

Phone: 360-664-1222

Email: transportation@utc.wa.gov

# **AUTO TRANSPORTATION (BUS) COMPANY**

**Auto Transportation Company** means every person owning, controlling, operating, or managing any motor propelled vehicle used in the business of transporting person over any public highway in this state between fixed termini or over a regular route (example: transporting passengers and their baggage to the airport), and not operating exclusively within the incorporated limits of any city or town. You may not operate as an auto transportation company until you have been approved and receive a certificate from the Utilities and Transportation Commission. Auto transportation company applications are subject to public notice, objection and may be set for hearing.

If you provide regular route intrastate service under a federal grant of authority under the provisions of 49 U.S.C§13902, the commission will grant you an auto transportation certificate consistent with the federal grant of authority and limited to intrastate operations that are conducted together with regularly scheduled interstate operations on the same route. You must provide a copy of your federal order granting authority and verify that you have paid Unified Carrier Registration fees.

This application packet contains the following information:

- Application form
- Checklist for a completed application
- Sample Standard Tariff and Time Schedule Format and Fare Flexibility Tariff
- WAC 480-30 Rules Relating to Passenger Transportation Companies
- "Your Guide to Achieving a Satisfactory Safety Rating"

#### **Insurance Requirements**

You must file and maintain bodily injury and property damage insurance (Form E) covering each motor vehicle you operate in Washington. The commission must be shown as the certificate holder. Insurance minimum limits are:

Have a passenger seating capacity of 15 or less (including the driver)	Must have bodily injury and property damage insurance or surety bond with a minimum limit of \$1,500,000 combined single limit.	
Have a passenger seating capacity of 16 or more (including the driver)	Must have bodily injury and property damage insurance or surety bond with a minimum limit of \$5,000,000 combined single limit.	

#### FILING YOUR APPLICATION

The commission has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1243 or The Washington Relay Service at 7-1-1 or 1-800-833-8384. Select **one** of the following:

- Scan/PDF your application to efileapp.utc.wa.gov and pay online at payments.utc.wa.gov
- Mail your application with your check or money order to the following address:

UTC, PO Box 47250, Olympia, WA 98504-7250

ACH online (no service fee) or credit card on-line at **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

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# **CHECKLIST**

	Type of authority requested – check one.
	If you also plan to operate as a charter/excursion service, complete Attachment F.
	Correct fees (including \$25 for each vehicle to be used if also applying for charter/excursion).
	Complete Type of Payment sheet.
Sec	tion 1 – Business Information
	Legal and Trade Name – as registered with Business Licensing Services.
	If corporation or LLC, name must match registration with Secretary of State's office.
	Phone, fax, and email address.
	Physical address – and mailing address, if different from physical address.
	USDOT number – All carriers must have one. The legal name on the MCS-150 must match your application name.
	UBI number – as registered with Business Licensing Services.
	Business Structure – If partnership, corporation, or other, list members of partnership, corporation, or LLC and
	percentages.
Sec	tion 2 – Proposed Service Information
	Type of service to be provided (door-to-door services and/or scheduled service).
	Map of the proposed line, route, or service territory that meets standards described in WAC 480-30-051.
	Statement of conditions that justify the proposed service (use <i>Attachment A</i> ).
	Complete description of the proposed service, including the line, route, or service territory described in terms
	such as streets, avenues, roads, highways, townships, ranges, cities, towns, counties, or other
	geographic descriptions.
	Statement of applicant's prior experience and familiarity with the statutes and rules that govern the operation it
	proposes.
Sec	ction 3 – Tarif and Time Schedule
	Proposed tariff and time schedule – according to the samples provided for filing tariff and time schedule.
	If you are applying for flexibility rates, you must also complete Attachment H to show your proposed base rate
	and maximum rate.
Sec	tion 4 – Financial Statement
	Financial statement of assets and liabilities. Attach a balance sheet in lieu of using the form if desired.
	Ridership and revenue forecasts for the first 12 months of operation.
	Pro forma balance sheet and income statement for first 12 months of operation.
Sec	tion 5 – Hearing Information
	List applicable information in case your application is scheduled for or you anticipate a formal hearing.
Sec	ction 6 – Equipment List
	List of equipment to be used in providing the proposed service. Attach additional sheets if necessary.
Sec	tions 7 and 8 – Operations and Safety
	Operational responsibilities – completed with person(s) and position(s) who will be responsible for
	understanding and complying with the requirements.
	Safety & Operations – completed with the person(s) and position(s) who will be responsible for understanding
	and complying with the requirements.
Sec	tion 9 – Declaration of Application
	Declaration of Application – sign and date application.

