

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

(For Official Use Only) Company ID: Docket TE-111 0268 232 01 111 0268 232 02 Date Filed: Safety Inspection: 111 0268 232 03 Reg Fees: 🔎 Insurance: 111 0268 DOL: \$05: Receipt ID: Payment ID: CH -

Pa	assenger Charter and Excursion Carrier Services WAC 480-30	Fee Required
X	New Authority Transfer an existing certificate to a new owner or business structure.	\$200.00
	If transfer, complete Attachment A.	\$200.00
	Reinstate a previously cancelled certificate; WAC-480-30-121.	\$200.00
Pli	us,	
	Regulatory Fee - In accordance with <u>RCW 81.70.350</u> "Regulatory Fees", the Com- Charter and Excursion companies to file reports of the number of vehicles operate	mission requires
	and pay the sum of \$25 for each vehicle operated. There is a minimum fee of \$25.	d 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 operatedx \$25 per vehicle	a by the company $= \$ \underline{25}$
	and pay the sum of \$25 for each vehicle operated. There is a minimum fee of \$25.	
	Total number of vehicles to be operatedx \$25 per vehicle Total due (\$200, plus, \$25 per vehicle)	= \$ <u>25</u> = \$
	and pay the sum of \$25 for each vehicle operated. There is a minimum fee of \$25. Total number of vehicles to be operatedx \$25 per vehicle	= \$ <u>25</u> = \$
	Total number of vehicles to be operated x \$25 per vehicle Total due (\$200, plus, \$25 per vehicle) Name Change - WAC 480-30-146 Application to change a company's corporate name, change a trade name, add a new change and a new change a company's corporate name, change a trade name, add a new change a company's corporate name.	= \$ <u>25</u> = \$

SECTION 1 – APPLICANT INFORMATION

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The legal name must match			
Trade Name(s) (if any): Seattle			
Trade na Mailing Address:	ame(s) must be registere	<u> </u>	="
Walling Audi ess.		<u>Pnysi</u>	ical Address:
Street 33228 43rd P/'S	Street	138 SW 157	th St # 205
City Federal way	City	Burien	
State/Zip <u>wA</u> 9800/	State/Zip	WA - 981	66
Phone Number: (206)304-46	<u>60</u> Fa	x Number:	
иві #: <u>663 108 619</u>) E-1	Mail: <u>Info. S</u>	Pb @Yahoo. (on
Website: www.SfLPb.C		, '	
Type of business structure			·
□ Individual □ Partnershi	p 🗆 Corpor	ation 🕱 Oth	ner (LP, LLP, LLC)
		•	. , , ,
If a Partnership, Corporation, or Other,	list the name, title, a	and percentage of pa	artner's share or stock
distribution for major stockholders:			
•	·		Stock Distributions
<u>Name</u>	<u>Title</u>		Stock Distributions or Percentage of Shares
			or Percentage of Shares
Name Kashif Nazir	<u>Title</u> Manager		•
Kashif Nazir	Manager		or Percentage of Shares
	Manager	sion:	or Percentage of Shares
List other certificates or permits held	Manager d with the commiss		or Percentage of Shares
Kashif Nazir List other certificates or permits held USDOT #_2175960	Manager d with the commiss	don't have a USDC	or Percentage of Shares // // // // // OT #, go online at
List other certificates or permits held	Manager d with the commiss	don't have a USDC	or Percentage of Shares // // // // // OT #, go online at
Kashif Nazir List other certificates or permits held USDOT #_2175960 www.fmcsa.dot.gov/online-registrates 360-596-3810 for assistance.	Manager d with the commiss	don't have a USDC	or Percentage of Shares // // // // // OT #, go online at
Kashif Nazir List other certificates or permits held USDOT #_2175960 www.fmcsa.dot.gov/online-registrate	Manager d with the commiss	don't have a USDC	or Percentage of Shares // // // // // OT #, go online at
Kashif Nazir List other certificates or permits held USDOT #_2175960 www.fmcsa.dot.gov/online-registrates 360-596-3810 for assistance.	Manager d with the commiss If you tion or contact the	don't have a USDC Washington State	or Percentage of Shares // // // OT #, go online at Patrol at
Kashif Nazir List other certificates or permits held USDOT #_2175960 www.fmcsa.dot.gov/online-registrate 360-596-3810 for assistance. Business Operations	Manager d with the commiss If you tion or contact the	don't have a USDC Washington State	or Percentage of Shares // // // OT #, go online at Patrol at
Kashif Nazir List other certificates or permits held USDOT #_2175960 www.fmcsa.dot.gov/online-registrate 360-596-3810 for assistance. Business Operations	Manager d with the commiss If you tion or contact the	don't have a USDC Washington State	or Percentage of Shares // // // OT #, go online at Patrol at

TABLE TO THE REAL PROPERTY CONVALS.	JESZGARJEN (1925)			
List the person and position responsible for uncorequirements of each category shown below.	derstanding and complying with the			
ANNUAL REPORTS AND REGULATORY FEES. You must file an annual safety report and pay regulatory fees by December 31 of each year.				
Name: Kashif Nazir	Position: 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: Kashif Nazir	Position: Manager			

