exhaust system leaking or discharging in violation of standard.	X			c. Adjustable Axle Assemblies (Sliding Subframes)				
X			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	X							
X			a. Visible leak.	X							
X			b. Fuel tank filler cap missing.	X							
X			c. Fuel tank securely attached.	X							
X			All lighting devices and reflectors required by Part 393 shall be operable.	X		N/A					

ANNUAL VEHICLE INSPECTION REPORT

2007 GMC 5500

REPORT NUMBER 31060547	FLEET UNIT NUMBER
DATE 12/18/2013	

MOTOR CARRIER OPERATOR ASPEN LIMO TOURS	INSPECTOR'S NAME (PRINT OR TYPE) TRAVIS LORTON Master ASE
ADDRESS 16420 SE MCGILLVARY	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 306.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE VANCOUVER WA 98683	VEHICLE IDENTIFICATION (V AND COMPLETE) <input checked="" type="checkbox"/> LIC. PLATE NO. <input type="checkbox"/> VIN <input type="checkbox"/> OTHER B013599
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) GARY'S AUTO CARE

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	
X			a. Service Brakes				a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	X			a. Tires on any steering axle of a power unit.	
X			b. Parking Brake System				b. Protection against shifting cargo.	X			b. All other tires.	
X			c. Brake Drums or Rotors				c. Container securement devices on intermodal equipment.	X			a. Lock or Side Ring	
X			d. Brake Hose				a. Steering Wheel Free Play	X			b. Wheels and Rims	
X			e. Brake Tubing				b. Steering Column	X			c. Fasteners	
		N/A	f. Low Pressure Warning Device				c. Front Axle Beam and All Steering Components Other Than Steering Column	X			d. Welds	
		N/A	g. Tractor Protection Valve				d. Steering Gear Box				Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).	
		N/A	h. Air Compressor				e. Pitman Arm				Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.	
X			i. Electric Brakes				f. Power Steering				List any other condition(s) which may prevent safe operation of this vehicle.	
X			j. Hydraulic Brakes				g. Ball and Socket Joints					
		N/A	k. Vacuum Systems	X			h. Tie Rods and Drag Links					
		N/A	a. Fifth Wheels	X			i. Nuts					
		N/A	b. Pintle Hooks	X			j. Steering System					
		N/A	c. Drawbar/Towbar Eye	X			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.					
		N/A	d. Drawbar/Towbar Tongue	X			b. Spring Assembly					
		N/A	e. Safety Devices	X			c. Torque, Radius or Tracking Components					
		N/A	f. Saddle-Mounts	X			a. Frame Members					
X			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	X			b. Tire and Wheel Clearance					
X			b. Bus exhaust system leaking or discharging in violation of standard.	X			c. Adjustable Axle Assemblies (Sliding Subframes)					
X			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	X								
X			a. Visible leak.	X								
X			b. Fuel tank filler cap missing.	X								
X			c. Fuel tank securely attached.	X								
X			All lighting devices and reflectors required by Part 393 shall be operable.	X								