

(For Official Use Only)

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e-mail: Transportation@utc.wa.gov

# APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICES CERTIFICATE

Docket TE-

Safety Inspection:

Insurance: (1)

Company ID:

Date Filed:

Reg Fees:

111	. 0268	DOL:		SOS:	
Rec	eipt ID:	Payment ID:		CH -	
			<u> </u>		
				**************************************	
Pa	ssenger Charter and Excu	ırsion Carrier Servi	ces WAC 48	80-30	Fee Required
X	New Authority				\$200.00
	Transfer an existing certific	cate to a new owner	or business	structure.	
	<ul> <li>If transfer, complete</li> </ul>				\$200.00
	Reinstate a previously can		AC-480-30-1	L21:	\$200.00
Plu	IS.				
X	Regulatory Fee - In accorda Charter and Excursion compa and pay the sum of \$25 for e	anies to file reports of	the number	of vehicles operated b	
	Total number of vehicles	to be operated 28	_x \$25 per	vehicle	=\$_700.00
	<b>Total due</b> (\$200, plus, \$25	per vehicle)			= \$ 900.00
	Name Change - WAC 480-	<u>30-146</u>			\$ 35.00
	Application to change a com change the surname of an in	• •	. •	rade name, add a new	trade name or
	Company Name:				Control to the top of the control of

## **SECTION 1 – APPLICANT INFORMATION**

Legal Name: Chariot Transit Inc.		
The legal name must match your regist	ation with Department of Revenue	and and became a SAS
Trade Name(s) (if any): Chariot, Chariot	Transit Way Not listed	on business license, 505,
	be registered under your <u>UBI numb</u>	er UC
Mailing Address:		sical Address:
Street 95 Minna Street	Street Same	
	we want to the second of the s	
City San Francisco	City	on an analysis of the state of
State /7in OA 04105	Chaha /7:a	
State/Zip CA, 94105	State/Zip	and the second s
Phone Number: 888-735-5079	Fax Number: na	
Filotie Number. 600-730-5079	rax Number. ha	Harifflyganinghing a gray commencial and a second a second a second as
UBI#: 604-102-033	E-Mail: hello@cha	ariot.com
	<del></del>	
Website: www.chariot.com		
Type of business structure		
	/_	
☐ Individual ☐ Partnership		ther (LP, LLP, LLC)
If a Partnership, Corporation, or Other, list the	ama title and percentage of	nartner's chare or stock
distribution for major stockholders:	ame, title, and percentage or	partitler's share of stock
		Stock Distributions
Name <u>Title</u>		or Percentage of Shares
Ali Vahabzadeh CEO	/ Governor po	RBLG 0%
Jonathan Osgood Secret	ary/Governor"	0%
List other certificates or permits held with t	e commission: none	11. No. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1
USDOT# 2809686 Infrastate only	W. A. Santon, 18 and 18 and 18	
	If you don't have a USI	_
www.fmcsa.dot.gov/online-registration or o	ontact the Washington Stat	te Patrol at
360-596-3810 for assistance.		
<b>Business Operations</b>		
<u>business Operations</u>		
Describe the type of tours/excursions you p	an on providing: Chariot will	provide charter services in
Washington to groups looking to arrange tours, or		
Chariot will also offer employers charter contract		
-		

#### **SECTION 2 – EQUIPMENT**

(Attach additional sheets if necessary)

License Number	Year And Make Of Vehicle	Vehicle ID Number	Seating Capacity
	SEE ATTACHED	SPREADSHEET	

#### **SECTION 3 – SAFETY AND OPERATIONS**

In each of the categories shown below, list the person and position responsible for understanding and complying with the <u>Federal Motor Carrier Safety Regulations (FMCSR)</u> 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: Douglas M. Bria	Position: Vice President of Administration

### **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:

Douglas M. Bria

Position:

Vice President of Administration

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: Douglas M. Bria

Position:

Vice President of Administration

### 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 Raymond	S. Weber
Signature of applicant	h
Date 3/28/17	County, State King, Washington

**1**.

LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	VIV	SEATING CAPACITY
TBD	2017 Ford Transit Van	1FBVU4XM9HKA62852	15
TBD	2017 Ford Transit Van	1FBVU4XM0HKA62853	15
TBD	2017 Ford Transit Van	1FBVU4XM2HKA62854	15
TBD	2017 Ford Transit Van	1FBAX2CM2HKA62868	15
TBD	2017 Ford Transit Van	1FBVU4XMXHKA62844	15
TBD	2017 Ford Transit Van	1FBAX2CM9HKA62849	15
TBD	2017 Ford Transit Van	1FBAX2CM6HKA67667	15
TBD	2017 Ford Transit Van	1FBVU4XM9HKA67663	15
TBD	2017 Ford Transit Van	1FBVU4XM0HKA67664	15
TBD	2017 Ford Transit Van	1FBAX2CM4HKA87514	15
TBD	2017 Ford Transit Van	1FBAX2CM6HKA87515	15
TBD	2017 Ford Transit Van	1FBVU4XM2HKA90671	15
TBD	2017 Ford Transit Van	1FBVU4XM4HKA90672	15
TBD	2017 Ford Transit Van	1FBVU4XM6HKA90673	15
TBD	2017 Ford Transit Van	1FBVU4XM8HKA90674	15
TBD	2017 Ford Transit Van	1FBAX2CMXHKB16000	15
TBD	2017 Ford Transit Van	1FBAX2CM1HKB16001	15
TBD	2017 Ford Transit Van	1FBAX2CM2HKB16010	15
TBD	2017 Ford Transit Van	1FBAX2CM4HKB16011	15
TBD	2017 Ford Transit Van	1FBAX2CMXHKB16031	15
TBD	2017 Ford Transit Van	1FBAX2CM1HKB16032	15
TBD	2017 Ford Transit Van	1FBVU4XM6HKB15958	15
TBD	2017 Ford Transit Van	1FBVU4XM8HKB15959	15
CBT	2017 Ford Transit Van	1FBVU4XM4HKB15960	15
TBD	2017 Ford Transit Van	1FBVU4XM8HKB15962	15
TBD	2017 Ford Transit Van	1FBVU4XMXHKB15963	15
TBD	2017 Ford Transit Van	1FBVU4XMXHKA88294	15
TBD	2017 Ford Transit Van	1FBVU4XM1HKA88295	15