

## APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICES CERTIFICATE

### FOR OFFICAL USE ONLY

Date Filed: 6/285/2022		Company: Lux Bus America Co.			Docket #: <b>TE-220481</b>	
Receipt ID:		Payment ID: 19529	App Fee: \$200	Reg Fee: \$25	Total Paid: \$225	
111 0268		111 0268 232 01	111 0268 232 02		111 0268 232 03	

Passenger Charter and Excursion Carrier Services <b>WAC 480-30</b>	Fee Required
<input checked="" type="checkbox"/> <b>New Authority</b> – Complete this application. <input type="checkbox"/> <b>Transfer</b> an existing certificate to a new owner or business structure. Complete this application in addition to <b>Attachment A – Joint Application for Transfer of Charter/Excursion Authority</b> . <input type="checkbox"/> <b>Reinstate</b> a previously cancelled certificate; <b>WAC-480-30-121</b> .  <p style="text-align: center;"><b>Additional Fees</b></p> <p><b>Regulatory Fee</b> - In accordance with <b>RCW 81.70.350</b> "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.</p> <p><b>Total number of vehicles to be operated</b>      x \$25 per vehicle      = \$ 0</p> <p><b>Total due</b> (\$200, plus, \$25 per vehicle)      = \$ 200</p>	<b>\$200</b>
<input type="checkbox"/> <b>Name Change - WAC 480-30-146</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>New Company Name:</b>	<b>\$35</b>

### FILING YOUR APPLICATION

Select **one** of the following:

- Scan/PDF your application to [efileapp.utc.wa.gov](http://efileapp.utc.wa.gov) and pay online at [payments.utc.wa.gov](http://payments.utc.wa.gov) or,
- Mail your application **with** your check or money order to the following address:  
 UTC, PO Box 47250, Olympia, WA 98504-7250
  - PROCESSING MAILED APPLICATIONS WILL BE SIGNIFICANTLY DELAYED

ACH on-line (no service fee) or credit card on-line at [payments.utc.wa.gov](http://payments.utc.wa.gov) (2.5% or minimum of \$3.95 is charged by Official Payments for credit card processing).

DO NOT EMAIL YOUR CREDIT CARD INFORMATION



621 Woodland Square Loop SE  
 Lacey, WA 98503  
 P.O. Box 47250  
 Olympia, WA 98504-7250  
 Phone: 360-664-1222  
 Email: transportation@utc.wa.gov

**Section 1 - APPLICATION**

Legal Name: **Lux Bus America Co.**

Trade Name, if applicable:

Physical Address: **300 Deschutes Way SW, Ste 208 MC-CSC1, Tumwater, WA 98501**

Mailing Address: **851 E Cerritos Ave, Anaheim, CA 92805**

Telephone Number: **(714)939-9200** Email: **kenglish@luxbusamerica.com**

Contact Name: **Kayla English** Website: **www.luxbusamerica.com**

USDOT#: **1125439** If you do not have a USDOT number, go online at <https://cms8.fmcsa.dot.gov>

to apply or call 360-596-3812 for assistance.

Is your business registered with the **Department of Revenue**?  No  Yes

Business License/UBI#: **604 936 311**

**Business Structure**

Individual  Partnership  Corporation  Other (LP, LLP, LLC)

State of Incorporation

**California**

List the name, title and percentage of all partner's share or stock distribution for major stockholders:

Name	Title	Stock Distribution/% of Shares
<b>Matthew Brown</b>	<b>CEO</b>	<b>6</b>
<b>Matthew Austin</b>	<b>CFO</b>	<b>1</b>
<b>Doug Dossey</b>	<b>Director</b>	<b>84</b>
<b>William</b>	<b>Trimarco</b>	<b>2</b>

**Business Operations**

1. Describe the type of tours/excursions you plan on providing:

**Charter and shuttle services across the Seattle metro area.**

2. Have you or your company ever been cited for business-related violations of state laws or commission rules by the UTC or any other federal or state agency?  No  Yes If yes, please explain:



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3. Will you be employing CDL drivers?  Yes  No If "yes" you must submit proof of enrollment in a drug and alcohol testing program.

### Section 2 - EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheets if necessary). All vehicles must pass a Commercial Vehicle Safety Alliance inspection before a permit is granted. All fields are required. Per [WAC 480-30-036 \(2\)](#), "Party Bus" means any motor vehicle whose interior enables passengers to stand and circulate throughout the vehicle because seating is placed around the perimeter of the bus or is nonexistent and in which food, beverages, or entertainment may be provided. A motor vehicle configured in the traditional manner of forward-facing seating with a center aisle is not a party bus.

Year	Make	License Number	Vehicle ID (VIN)	Seating Capacity	Party Bus
2017	Prevost	CP98630	2PCH33490HC713439	56	NO <input type="checkbox"/>

*\*attach additional pages if necessary*

### Section 3 - SAFETY

Identify 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 the publication "[Your Guide to Achieving a Satisfactory Safety Rating](#)" for assistance with requirements.

**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. **Please attach evidence of your enrollment in a drug and alcohol testing program if your company has commercial vehicles and employs CDL drivers.**

**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: **Adan Valdez**

Position: **Director of Safety**

This certificate may be revoked upon evidence of non-compliance.



Concentra Medical Compliance Administration (CMCA)  
118 Portsmouth Ave. Stratham, NH 03885  
Tel - 800-775-5447

## Random Drug Testing Program Enrollment Certificate

Member Since: January 3, 2022

Certificate Created: June 20, 2022

Member: **Lux Bus America**  
851 East Cerritos Ave  
Anaheim, CA 92805

Random Pool: **Lux Bus LBA North FMCSA**  
Regulatory Mode: FMCSA  
Random Rates: 50% Drug; 10% Alcohol

Per DOT regulation, the above-named employer has enrolled in a random testing program for controlled substances and alcohol. As part of a random testing pool, selections are made based on the average number of safety-sensitive members in the pool using a scientifically valid computerized random selection process in which each covered individual has an equal probability of selection, in accordance with CFR 49 § 382.305.

The above-named employer has an independent pool, consisting of FMCSA covered drivers only.

Printing of this certificate is proof of membership with Concentra (CMCA) and is not to be construed as a guarantee of an operator's compliance with all regulations.

This certificate may be revoked upon evidence of non-compliance.



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**Section 4- OPERATIONAL RESPONSIBILITIES**

Identify 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 financial report with the commission and pay regulatory fees by May 1 of each year.

Name: **Kayla English**

Position: **Office 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: **Kayla English**

Position: **Office Manager**

**Section 5 - DECLARATION OF APPLICANT**

INITIAL

**KE** I understand that filing this application **does not** in itself constitute authority to operate as a passenger charter and excursion carrier.

**KE** 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.

**KE** 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.

**KE** I certify that I am the applicant, or I am authorized to execute and file this document on behalf of the applicant.

Name: **Kayla English**

Date: **06/21/2022**

**Section 6 – ADDITIONAL REQUIRED ATTACHMENTS**

For Transfer an existing certificate to a new owner or business structure: include “*attachment A – JOINT APPLICATION FOR TRANSFER OF CHARTER/EXCURSION AUTHORITY*”.