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# **AUTO TRANSPORTATION AUTHORITY APPLICATION**

FOR OFFICAL USE ONLY			
DATE FILED: 1/18/2022	Company: Head, Jordan d/b/a Loop Connector Docket #: TC-220036		
111-0268	Receipt ID:	Payment ID: 18292	Amount Paid: \$250
111-0268-232-01	111-0268-232-02	111-0268-230-01	111-0268-230-02

Ту	Type of Passenger Transportation Authority Requested (check one box)  Fee Required			
	<b>V</b>	New Certificate (auto transportation company certificates include statewide charter and excursion carrier service if marked below). Complete Sections 1-8 and Attachment A. Submit a proposed tariff and time schedule.  Do you plan on providing charter/excursion service? Yes No  If yes, complete Attachment F. Included \$25 per van for charter/excursion	\$200.00	
		Extension of Existing Auto Transportation Certificate C- Complete Sections 1-8. Submit a proposed tariff, time schedule and Attachment A.	\$150.00	
		Transfer or Lease Auto Transportation Authority – Complete Sections 1-8 and Attachments C & G.  Transferring all of Certificate C-  Transferring a portion of Certificate C-	\$200.00	
		<b>Temporary Auto Transportation Authority</b> - New temporary authority or temporary to operate pending a commission decision on a parallel filed permanent application. Complete Sections 1-8 and <i>Attachment B</i> .	\$150.00	
		Mortgage of Certificate – Complete Section 1 and Attachment E.	\$35.00	
		Name Change – Change in corporate name, change in trade name; adding or deleting a trade name; or changing the surname of an individual owner or partner. Complete Section 1 and <i>Attachment D</i> .	\$35.00	
	$\overline{\Box}$	Reinstatement of Canceled Certificate – Complete Sections 1, 2 and 8.	\$200.00	

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# **Section 1 - Business Information** Legal Name: Head, Jordan James Trade Name, if applicable: Loop Connector Shuttle Physical Address: 9360 Saunders Rd. Peshastin, WA 98847 Mailing Address: 9360 Saunders Rd. Peshastin, WA 98847 Telephone Number: **5093932067** Email: jhead90@gmail.com Fax Number: Contact Name: Jordan Head USDOT#: If you do not have a USDOT number, go to the FMCSA website to apply or call 360-596-3812 for assistance. Is your business registered with the **Department of Revenue?** No Yes Business License/UBI#: 603-398-290 **Type of Business** Individual Partnership Corporation Other (LP, LLP, LLC) State of Incorporation Washington List the name, title, and percentage of all partner's share or stock distribution for major stockholders: Title Stock Distribution/% of Shares Name Section 2 – Proposed Service Information What type of service do you plan on providing: door-to-door services and/or scheduled service? Door-to-door service - Service provided between locations identified by the passengers and points specifically named by the company in its filed tariff and time schedule. Door-to-door service requires a time schedule in compliance with WAC 480-30-281(2)(c) and may be restricted to "by reservation only"; and/or, Scheduled service - Service provided between locations specifically named by the company (for example, the X Hotel at 4th and Main) and points specifically named by the company in its filed tariff and time schedule. Scheduled service requires the company to file a time schedule in compliance with WAC 480-30-281 (2)(b) and may be restricted to "by reservation only." 2) Provide the following documents with your application: A map of the proposed line, route, or service territory that meets the standards described in WAC 480-30-051. Support statements for proposed service authority.

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3) Describe the proposed type of service (see WAC 480-30-096) including the line, route, or service territory described in terms such as streets, avenues, roads, highways, townships, ranges, cities, towns, counties or other geographic description:

Shuttle service to transport hikers doing The Enchantments traverse from one trailhead to the next (Snow Lakes TH to Stuart Lake TH) a total of 8 miles primarily on forest service roads. Running shuttles from 5AM - 7AM in the morning, a total of 3 trips per morning, to require hikers to only bring one vehicle to complete the thru hike. 4 miles on Icicle Canyon road, and 4 miles up FS road #7601.

4) State the conditions that demonstrate this proposed service is for the public convenience and necessity:
Hikers come from all over to do this hike, unforutnatly it requires two cars or hitchhike to retrieve the other car at either end of the hike. This service would provide a way to only bring one car, save time for them, and free up more parking space for other hikers. It is a necessary service for almost ALL thru hikers, otherwise they have to bring a second car which is not convienet for those driving from a long distance away.

