



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

#09657C

**APPLICATION FOR  
 CHARTER AND EXCURSION CARRIER SERVICES CERTIFICATE**

(For Official Use Only) 111 0268 232 01	Company ID: 17207	Docket TE-
111 0268 232 02	Date Filed: 8/20/15	Safety Inspection:
111 0268 232 03	Reg. Fees: OK x 1	Insurance:
111 0268	DOL: OK	SOS: OK
Receipt ID:	Payment ID:	CH -

Passenger Charter and Excursion Carrier Services	Fee Required
<input checked="" 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="checkbox"/> If transfer, complete Attachment A.</li> </ul>	<b>\$200.00</b>
<input type="checkbox"/> <b>Reinstate</b> a previously cancelled certificate;	<b>\$200.00</b>
<b>Plus,</b>	
<input type="checkbox"/> <b>Regulatory Fee</b> - In accordance with "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> <u>1</u> x \$25 per vehicle	= \$ <u>25<sup>00</sup></u>
<b>Total due</b> (\$200, plus, \$25 per vehicle)	= \$ <u>225<sup>00</sup></u>
<input type="checkbox"/> <b>Name Change - WAC</b>	<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.	
<b>Company Name:</b> <u>Crescent Bar Charters LLC</u>	

**SECTION 1 - APPLICANT INFORMATION**

Legal Name: CRESCENT BAR CHARTERS LLC  
The legal name must match your registration with \_\_\_\_\_

Trade Name(s) (if any): \_\_\_\_\_  
Trade name(s) must be registered under your \_\_\_\_\_

**Mailing Address:**

**Physical Address:**

Street 23758 CRESCENT BAY DR Street SAME  
STE 2  
City QUINCY City \_\_\_\_\_  
State/Zip WA 98848 State/Zip \_\_\_\_\_

Phone Number: 509-787-2135 Fax Number: \_\_\_\_\_

UBI #: 603430258 E-Mail: THEBUSSTOPATCRESCENTBAY@  
YAHOO.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:

Name	Title	Stock Distributions or Percentage of Shares
<u>CHRISTINE DAVIS</u>	<u>MEMBER</u>	<u>100</u>
_____	_____	_____
_____	_____	_____

List other certificates or permits held with the commission: \_\_\_\_\_

USDOT # 2790381 If you don't have a USDOT #, go online at  
or contact the Washington State Patrol at  
360-596-3810 for assistance.

**Business Operations**

Describe the type of tours/excursions you plan on providing: \_\_\_\_\_  
WINE TOURS / DINNER GROUPS  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 2 – EQUIPMENT**

*(Attach additional sheets if necessary)*

License Number	Year And Make Of Vehicle	Vehicle ID Number	Seating Capacity
AU44808	2008 FORD F-450	1FD0E455130A98539	14 + DRIVER

**SECTION 3 – SAFETY AND OPERATIONS**

In each of the categories shown below, list the person and position responsible for understanding and complying with the \_\_\_\_\_ ) 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: CHRISTOPHER DAVIS Position: MEMBER



This is a "printer friendly" page. Please use the "print" option in your browser to print this screen.



**Washington, State of - Utilities & Transportation Commission**

**Utilities & Transportation Commission POS**

Confirmation Number: 09657C  
 Payment Date: Thursday, August 20, 2015  
 Payment Time: 08:50AM PT

**Payer Information**

First Name: Christine Davis  
 Street Address: 23758 Crescent Bay Dr Ste 2  
 Town/City: Quincy, WA 98848  
 Country: United States  
 Daytime Phone Number: (509) 787 - 2135  
 E-mail Address: thebusstopatcrescentbay@yahoo.com  
 Company Name-If not a Company, provide name of Payee: Crescent Bar Charters LLC  
 Payment Menu : Application Fees  
 Payment Menu - Additional Payment:  
 Application Types (If Applicable):

**Card Information**

Card Type: Visa  
 Card Number: \*\*\*\*\*7875  
 Expiration Date: 02/2016  
 Card Verification Number: \*\*\*\*

**Payment Information**

Payment Type: Utilities & Transportation Commission POS  
 Payment Amount: \$225.00  
 Convenience Fee: \$5.63  
 Total Payment: \$230.63

Thank you for using Official Payments. If you have a question regarding your payment, please call us toll free at 1-866-621-4109. To make payments in the future, please visit our website at [www.officialpayments.com](http://www.officialpayments.com).



Copyright © 2015 Official Payments Corporation. All Rights Reserved.  
 Official Payments Corporation is a licensed money transmitter in 44 states, the District of Columbia, and Puerto Rico. Official Payments is not required to be licensed as a money transmitter in Indiana, Massachusetts, Montana, New Mexico, South Carolina or Wisconsin.