

PART A TV# 40853

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION
1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-7250
Telephone (360) 564-1222 - Fax (360) 566-1181
Intrastate Common Carrier Operating Authority
APPLICATION FOR PERMIT
#5211 (including Household Goods and Common Carrier Bonding)

Receipt Number: 111 0268 200 02 275.00
Insurance: \$275.00
Carrier ID#: 7863
Employee: MK

New Common Carrier Permit Authority, or Transfer of Existing Permit Number

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 (Only for third parties - all penalties of cancellation)	For Commissioner Use Only: Auth #:

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 (print): Judith A Storey Date: 4-29-2014
Signature: [Handwritten Signature] Title: Co-owner

CO#: 6905 US DOT#: 737155
VIA UNIFIED BUSINESS IDENTIFIER (UBI) #:

LEGAL NAME: Gregory K Storey PHONE #: 503 556 9075
d/b/a: G.K. Storey FAX #: 503 556 9075

BUSINESS (MAILING) ADDRESS: PO Box 1265 La Pine OR, 97739
PHYSICAL ADDRESS: (street address, if different) 52708 Ranch dr. La Pine OR 97739

EMAIL ADDRESS: G K Storey@hotmail.com
(Small case)

RECEIVED
MAY 02 2014
WASH. UT. & TP. COMM

Insurence Form F To follow
in few days. @ ~~5-2-2014~~
5-5-2014
Hopefully!

INDIVIDUAL PARTNERSHIP CORPORATION (P, LP, LLC)
STATE OF INCORPORATION

NAME: Gregory K. Storey TITLE: Owner ADDRESS: _____ STOCK DISTRIBUTION OR PERCENTAGE OF SHARE: _____

PO Box 1265
La Pine OR 97139

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 _____

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.

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.

You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.

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#
6	4AGT485	OR	1XK D0U9X9XR 782
7-3	HP 28635	OR	PB 89 LL 054

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.

Gregory Storey
Signature
Log hauling only
Date 4-29-2014

130 TRUCK
Log Trailer

STATE OF OREGON APPORTIONED REGISTRATION CAB CARD

THIS VEHICLE IS PROPORTIONATELY REGISTERED AT THE WEIGHT INDICATED
WITH OREGON AND ALL JURISDICTIONS LISTED BELOW

ATTENTION ENFORCEMENT: VERIFY THIS CREDENTIAL @ WWW.OREGONTRUCKINGONLINE.COM

REGISTRANT NAME AND ADDRESS

GRACE PERIOD ENFORCEMENT
DATE: **MARCH 16, 2015**

STOREY, G K

**PO BOX 1265
LA PINE OR 97739**

OREGON

HEAVY TRAILER REGISTRATION

PLATE NUMBER HP28635		TITLE NUMBER 0525510660		PROCESS DATE 091205	EXPIRATION DATE PERM	FUEL TYPE	EQUIPMENT NO. #T-3
YEAR 1989	MAKE PDRS	STYLE FB	MODEL	VEHICLE IDENTIFICATION NUMBER PB89LL054			WEIGHT/LENGTH
TITLE BRANDS - NONE -				ODOMETER READING		ODOMETER DATE	
OWNER / LESSEE STOREY, GREGORY K STOREY, JUDITH ANN 52708 RANCH DR PO BOX 1265 LAPINE OR 97739				ODOMETER MESSAGE			

LAPI

COUNTY OF RESIDENCE
DESCHUTES

COUNTY OF USE

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Trailer

OWNER / LESSEE

NEW ADDRESS

PLATE NUMBER YAGJ485	OR ACCOUNT / FLEET NUMBER / SUP 031258 / 01/000	EFFECTIVE DATE 01/01/2014	EXPIRATION DATE 12/31/2014
VEHICLE YEAR 1999	VEHICLE MAKE KW	VEHICLE IDENTIFICATION NUMBER 1XKD0U9X9XR782130	FUEL TYPE D
LESSOR NAME		EQUIPMENT NUMBER 6	VEHICLE TYPE TR
			SEATS

Truck

JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT
OR	084000	WA	084000	**	*****	**	*****	**	*****	**	*****
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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 FMCSA is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code (WAC) 446-65.

Copies of the FMCSRs are available from several vendors. These include, but are not limited to:

- Washington Trucking Association, 845 S. 330th St., Suite B, Federal Way, WA 98003, www.watrusting.com, (800) 732-8019 or (252) 838-1850.
- J. J. Keller & Associates, Inc., 3003 W. Brazewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 864-2333.
- Williams Traffic Bureau, 16303 NE Carnation 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, (855) 512-1800.

Name: G.K. Storey Position: owner/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

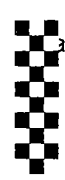
- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size 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.

Name: G.K. Storey Position: owner/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.



Name: G.K. Storey Position: owner/driver

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. Owners/operators that work exclusively in interstate 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: G.K. Storey Position: owner/driver

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: G.K. Storey Position: owner/driver

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 398.11 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.

Signature of applicant: G.K. Storey Date: 5-7-14
for G.K. Storey

56-1430

Form E
Uniform Motor Carrier Bodily Injury and Property Damage
Liability Certificate of Insurance (Executed in quadruplicate)



FARMERS

Filed with Washington Utilities and Transportation Commission
(Name of Commission)

This is to certify, that the Farmers Insurance Exchange
(Name of Company)

(herein called Company) of 4680 WILSHIRE BLVD., LOS ANGELES, CA 90010
(Home Office, Address of Company)

has issued to GREGORY K-STOREY
(Name of Motor Carrier)

of PO BOX 1265 LA PINE, OR 97739-1265
(Address of Motor Carrier)

a policy or policies of insurance effective from 05/13/2014, 12:01 a.m. standard time at the address of the insured stated in said policy or policies and continuing until canceled 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 regulation 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 canceled without cancellation of the policy to which it is attached. Such cancellation may be effect 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 23175 NW BENNETT ST., HILLSBORO, OR 97124
(Street Address) (City) (State) (ZIP Code)

this 09 day of May, year 2014.

Insurance Company File No. A034907188
(Policy No.)

Batana Dames
Authorized Company Representative

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C., sec.302(b)(2)).

TL-822 (NARUC"E")
66-1430 (ACT-T-300C) 9-86

Original

L-99