

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**

#053132

(For Official Use Only) 111 0268 232 01	Company ID: 16975	Docket TE-
111 0268 232 02	Date Filed: 4/10/15	Safety Inspection:
111 0268 232 03	Reg Fees: OK \$1	Insurance:
111 0268	DOL: OK	SOS: OK
Receipt ID:	Payment ID:	CH -

Passenger Charter and Excursion Carrier Services <u>WAC 480-30</u>	Fee Required
<input checked="" type="checkbox"/> New Authority	\$200.00
<input type="checkbox"/> Transfer an existing certificate to a new owner or business structure. <ul style="list-style-type: none"> <input type="checkbox"/> If transfer, complete Attachment A. 	\$200.00
<input type="checkbox"/> Reinstate a previously cancelled certificate; <u>WAC-480-30-121</u> .	\$200.00
Plus,	
<input checked="" type="checkbox"/> Regulatory Fee - 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.	
Total number of vehicles to be operated _____ x \$25 per vehicle	= \$ <u>25</u>
Total due (\$200, plus, \$25 per vehicle)	= \$ <u>225.00</u>
<input type="checkbox"/> Name Change - <u>WAC 480-30-146</u>	\$ 35.00
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.	
Company Name: <u>SEATTLE CHARTER BUS LLC.</u>	

SECTION 1 – APPLICANT INFORMATION

Legal Name: SEATTLE CHARTER BUS LLC.
The legal name must match your registration with Department of Revenue

Trade Name(s) (if any): _____
Trade name(s) must be registered under your UBI number

Mailing Address:

Physical Address:

Street 659 S. WELLER ST. Street 659 S. WELLER ST.

City SEATTLE City SEATTLE

State/Zip WA 98104 State/Zip WA 98104

Phone Number: 206.519.5775 Fax Number: -

UBI #: 603 489 533 E-Mail: Seattlecharterbus@gmail.com

Website: -

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>TERRY CHENG</u>	<u>OPERATIONS MANAGER</u>	<u>25%</u>
<u>BARBARA CHENG</u>	<u>PRESIDENT</u>	<u>75%</u>

List other certificates or permits held with the commission: _____

USDOT # 2593579 If you don't have a USDOT #, go online at www.fmcsa.dot.gov/online-registration or contact the Washington State Patrol at 360-596-3810 for assistance.

Business Operations

Describe the type of tours/excursions you plan on providing:
TO PROVIDE BUS CHARTER TRANSPORTATION SERVICES.

SECTION 2 – EQUIPMENT

(Attach additional sheets if necessary)

License Number	Year And Make Of Vehicle	Vehicle ID Number	Seating Capacity
CP88358	1998 PREVOST	225	56

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 an 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: TERRY CHENG

Position: OPERATIONS MANAGER

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: TERRY CHENG Position: OPERATIONS MANAGER

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: TERRY CHENG Position: OPERATIONS MANAGER

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.

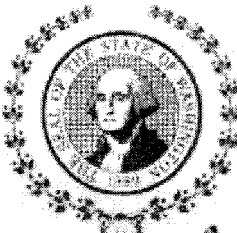
I certify that I am authorized to execute and file this document.

Printed name of applicant TERRY CHENG

Signature of applicant Terry Cheng

Date 04/08/2015 County, State SEATTLE, WASHINGTON

UNITED STATES OF AMERICA

The State of  Washington
Secretary of State

I, **KIM WYMAN**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF FORMATION

to

SEATTLE CHARTER BUS LLC

a/an WA Limited Liability Company. Charter documents are effective on the date indicated below.

Date: 3/19/2015

UBI Number: 603-489-533



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 3/23/2015

Leipski, Tina (UTC)

From: Andrew Karwowski <andrew@universalcoach.ca>
Sent: Thursday, April 09, 2015 4:37 PM
To: UTC DL Transportation
Subject: Application for UTC Passenger Charter and Excursion Carrier Services - Seattle Charter Bus LLC
Attachments: UCL_Application_SCB_P8.JPG; UCL_Application_SCB_P1.JPG;
UCL_Application_SCB_P2.JPG; UCL_Application_SCB_P3.JPG;
UCL_Application_SCB_P4.JPG; UCL_Application_SCB_P5.JPG;
UCL_Application_SCB_P6.JPG; UCL_Application_SCB_P7.JPG;
LLC_Certificate_Seattle_Charter_Bus.JPG

Dear Sir or Madam,

Please accept the attached scanned application for Passenger Charter and Excursion Carrier Services authority and a certificate for Seattle Charter Bus LLC. Should you have any questions or concerns please kindly contact me by email or a phone call.

Best regards,
Andrew

Andrew Karwowski, Regional Manager
Universal Coach Line Ltd.
128 – 11560 Eburne Way
Richmond, BC V6V 2G7

Office: 604.322.7799 ext. 103

Fax: 604.322.7978

Email: andrew@universalcoach.ca

24-Hour Emergency : 604.322.7799