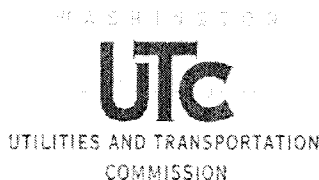


143164



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@utc.wa.gov

### APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICES CERTIFICATE

Passenger Charter and Excursion Carrier Services <u>WAC 480-30</u>	<u>Fee Required</u>
<input type="checkbox"/> <b>New Authority</b>	<b>\$200.00</b>
<input type="checkbox"/> <b>Transfer</b> an existing certificate to a new owner or business structure. <ul style="list-style-type: none"> <li><input type="radio"/> If transfer, complete Attachment A.</li> </ul>	same
<input type="checkbox"/> <b>Reinstate</b> a previously cancelled certificate; <u>WAC-480-30-121</u> .	same
<b>Plus,</b>	
<input type="checkbox"/> <b>Regulatory Fee</b> - In accordance with <u>RCW 81.70.350</u> "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.	
<b>Total number of vehicles to be operated</b> _____ x \$25 per vehicle	= \$ _____
<b>Total due</b> (\$200, plus, \$25 per vehicle)	= \$ _____
<input checked="" type="checkbox"/> <b>Name Change</b> - <u>WAC 480-30-146</u> <i>Removing trade names - Gray Line of Seattle Evergreen Trailways</i>	<b>\$ 35.00</b>
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.	
***Please also complete the Type of Payment page.	

(For Official Use Only) 111 0268 232 01	Company ID: <i>14683</i>	Docket/E-
111 0268 232 02	Date Filed: <i>8/20/14</i>	Safety Inspection:
111 0268 232 03	Reg Fees: <i>on file</i>	Insurance: <i>on file</i>
111 0268	DOL: <i>on file</i>	SOS: <i>on file</i>
Receipt ID:	Payment ID:	CH -

# 003589

**SECTION 1 – APPLICANT INFORMATION**

**Legal Name:** Evergreen Trails Inc  
The legal name must match your registration with Department of Revenue

**Trade Name(s) (if any):** Horizon Coach Lines  
Trade name(s) must be registered under your UBI number

**Mailing Address:**

**Physical Address:**

Street 4500 W. Marginal Way, SW Street 4500 W. Marginal Way, SW  
 City Seattle City Seattle  
 State/Zip WA. 98106 State/Zip WA. 98106

Phone Number: (206) 626-5222 Fax Number: (206) 626-5209

UBI #: 578-012-845 E-Mail: pgrytnoss@horizoncoachlines.com

**Type of business structure:**

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

If a Partnership, Corporation, or Other, 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>TMS West Coast, Inc</u>		<u>100%</u>
_____	_____	_____
_____	_____	_____

List other certificates or permits held with the commission: C-819, CH-19

USDOT # 12016 If you don't have a USDOT # go online at [www.fmcsa.dot.gov/online-registration](http://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>

*all attached sheet*

### SECTION 3 – SAFETY AND OPERATIONS

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) 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: <i>Petter Guytness</i>	Position: <i>Director of Safety</i>
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#### 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: <i>Petter Guytness</i>	Position: <i>Director of Safety</i>
------------------------------	-------------------------------------

**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: <i>Petter Guytness</i>	Position: <i>Director of Safety</i>
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**SECTION 4 – DECLARATION OF APPLICANT**

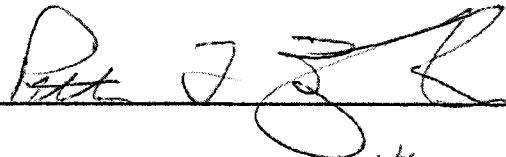
I understand that filing this application does not in itself constitute authority to operate as a passenger charter and excursion carrier.

