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JUL 03 2014

PART A APPLICATION FOR PERMIT

(excluding Household Goods)

WASH, UT. & TP. COMM

Docket No. TV-(413 8

Carrier ID#

Employee

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**

Safety Safety

Insurance

FOR OFFICIAL USE ONLY

111-0268-200-02

Reception Number 050779

OK# 5817 TYPE OF AI	PPLICATION						
New Common Carrier Permit Authority,	Extension of Common Carrier Permit Authority						
or Transfer of Existing Permit Number							
\$275 GENERAL COMMODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE						
\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS						
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE						
\$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							
MOTOR CARRIER IDENTIFICATION							
Common Carrier #: 58/11 Unified Business Identifier Number (UBI): 601 726 439							
Legal Name: Roberto S. REYNA USDOT: 708484							
Trade Name(s), dba(s), if any REYNA TRUKING							
Email address:							
Phone Number: 509-945-1836 Fax Number:							
Business (Mailing) Address: 314 w 3d 5t wapato Wa 98951							
Physical Address (if different):							

			TYPE OF BUSIN	ESS STRINCT	IDE		
			THEOLOGIA	LOGGINGE	JAL		
 Individual	☐ Partne	rship 🗆 (Corporation	☐ Limited Li	ability Company	State of Inc	
NAME TITLE Stock Distribution or % of Shares Roberto S. REYNA REYNA TRUCKING							
-/100		· · · · · · · · · · · · · · · · · · ·			 		
							
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NAME ON PE	RMIT Rober	to S. RE	YNA	, /	Permi	t Number	
011				01	•		
/labela	S. Kyn	<u> </u>				91-14	
Signature of o	current permit	holder			Dat	e	
**		INICIIDA	NCE REQUIRE	MENITO /	• F = 2		
	A		10.00 March 2010 (2010)	A 745 A 75	ceneck one; surance is received		
☐ You will not h		You will n	A CONTRACTOR OF THE CONTRACTOR		haul hazardous	You will haul hazardous	
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operate vehicle			n a GVWR of	_ · · · · · -		and Property Damage	
GVWR of less than 10,000 10,000 pounds		nds or more. You	·		Insurance. You must		
pounds. You must obtain must obtain \$750,000 in			Sections 1 and 2. complete Part C, Section				
\$300,000 in Public Liability Public Liability and Property					and 2.		
and Property Da	-		urance. You must				
Insurance. You do not need complete Part B.		İ					
to complete Par	t B.			<u>.L.</u>			
						To the second	
MOTOR VEHICLE LIST (Attach additional pages if necessary)							
Unit #		cense Numb	er	State	VIN number		
1 B13748T			WA.	1XKWD28X6B5188 921			

SIGNATURE

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 issued by the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Signature 2. 1. synt

) - / - / 4

Date



DEREK TODD TRUCK INS 6301 OVERLAND STE 101 BOISE, ID 83709

1-208-376-3613



Policy number: 03200227-0

Underwritten by: UNITED FINANCIAL CASUALTY COMPANY July 7, 2014 Page 1 of 1

Certificate of Insurance

Certificate Holder	insured	Agent
WUTC	ROBERTO S REYNA	DEREK TODD TRUCK INS
PO BOX 47250	reyna trucking	6301 OVERLAND STE 101
Olympia, wa 98504	314 W 3RD STREET	BOISE, ID 83709
	WAPATA, WA 98951	

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: Jul 1, 2014	Policy Expiration Date: Jan 1, 2015		
Insurance coverage(s)	Limits		
BODILY INJURY/PROPERTY DAMAGE	\$750,000 COMBINED SINGLE LIMIT		
UNDERINSURED MOTORIST BODILY INJURY	\$25,000/\$50,000		
Underinsured motorist property damage	\$25,000 W/\$100 DED (\$300 IF HIT & RUN)		
PERSONAL INJURY PROTECTION	\$10,000		
MOTOR TRUCKING CARGO	\$10,000 W/\$1,000 DED		

Description of Location/Vehicles/Special Items

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1981 KW W90 1XKWD28X6BS188921 Stated Amount \$20,000 COMPREHENSIVE \$1,000 DED COLLISION \$1,000 DED

Certificate number

18814NET227

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

K-Pay

form 5241 (10/02)