

1300 S. Evergreen Park Dr. SW P.O. Box 47250 Olympia, WA 98504-7250 Phone: 360-664-1222 Fax: 360-586-1181 TTY: 360-586-8203

or

1-800-416-5289 E-mail: Transportation@wutc.wa.gov

| Type of Passenger Ti | ansportation Authority Rec | quested (check one box) | Fee Required |
|-------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------|-----------------------------|
| Auto Transportation Aut | thority | | |
| New Certificate (a and excursion car Attachment E. Su | \$200.00 | | |
| Do you plan | on providing charter/excursion | n service □ Yes □ No | |
| Extension of Exist Complete sections | ing Auto Transportation Certifica 1-8. Submit a proposed tariff a | nd time schedule. | \$150.00 |
| Attachment B. Transferring all o | Auto Transportation Authority – f Certificate C rtion of Certificate C | Complete sections 1-8 and | \$200.00 |
| operate pending a | ransportation Authority (New ter Commission decision on a para s 1-8 and Attachment A. | | |
| Mortgage of Certif | \$35.00 | | |
| deleting a trade na | Change in corporate name, char ame; or change the surname of a 1 and Attachment C | | |
| Reinstatement of | Cancelled Certificate - Complete | e sections 1, 2 and 8 | \$200.00 |
| | TYPE OF PA | YMENT: | |
| ☐ Cash ☐ Check ☐ Mone | y Order 🗆 AMEX 🗆 MasterCard | Visa | |
| Credit Card Information (if a | pplicable): | | Expiration Date Month/Year |
| - | | | |
| Amount: \$ 150.00 | | Investments LLC] | SBA wenatches Valley S |
| Cardholder's signature: | Morrique lott | Date: 7/14/ | 14 |
| aldul | FOR OFFICIAL | USE ONLY) Q (() | |
| Date Filed: 1 5 3 | Docket #: | 1D#: 0049 | Cert. Issued: |
| LS Staff Assigned: | Insurance: | | Related App: |
| | Tariff/Time Schedule: | Map: | |
| DOL/SOS | Safety Inspection: | Reception #: | 111 0268: |
| 111-0268-232-02: | 111-0268-232-01: | 111-0268-230-02: | 111-0268-230-01: |

019448

| SECTION 1-APPLIC | SECTION 1-APPLICANT INFORMATION | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--|--|--|--|
| Name of Applicant: Monique Lott | BNIL Investmentshic | | | | |
| Trade Name/d/b/a (if applicable) Wenatchee Vo | May shittle period | | | | |
| Unified Business Identifier Number (UBI): 602-712-44 (If you do not know your UBI number or need to request one, contact Business Licensing Services at 1-800-451-7985) | | | | | |
| Phone # 509-630-2745 Fax # 509-470- | 7497 E-mail Monique @ wenatchee Valleyshuttle. | | | | |
| * Change b Physical Address & | Mailing Address (if different from physical) | | | | |
| Street: 824 N. Lyle Ave. | Street: | | | | |
| city: East Wenatchee, WA. | City: | | | | |
| State/Zip: 98802 | State/Zip: | | | | |
| Type of Business Structure: □ Individual □ Partnership □ Corporation ☒ Other (LP, LLP (LLC)) | | | | | |
| List the name, title, and percentage of partner's sha | are or stock distribution for major stockholders: | | | | |
| Name Byron Lott CFO Monique Lott CEO Stock Distribution or % of Shares 50% 50% | | | | | |
| | | | | | |
| Labor & Industries registration number: | 70,131-01 | | | | |
| Employment Security Department resistration number: 1000 Wbl # | | | | | |
| USDOT number 2270573 currently don't have a USDOT number, you can go online to www.fmcsa.dot.gov/online-registration to apply or call 360-596-3812 for assistance) | | | | | |
| SECTION 2 - COMPAN | Y INFORMATION | | | | |
| Provide the following documents with your application: | | | | | |
| A map of the proposed line, route, or service territory that meets the standards described in WAC 480-30-051 | | | | | |
| Support statements for temporary authority (if applicable) | | | | | |