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 Petter Grytness

Signature of applicant 

Date 8/18/2014 County, State King, Washington

<u>Year</u>	<u>Make</u>	<u>Model</u>	<u>State of Reg.</u>	<u>License No.</u>	<u>VIN</u>	<u>Co. Unit #</u>
1999	MCI	102EL3	Wyoming	A18661	1M8TRMPA4XP060715	339
1999	MCI	102EL3	Wyoming	A17031	1M8TRMPA9XP060712	340
2001	MCI	E4500	Wyoming	A18822	1M8TRMPA61P061632	343
2001	MCI	E4500	Wyoming	A18823	1M8TRMPA81P061633	344
1997	FRD	ELDORADO	Washington	B32437H	1GBKP37N3T3301828	700
1998	MCI	102DL3	Wyoming	A17189	1M8PDMTA1WP050129	746
1999	MCI	102EL3	Wyoming	A15893	1M8TRMPA4YP061364	859
1994	MCI	102D3	Wyoming	A16599	1M8SDMTA7RP046228	949
2000	MCI	102EL3	Wyoming	A17043	1M8TRMPA1YP061175	951
2000	MCI	102EL3	Wyoming	A17044	1M8TRMPA7YP061178	952
1999	MCI	102DL3	Wyoming	A17191	1M8PDMPA5XP052106	954
1995	MCI	102DL3	Wyoming	A17136	1M8PDMPA7SP047482	1177
1996	MCI	102DL3	Wyoming	A17138	1M8PDMPA0TP048233	2205
1996	MCI	102DL3	Wyoming	A17139	1M8PDMPA9TP048313	2208
1996	MCI	102DL3	Wyoming	A17140	1M8PDMPA8TP048495	2213
1999	MCI	102EL3	Wyoming	A16932	1M8TRMPA8XP060569	3956
2002	MCI	D4000	Wyoming	A16552	1M8SDMPA12P054406	4406
2002	MCI	D4000	Wyoming	A16553	1M8SDMPA72P054409	4409
1998	MCI	102D3	Wyoming	A16596	1M8SDMTA6VP049762	4710
1998	MCI	102D3	Wyoming	A16586	1M85DMPA4WP050226	4737
1995	MCI	102D3	Wyoming	A17166	1M8SDMPAXSP047793	4739
1996	MCI	102D3	Wyoming	A16795	1M8SDMPA4TP048892	4751
1997	MCI	102DL3	Wyoming	A17183	1M8PDMTAXVP049768	7055
1997	MCI	102DL3	Wyoming	A17184	1M1PDMTA1VP049769	7056
1997	MCI	102DL3	Wyoming	A17185	1M8PDMTA2VP049781	7059
1997	MCI	102DL3	Wyoming	A17186	1M8PDMTA4VP049782	7060
1997	MCI	102DL3	Wyoming	A17188	1M8PDMTA8VP049784	7062
1999	MCI	102DL3	Wyoming	A17142	1M8PDMTA7XP052260	52260
1999	MCI	102DL3	Wyoming	A17143	1M8PDMTA9XP052261	52261
1999	MCI	102DL3	Wyoming	A17144	1M8PDMTA1YP052742	52742
1999	MCI	102EL3	Wyoming	A16944	1M8TRMPA1XP060591	60591
1999	MCI	102EL3	Wyoming	A16948	1M8TRMPA8XP060605	60605
1999	MCI	102EL3	Wyoming	A16950	1M8TRMPA3XP060611	60611
1999	MCI	102EL3	Wyoming	A15961	1M8TRMPA7XP060613	60613
1996	MCI	102D3	Wyoming	A16565	1M8SDMTA7TP048312	63130
1999	MCI	102EL3	Wyoming	A16981	1M8TRMPA3XP060625	63154
1999	MCI	102EL3	Wyoming	A16989	1M8TRMPA8XP060619	63163
1999	MCI	102EL3	Wyoming	A16992	1M8TRMPA1XP060624	63166
2001	PCI	XL II	Wyoming	A17338	2PCX3349811027498	63169
2001	PCI	XL II	Wyoming	A16687	2PCX3349411027501	63170
2000	PCI	XL II	Wyoming	A17851	2PCX3349X11027423	64554
2000	PCI	XL II	Wyoming	A16689	2PCX33494Y1027279	64556
2001	PCI	XL II	Wyoming	A16690	2PCX3349211027433	64561
1997	MCI	102DL3	Wyoming	A17174	1M8PDMPA4VP049145	67094

**Seating Cap.**

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## Leipski, Tina (UTC)

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**From:** Petter Grytness <PGrytness@horizoncoachlines.com>  
**Sent:** Wednesday, August 20, 2014 3:57 PM  
**To:** Leipski, Tina (UTC)  
**Subject:** RE: DBA Name Change Application

Tina,  
Can you please forward page 6? Yes, I want to remove the dba names. It should read: Evergreen Trails Inc, dba Horizon Coach Lines. All references of Grayline of Seattle or Evergreen Trailways should be removed. Thanks!

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**From:** Leipski, Tina (UTC) [mailto:tleipski@utc.wa.gov]  
**Sent:** Wednesday, August 20, 2014 3:52 PM  
**To:** Petter Grytness  
**Subject:** RE: DBA Name Change Application

Hi Petter,

It looks like your application is missing Page 6.

Also, did you want to remove the following: Grayline of Seattle; Gray Line of Seattle; an Evergreen Trailways?

Thanks!  
Tina

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**From:** Petter Grytness [mailto:PGrytness@horizoncoachlines.com]  
**Sent:** Wednesday, August 20, 2014 3:03 PM  
**To:** UTC DL Transportation  
**Cc:** Mollie Jones  
**Subject:** DBA Name Change Application

Good Afternoon,  
See attached Application for our DBA Name change. Also see attached list of vehicles applicable as well. Let me know if there is anything further that you need. Thank you!

Petter L. Grytness, *CDS*  
Director of Safety, Training & Security

**Horizon Coach Lines**  
4500 W. Marginal Way, SW  
Seattle, WA. 98106  
206.626.5221 Office  
206.794.2454 Mobile  
206.626.5209 Fax

**Mission Statement:**

**Transportation Management Services and Horizon Coach Lines move people safely and reliably, delivering a personal and positive experience by valuing and supporting our customers and each other.**