<u>SECTION 4 – DECLARATION OF APPLICANT</u>

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	ashif Nazir
Signature of applicant	jolozy
Date_07 20	County, State King, WA



ATTACHMENT A

JOINT APPLICATION FOR TRANSFER OF CHARTER/EXCURSION AUTHORITY

Current Name on Certificate (Seller): South Finest limo and Party bus LLC					
Current Trade Name on Certificate (Seller):					
Address (Seller): 2819 Quail Run Drive, Mesquit, Texas: 75199					
Certificate Number: CH64413 Phone Number (Seller) (206)697-7300					
Have all fines or penalties owed to the Commission been paid? ☐ No ☑ Yes					
Has the closing safety report been filed with the Commission?					
Does the buyer agree to begin service as soon as the Commission authorizes the transfer?					
Yes □ No, If not, then when?					
RELEASE OF AUTHORITY					
I, the seller have sold or otherwise released interest in my Charter/Excursion Certificate authority CH-					
Name of Buyer: Kashif Nazir Seattle Finest Limo Trade Name of Buyer: ChilPuty Bus					
Trade Name of Buyer: Chil Party Bus					
We, as applicants, hereby jointly declare and affirm that all information is true to the best of our knowledge.					
Harran Rizh					
Seller's signature Date and Location					
Xariy 1/20					
Buyer's Signature Date and Location					



STATE OF WASHINGTON

UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 ◆ Olympia, Washington 98504-7250 (360) 664-1160 ◆ TTY (360) 586-8203

June 29, 2015

Kashif Nazir 138 SW 157th Street #205 Burien, WA 98166

Mr. Nazir:

According to the Mitigation Request you submitted to the Commission on behalf of Seattle Finest Limo and Party Bus, LLC (CH-64413), you indicated you have bought the company and took full control on January 1, 2015.

Unfortunately, the charter/excursion certificate CH-64413 has not been changed with our office. There is a transfer process that has to be completed before you can legally operate a charter/excursion company. I'm attaching an application for you to complete and submit to our office with the appropriate fees. I'm also including a copy of the rules and the Guide to Achieving a Satisafactory Safety Record.

If you have any questions or concerns regarding this application, please let me know. I can be reached at 360-664-1170 or email at tleipski@utc.wa.gov.

Sincerely,

Tina Leipski

Licensing Services

Enclosure

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

PENALTY ASSESSMENT TE-151046

PLEASE NOTE: You must complete and sign this document, and send it to the Commission within 15 days after you receive the penalty assessment. Use additional paper if needed.

I have read and understand RCW 9A.72.020 (printed below), which states that making false statements under oath is a class B felony. I am over the age of 18, am competent to testify to the matters set forth below and I have personal knowledge of those matters. I hereby make, under oath, the following statements.

[] 1.	1. Payment of penalty. I admit that the violations occurred. I have:		
	[] Enclosed \$	in payment of the per	nalty
	[] Submitted my payment My confirmation number is	of \$	online at www.utc.wa.gov.
2.	occur, for the reasons I desc for a decision by an adminis	ribe below, and I request strative law judge:	the alleged violations did not a hearing based on those reasons
[]3.	Application for mitigation be reduced for the reasons s	. I admit the violations, be et out below:	ut I believe that the penalty should 2: 25
OR	[] a) I ask for a hearing an administrative I	to present evidence on th aw judge for a decision	e information I provide above to y on the information I provide
	under penalty of perjury und g information I have presente		f Washington that the foregoing, true and correct.
Dated: _ Kashi Name of	C6/15/15 [month FNQZiv Seattle Respondent (company) - ple	/day/year], at <u>Burl</u> 2 Finesh imo & A ease print Sig	en, WA [city, state] why BUSUC gnature of Applicant
RCW 9/4 "Perjury proceedi required element defense	A.72.020: in the first degree. (1) A persong he makes a materially falsor authorized by law. (2) Knoof this crime, and the actor's to a prosecution under this second	son is guilty of perjury in the statement which he kno owledge of the materiality mistaken belief that his so ction. (3) Perjury in the fi	the first degree if in any official ows to be false under an oath y of the statement is not an tatement was not material is not a rst degree is a class B felony."
TE-	130217 auto	, mutigation	N

SEATTLE FINEST LIMO AND PARTY BUSILLO

UBI Number

603108619

Category

LLC

Active/inactive

Active

State Of Incorporation

WA

WA Filing Date Expiration Date 04/28/2011 04/30/2016

Inactive Date

Duration

Perpetual

Registered Agent Information

Agent Name

MUHAMMAD NAZIR

Address

33228 43RD PL S

City

FEDERAL WAY

State ZIP

WA 98001

Special Address Information

Address

138 SW 157TH ST #205

City

State

Zip

BURIEN

WA

98166

Current company mailing address

Governing Persons

Title

Name

Manager

RIZVI., HASSAN

Manager

NAZIR, MUHAMMAD

Manager

NAZIR, KASHIF

PO BOX 66337 **BURIEN** , WA 98166

33228 43RD PL S

FEDERAL WAY, WA 98001

33228 43RD PL S FEDERAL WAY, WA 98001

Papers been filed to remove this manager No longer with company)

working for company.