See Attachm

| Describe the proposed type of service including the line, route, or service territory described in terms |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| such as streets, avenues, roads, highways, townships, ranges, cities, towns, counties, or other |
| geographic description: Leave Wenatchee Valley on USZE going toward Leavenworth, WA |
| Take the US97 toward Ellensburg, merge onto I-90 West toward seattle. |
| EXIT 31, Pick of dop Off, back on I=90 West, Exit II take 156th SEramp, Eastgate |
| Park n ride at Bellevie. Then onto US 405 to Sea-Tac airport. Following the same rouk |
| returning to wenotchees |
| State the conditions that justify this proposed service: We are Central Washington's only |
| Consistent scheduled airport service. Many passengers travel to Bellevue & |
| North Bend from Wenatches to see family & friends. These passengers may |
| connect with buses at Eastgate and shopping/famely at North Bend. |
| The state of the s |
| State the applicant's prior experience and familiarity with the statues and rules that govern operations it proposes: We have been operating and learning the UTC rules & regulations |
| for the past 21/2 years as we have ran wenotched Valley shuttle. Prior to |
| this operation we ran 3 semitrucks over the road and became familiar with |
| State rules, maintenance, safety, etc |
| |
| |
| |
| Do other auto transportation companies currently provide service between any of the points or along any portion of the route you propose to serve? No Yes If yes, list the names and addresses of companies. |
| Bellair charters |
| |
| |
| Do you currently hold, or have you ever held, an auto transportation certificate? |
| □ No X Yes If yes, please indicate your certificate number: C- 64605 |
| |
| Have you ever applied for and been denied an auto transportation certificate? |
| No □ Yes If yes, please explain |
| |
| Have you ever been cited for violation of state laws or commission rules? |
| □ No 🗷 Yes If yes, please explain: When we first started our business we were unaware |
| that we needed medical cords when operating vehicles with less than 14 passengers. We made the |
| SECTION 3 – TARIFF AND TIME SCHEDULE |
| ASM. |
| If this application is for temporary authority, a new certificate, or extension of existing certificated authority, you must include a proposed tariff and time schedule that is in compliance with WAC 480-30-251 through WAC 480-30-436. |
| ∵ |
| If this application is a transfer or a lease of authority from an existing certificate company, you must either file a new tariff and time schedule at the same rate levels as on file, or, you must adopt the current certificate holder's tariff and time schedule. To file a new tariff, use the standard tariff format attached to this application or an approved alternate format. Indicate which option you will |
| use: Adopt or File new tariff |

SECTION 4 – HEARING INFORMATION

If the Commission assigns this application for a formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.

| Number of witnesses: 3 | Amount of time: 10 minutes | | |
|---------------------------------------|---------------------------------|--|--|
| Will an attorney be representing you? | If yes, complete the following: | | |
| Attorney's name: | Attorney's phone number: | | |
| Attorney's address: | Fax number: | | |
| Street | | | |
| City, State, Zip E-mail address | | | |

| SECTION 5 FINANCIAL STATEMENT | | | | | | |
|-------------------------------|--------------|---------------------------------|--------------|--|--|--|
| ASSETS | | LIABILITIES | | | | |
| Cash in Bank | \$ 5,000.00 | Salaries/Wages Payable | \$47,987.51 | | | |
| Notes Receivable | \$ | Accounts Payable Fue | \$ 10,000 | | | |
| Accounts Receivable | \$ | Notes Payable | \$ | | | |
| Investments | \$, . | Mortgages Payable | \$ | | | |
| Other Current Assets | \$ | Contracts and Bonds Payable | \$ | | | |
| Prepaid Expenses | \$ | TOTAL LIABILITIES | \$ 57,987.51 | | | |
| Land and Buildings | \$ | NET WORTH | | | | |
| Trucks and Trailers | \$ 25,000 | Preferred Stock | \$ | | | |
| Office Furniture | \$ 250.00 | Common Stock | \$ | | | |
| Other Equipment | \$ | Retained Earnings | \$ | | | |
| Other Assets | \$ | Capital | \$ | | | |
| TOTAL ASSETS | \$ 30,250.00 | TOTAL LIABILITIES AND NET WORTH | \$ | | | |

In addition: the application must include the following: (See WAC 480-30-096)

| - | | | | | | |
|---|------------------|-----------------------------------------|---------------|------------------|----------------|------------|
| | Ridership and | ~ (| | <i>r</i> , , , , | | |
| | PICOSCOIO SOO | - Vauanua tara | へつてもた ナヘア ナハハ | ナリアビデ ナリスノヘシ・ノヘ | MANTHE AT | ANAPATIAN |
| | Direction of the | nevenue mie | rogra nai inc | HIN INCHASE | HILDIELIES UII | uneralium. |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | ************* | ~ p ~ |

A pro forma balance sheet and income statement for first twelve months of operation.

