

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 checked="" type="checkbox"/> New Authority | \$200.00 |
| <input checked="" type="checkbox"/> Transfer an existing certificate to a new owner or business structure. | |
| <input type="radio"/> If transfer, complete Attachment A. | same |
| <input type="checkbox"/> Reinstate a previously cancelled certificate; <u>WAC-480-30-121</u> . | same |
| 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 <u> 2 </u> x \$25 per vehicle | = <u>\$50.00</u> |
| Total due (\$200, plus, \$25 per vehicle) | = <u>\$250.00</u> |
| <input checked="" type="checkbox"/> Name Change - WAC <u>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. | |
| ***Please also complete the Type of Payment page. | |
| Park's Shuttle LLC | |

| | | |
|--|--------------------------|--|
| (For Official Use Only) 111 0268 232 01 | Company ID: <u>18011</u> | Docket # 631355 <u>601310</u> |
| 111 0268 232 02 | Date Filed: | Safety Inspection: |
| 111 0268 232 03 | Reg Fees: | Insurance: |
| 111 0268 | DOL: | SOS: |
| Receipt ID: | Payment ID: | CH - |

631355

SECTION 1 – APPLICANT INFORMATION

Legal Name: Pack's Shuttle LLC
The legal name must match your registration with Department of Revenue

Trade Name(s) (if any): Pack's Party Bus
Trade name(s) must be registered under your UBI number

Mailing Address: **Physical Address:**

Street 618 E Wheeler Rd Street 618 E Wheeler Rd

City Moses Lake City Moses Lake

State/Zip WA, 98837 State/Zip WA, 98837

Phone Number: 509-762-1234 Fax Number: 509-762-1234

UBI #: 604-030-516 E-Mail: n.pack@packsdelivery.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>Nathan Pack</u> | <u>Member/Manager</u> | <u>50%</u> |
| <u>Stacie Pack</u> | <u>Member/Manager</u> | <u>50%</u> |

List other certificates or permits held with the commission: CH-067051

USDOT #2930663 If you don't have a USDOT # go online at www.fmcsa.dot.gov/online-registration or contact the Washington State Patrol at 360-596-3812 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> |
|-----------------------|---------------------------------|--------------------------|-------------------------|
| <u>BBS1973</u> | <u>2007 – FORD</u> | <u>1FDXE45P77DA60561</u> | <u>15</u> |
| <u>C30067D</u> | <u>2001 – FORD</u> | <u>1FDXE45F91HA88047</u> | <u>15</u> |
| | | | |

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: NATHAN PACK

Position: MEMBER/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: NATHAN PACK

Position: MEMBER/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: NATHAN PACK

Position: PACK

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 NATHAN PACK

Signature of applicant 

Date 9-20-16 County, State GRANT/WA

Packs Shuttle

n.pack@packsdelivery.com

From: Morgan, Pamm <pamm.morgan@sos.wa.gov>
Sent: Tuesday, August 23, 2016 9:47 AM
To: n.pack@packsdelivery.com
PACK'S SHUTTLE LLC



Office of the Secretary of State
Corporations & Charities Division

August 23, 2016

Congratulations:

Your online filing has been completed.

Company Name: PACK'S SHUTTLE LLC
UBI Number: 604-030-516
Effective date: 8/22/2016.
Application ID: 3899138

You will receive a certificate and a copy of your filed documents via US Mail.

Registering your business with the Secretary of State was your first step. Now, you may need to be registered with the [Business Licensing Service](http://bls.dor.wa.gov/) to address taxes, employment, and specific licensing requests. Please visit <http://bls.dor.wa.gov/> for more information. Be sure to use your new Unified Business Identifier (UBI) listed above on all state registrations.

Thank you for using our online filing service!

Corporations Division
801 Capitol Way S.
Olympia, WA 98504-0234

corps@sos.wa.gov
360-725-0377

United States Department of Transportation

FMCSA

Federal Motor Carrier Safety Administration

Summary Print View

09/20/2016 05:55 PM

Print Page

Payment Info

Thank you for submitting your application.

Your entity has been assigned USDOT Number 2930663 .

What's Next:

- Your application is being reviewed for statutory and regulatory compliance.
- You will receive a notification with your assigned USDOT Number and PIN Number.
- If you applied for an Operating Authority Registration, you will receive a notification with your assigned Docket Number and PIN Number.
- If you applied for an Operating Authority Registration, the following table provides how your Operating Authority will be presented in the other FMCSA Systems:

| Operating Authority Contained in Application | Operating Authority Presented in FMCSA Systems |
|--|--|
|--|--|

Prior to closing this window, it recommended that you print this page and a PDF version of the application to keep for your records. A PDF version of your application can be printed by selecting the Report menu option.

ATTENTION ATTENTION ATTENTION

- You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.
- Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.
- By using this information system, you understand and consent to the following:
 - You have no reasonable expectation of privacy regarding any communications or data transiting or stored on this information system. At any time, and for any lawful government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
 - Any communications or data transiting or stored on this information system may be disclosed or used for any lawful government purpose.

This system contains information protected under the provisions of the Privacy Act of 1974 (Public Law 93-579). Any privacy information displayed on the screen or printed shall be

DRIVER/VEHICLE EXAMINATION REPORT

Aspen 3.0.0.17



Washington State Patrol
Commercial Vehicle Enforcement Section
P.O. Box 42614
Olympia, WA 98504-2614
360-596-3815

Report Number: WAU007000091
Inspection Date: 03/10/2016
Start: 09:55 AM PT End: 10:15:26 AM PT
Inspection Level: VII - Jurisdictional Mandate
HM Inspection Type: None

PACKS DELIVERY LLC
618 E WHEELER RD
MOSES LAKE, WA 98837
USDOT#: 02409705
MC/MX#:
State#:
Location: WHEELER RD
Highway:
County: GRANT, WA

Phone#: (509)762-1234
Fax#:

Driver:
License#:
Date of Birth:
CoDriver:
License#:
Date of Birth:
Shipper:
Bill of Lading:
Cargo: EMPTY

VEHICLE IDENTIFICATION

Table with columns: Unit Type, Make, Year, State, Plate #, Equipment ID, VIN, GVWR, CVSA #, CVSA Issued #, OOS Sticker. Row 1: BU FORD 2007 WA AXX0293 YELLO 1FDXE45P77DA30561 14,050

BRAKE ADJUSTMENTS

Table with columns: Axle #, Right, Left, Chamber. Rows for Axle 1 and 2.

VIOLATIONS

Table with columns: Vio Code, Section, Unit, OOS, Citation #, Verify, Crash, Violations Discovered. Rows for codes 393.95A, 390.21B, and 396.17C.

HazMat: No HM Transported.

Placard: No Cargo Tank:

Special Checks: Local Enforcement

NOTE TO DRIVER: This report must be furnished to the motor carrier whose name appears at the top of this report. [49 CFR 396.9(d)(1)]

NOTE TO MOTOR CARRIERS: Pursuant to authority contained in Title 49, Code of Federal Regulations, Section 396.9(d)(3), within 15 days of the inspection sign below certifying all violations noted on this report have been corrected.

Signature Of Motor Carrier X: Title: Date:

Report Prepared By: WAYNE GILBERT (with signature)

Badge #: WAU584

Copy Received By:



02409705 WA WAU007000091