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State the applicant's prior experience and familiarity with the statutes and rules that govern operations they present the spoken with the Forest Service about this service and have been approved to transport hikers up the required forest service roads as they are outside of city limits and do not fall und Leavenworth city jurisdiction.		
	Do other auto transportation companies currently provide service between any of the points or along any portion of the route you propose to serve? No Yes If yes, list the names and addresses of companies:	
-	Do you currently hold, or have you ever held, an auto transportation certificate? No Yes f yes, please indicate your certificate number C-	
	Have you ever applied for and been denied an auto transportation certificate? No Yes f yes, please explain:	

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## Section 3 - Tariff and Time Schedule

10) Is this application for temporary authority, a new certificate, or extension of existing certificated authority? No Yes If yes, you must include a proposed tariff and time schedule that is in compliance with WAC 480-30-436.			
11) Are you applying for fare flexibility as described in WAC 480-30-420? Yes No  If yes, complete Attachment H to show your proposed base rate and maximum rate.			
12) If this application is a transfer or a lease of authority from an existing certificated company, you must either file a new tariff and time schedule at the same rate levels as on file, or, you must adopt the current certificate holder's tariff and time schedule. To file a new tariff, use the standard tariff format attached to this application or an approved alternate format. Indicate which option you will use:  Adopt  File new tariff			
Section 4 - Financial Statement Complete the following or attach a balance sheet, profit and loss statement, or business plan.			
Assets		Liabilities	
Cash in Bank	Cash in Bank Salaries/Wages Payable		
Notes Received Accounts Payable			
Investments		Notes Payable	
Other Current Assets	Other Current Assets Mortgages Payable		
Prepaid Expenses	Prepaid Expenses Total Liabilities \$ 0		\$ 0
Land and Buildings Net Worth \$ 0		\$ 0	
Trucks and Trailers \$7200 Preferred Stock			
Office Furniture Common Stock			
Other Equipment	Other Equipment Retained Earnings		
Other Assets	Other Assets Capital		
TOTAL ASSETS \$7200 TOTAL LIABILITIES AND NET WORTH \$ 0			

## In addition, the application must include the following (see WAC 480-30-096)

- Ridership and Revenue forecasts for the first twelve months of operation.
- A pro forma balance sheet and income statement for the first twelve months of operation.

Section 5 – Hearing Information			
If the commission assigns this application for a formal hearing, estimate the number of witnesses you will present			
and the amount of time you will need for your presentation.			
Number of witnesses:	Amount of time:		
Will an attorney be representing you? No Yes If Yes, complete the following:			
Attorney's Name:	Attorney's Phone Number:		
Attorney's Firm:	Fax Number:		
Street:			
City, State, Zip:	Email:		

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### Section 6 - Equipment List

Describe the equipment that will be used (attach additional sheet if necessary). All vehicles must pass a Commercial Vehicle Safety Alliance inspection before an application 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 aicle is not a narty hus

Year	Make	License Number	Vehicle ID (VIN)	Seating Capacity	Party Bus?
1997	Ford	bjp5757	1fbjs31s8vhb60642	15	
2002	Ford	btl9797	1fbss31l42ha14473	15	

<sup>\*</sup>attach additional pages if necessary 13) Will you be employing CDL drivers?

## **Section 7 - Operational Responsibilities** Identify the person and position responsible for understanding and complying with the requirements of each category shown below: Tariffs, Time Schedules, Rates and Rate Filings (WAC 480-30-251 through WAC 480-30-436) Companies must file a tariff showing all rates it will impose on its customers, together with rules that govern how rates will be assessed. Companies must also file a time schedule. Charter and excursion only carriers are not required to file tariffs and time schedules per WAC 480-30-251. Name: Jordan Head Position: Owner Annual Reports and Regulatory Fees (WAC 480-30-066 through WAC 480-30-081) Auto transportation companies must file an annual report of its financial and operational activity and pay regulatory fees by May 1 of each year. Charter and excursion carriers must file an annual safety report by May 1; and pay regulatory fees by Dec. 31 of each year. Name: Jordan Head Position: Owner Customer Service Person responsible for customer service complaints, and customer notice requirements. Name: Jordan Head Position: Owner State of Washington General Laws, Rules and Regulations Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Revenue and Internal Revenue Service (business licensing, taxes); and Employment Security. Name: Jordan Head

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Position: Owner



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Section 8 - Safety

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.

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

Name: Jordan Head	Position: Owner		
<b>Driver Qualification Requirements</b> (Title 49, Code of Federal Regulations Part 391) Drivers must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.			
Name: Jordan Head	Position: Owner		
<b>Driver Hours of Service</b> (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.			
Name: Jordan Head	Position: Owner		
Inspection, Repair and Maintenance (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.			
Name: Jordan Head Position: Owner			
Safety Regulations, General (Title 49, Code of Federal Regulations Part 390)			
Name: Jordan Head Position: Owner			
Driving of Commercial Motor Vehicles (Title 49, Code of Federal Regulations Part 392)			
Name: Jordan Head Position: Owner			
Parts and Accessories Necessary for Safe Operation (Title 49, Code of Federal Regulations Part 393)			
Name: Jordan Head	Position: Owner		

### **Section 9 - Declaration of Applicant**

INITIAL

I understand that filing this application **does not** authorize me to start operations requested or in the territory described until the commission grants the application and issues a certificate.

I understand the responsibilities of a passenger transportation company, 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 the applicant, or I am authorized to execute and file this document on behalf of the applicant.

Name: **Jordan Head** 

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