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**WASH. UT. & TP. COMM**

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) 111 0268 232 01	Company ID:	Docket TE-
111 0268 232 02	Date Filed:	Safety Inspection:
111 0268 232 03	Reg Fees:	Insurance:
111 0268	DOL:	SOS:
Receipt ID: 051237	Payment ID: Check # 1774 \$260.00	CH -

<b>Passenger Charter and Excursion Carrier Services <u>WAC 480-30</u></b>	<b><u>Fee Required</u></b>
<input type="checkbox"/> <b>New Authority</b>	<b>\$200.00</b>
<input checked="" type="checkbox"/> <b>Transfer</b> an existing certificate to a new owner or business structure. <input checked="" type="checkbox"/> If transfer, complete Attachment A.	<b>\$200.00</b>
<input type="checkbox"/> <b>Reinstate</b> a previously cancelled certificate; <u>WAC-480-30-121</u> .	<b>\$200.00</b>
<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> <u>1</u> x \$25 per vehicle	= \$ <u>25.00</u>
<b>Total due</b> (\$200, plus, \$25 per vehicle)	= \$ <u>225.00</u>
<input checked="" type="checkbox"/> <b>Name Change</b> - WAC <u>480-30-146</u>	<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>SUNWEST LIMO LLC</u>	

**TYPE OF PAYMENT**

**NOTE: A convenience fee of 2.5% (minimum fee of \$3.95) is charged by Official Payments for processing credit card payments.**

Check     Money Order

Amount: \$ 260<sup>00</sup>

Expiration Date: \_\_\_\_\_

Discover     Mastercard     Visa

CCV # \_\_\_\_\_ (three digit code on back of card)


Credit Card number:

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CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Company Name: Sunwest Limo LLC

Name (printed): Richard Ehlers      Date: 2-23-2017

Signature:       Title: owner

If paying by credit card, fax your application to 360-586-1181 or scan and email to [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov)

If paying by check or money order, mail the completed application with fees and attachments to:

Washington Utilities and Transportation Commission  
P.O. Box 47250  
Olympia, WA 98504-7250

WASHINGTON



UTILITIES AND TRANSPORTATION  
COMMISSION

**SECTION 1 – APPLICANT INFORMATION**

Legal Name: Sunwest Limo 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](#)

<b>Mailing Address:</b>		<b>Physical Address:</b>	
Street	<u>504 N. 66th Ave</u>	Street	<u>305 DIVISION ST</u>
City	<u>YAKIMA</u>	City	<u>YAKIMA</u>
State/Zip	<u>WA 98908</u>	State/Zip	<u>WA 98902</u>

Phone Number: 509-453-5466 Fax Number: \_\_\_\_\_

UBI #: 604 067 961 E-Mail: Sunwestllc1@gmail.com

Website: NONE

**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>SUNWEST LIMO LLC</u>	_____	<u>100%</u>
<u>RICHARD EHLERS</u>	<u>owner</u>	<u>100%</u>
_____	_____	_____

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

USDOT # 02454830 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 360-596-3810 for assistance.

**Business Operations**

Describe the type of tours/excursions you plan on providing: Limousine  
Service transporting groups for wine tours,  
weddings, etc.

## SECTION 2 – EQUIPMENT

(Attach additional sheets if necessary)

License Number	Year And Make Of Vehicle	Vehicle ID Number	Seating Capacity
B11310N	2003 FORD BUS	IFDXE45S03HA97400	22

## 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: Steve Walsh

Position: MANAGER

<b>OPERATIONAL RESPONSIBILITIES</b>	
List the person and position responsible for understanding and complying with the requirements of each category shown below.	
<b>ANNUAL REPORTS AND REGULATORY FEES.</b> You must file an annual safety report and pay regulatory fees by December 31 of each year.	
Name: <i>Richard Ehlers</i>	Position: <i>owner</i>
<b>STATE OF WASHINGTON GENERAL LAWS, RULES AND REGULATIONS.</b> You must comply with the regulations of local, state, and federal agencies such as, <u>but not limited to:</u> <u>Department of Labor and Industries, Department of Licensing, Secretary of State, Department of Revenue, Internal Revenue Service</u> and Employment Security.	
Name: <i>Richard Ehlers</i>	Position: <i>owner</i>

#### 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 *Richard Ehlers*

Signature of applicant 

Date *2-23-2017* County, State *YAKIMA, WA*

## ATTACHMENT A

### JOINT APPLICATION FOR TRANSFER OF CHARTER/EXCURSION AUTHORITY

Current Name on Certificate (Seller): Sunwest Enterprises LLC

Current Trade Name on Certificate (Seller): \_\_\_\_\_

Address (Seller): 305 Division St YAKIMA, WA 98902

Certificate Number: CH 065231 Phone Number (Seller) 509-453-5466

Have all fines or penalties owed to the Commission been paid?  No  Yes

Has the closing safety report been filed with the Commission?  No  Yes

Does the buyer agree to begin service as soon as the Commission authorizes the transfer?

Yes  No, If no, then when? \_\_\_\_\_

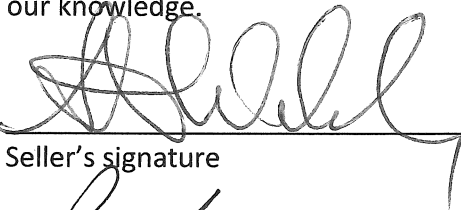
### RELEASE OF AUTHORITY

I, the seller have sold or otherwise released interest in my Charter/Excursion Certificate authority CH- 065231 to the following:

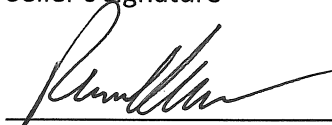
Name of Buyer: Richard Ehlers for Sunwest Limo LLC

Trade Name of Buyer: \_\_\_\_\_

We, as applicants, hereby jointly declare and affirm that all information is true to the best of our knowledge.

  
\_\_\_\_\_  
Seller's signature

2-23-2017 YAKIMA, WA  
\_\_\_\_\_  
Date and Location

  
\_\_\_\_\_  
Buyer's Signature

2-23-2017 YAKIMA, WA  
\_\_\_\_\_  
Date and Location