SECTION 6 - EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheet if necessary). Vehicles must pass inspection and be issued a valid Commercial Vehicle Safety Alliance inspection decal for each motor vehicle before your application may be granted.

| | Express | β5 2221 T | 19a2q2d2a1118507 | 14 |
|------------|---------------------------------------|------------------|-------------------|----|
| 2007 dodge | · · · · · · · · · · · · · · · · · · · | | | |
| | Wagon | ADF3261 | 2bswb35222K134905 | 14 |
| 2003 Ford | E-450 | AML2200 | 1Fdxe45593hb33391 | 24 |
| 2009 Ford | Econoline | AQF7648 | 1FBSS31L99da72077 | 14 |

| C | TI | OK | 17 | C A | CET | / AND | ADED | ATIONS |
|---|----|----|----|-----|-----|-------|------|---------|
| - | | UN | — | OH | | LINI | UPPR | AIICINS |

In 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) STANI | DARDS REQUIREMENTS AND PENALTIES (Title 49, Code of |
|----------------------------------------------|-------------------------------------------------------------|
| Federal Regulations Part 383) Any driver who | operates a vehicle that meets the definition of a commercia |
| motor vehicle must have a valid CDL. | |
| Name: Bynn Lott | Position: CFO |

Name: Bynn Lott

DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: Byron/monique Lott

Position: CFO/CEO

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: Monique Lott

Position: CEO

CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code of Federal Regulations Part 382) All persons who drive commercial vehicles requiring a CDL must be in a Controlled Substance and Alcohol Use and Testing program that is in compliance with FMCSR in Title 49, Code of Federal Regulations Part 382 and Title 49, Code of Federal Regulations Part 40. Each company will have in place a system for complying with FMCSR governing alcohol use and controlled substances testing requirements (Title 49 Code of Federal Regulations Part 382 and Title 49 Code of Federal Regulations Part 40).

Name: Monigve Lott

Position: CEO

INSPECTION, RÉPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.

Name: Terry Lloyd

Position: Assistant manager

SAFETY REGULATIONS, GENERAL (Title 49, Code of Federal Regulations Part 390)

Name: Monique Lott/rerry Lloyd

Position: CEO/A.M.

DRIVING OF COMMERCIAL MOTOR VEHICLES (Title 49, Code of Federal Regulations Part 392)

Name: Monique Lott

Position: CEO

PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393)

Name: terry Lloyd

Position: A.M.

OPERATIONAL RESPONSIBILITIES

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

TARIFFS, TIME SCHEDULES, RATES AND RATE FILINGS (WAC 480-30-251 through WAC 480-30-436) Companies must file a tariff showing all rates it will impose on its customers, together with rules that govern how rates will be assessed. Companies must also file a time schedule. Charter and excursion only carriers are not required to file tariffs and time schedules per WAC 480-30-251.

Name: Bynn/Monique Lott

Position: CFO & CEO

ANNUAL REPORTS AND REGULATORY FEES (WAC 480-30-066 through WAC 480-30-081) Auto Transportation companies must file an annual report of their financial and operational activity and pay regulatory fees by May 1 of each year. Charter and excursion carriers must file an annual safety report and pay regulatory fees by December 31 of each year.

Name: Byron / Monigle Lott

Position: CFO & CEO

CUSTOMER SERVICE Person responsible for customer service complaints, and customer notice requirements.

Name: MONIGUE LOTT

Position: CEO

| STATE OF WASHINGTON GENERAL LAWS, RULES AND REGULATIONS Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, fuel permits, fuel tax); Secretary of | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|--|--|--|--|
| State (corporate registrations); Department of Revenue and Inter | rnal Revenue Service (taxes); and | | | | |
| Employment Security. Name: Movique Loff Position: | (C) | | | | |
| Name: Movique Lon | CEU | | | | |
| SECTION 8 - DECLARATION C | OF APPLICANT: | | | | |
| | / | | | | |
| I understand that filing this application does not authorize reterritory described until the commission grants the applicat | • | | | | |
| I understand the responsibilities of a passenger transportation company, and I am in compliance with all local, state, and federal regulations governing business in the state of Washington. | | | | | |
| I certify under penalty for false statement, that the information contained in this application is true and correct, and that I am authorized to execute and file this document on behalf of the applicant. | | | | | |
| Printed name: Monique Lott | | | | | |
| Printed name: Monique Lott Signature: Monique Loft | | | | | |
| | , Washington | | | | |