

**WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION**

1300 South Evergreen Park Drive SW, PO Box 47250  
Olympia Washington 98504-7250  
Phone (360) 664-1222  
Fax (360) 586-1181

TC-041353

**APPLICATION FOR BUS CERTIFICATE**

Fee: \$150.00

CID M-32802 Reception NO. 0008026 Application No. D-79295  
Date Received 7/28/04 Amount \$ 150.00 Additional Permit C-1035  
Fitness \_\_\_\_\_ Rates \_\_\_\_\_ Schedule \_\_\_\_\_ Insurance OK CHtel6

Application is made to the Washington Utilities and Transportation Commission for a Certificate of Public Convenience and Necessity, as provided in Chapter 81.68 RCW.

**APPLICATION**

Fee - \$150

(Check One Only)  ORIGINAL  EXTENSION

NOTE: APPLICATION MUST BE COMPLETED IN FULL.  INDIVIDUAL  PARTNERSHIP  
 CORPORATION

1. NAME OF APPLICANT Diamond West Transportation  
(Must correspond with name on insurance policy)

2. D/B/A: \_\_\_\_\_

3. MAILING ADDRESS P.O. Box 1313 PHYSICAL ADDRESS 18225 SE 416 St.  
ENUMCLAW, WA 98022 ENUMCLAW, WA 98022

BUSINESS TELEPHONE NUMBER (360) 802-1115 FAX NUMBER (360) 802-1119

UBI # 601-936-913 E-MAIL diawest@hotmail.com

4. IF APPLICANT IS A CORPORATION, LIST NAME, TITLES, AND PERCENTAGE OF STOCK OF PRINCIPAL SHAREHOLDERS. IF APPLICANT IS A PARTNERSHIP, LIST NAMES, ADDRESSES, AND PERCENTAGE OF INTEREST OF ALL PERSONS HAVING AN EQUITY IN THE BUSINESSES:

William Davis 51% Joseph Davis 49%

5. Will an attorney be representing you at the hearing?  Yes  No

If yes, list specific attorney's name: \_\_\_\_\_

Phone No. \_\_\_\_\_ Address: \_\_\_\_\_

6. If the Commission assigns this application for formal hearing, applicant will present approximately \_\_\_\_\_ witnesses at the hearing. Estimate how much time your presentation will take. \_\_\_\_\_
7. Describe your proposed route using state or county highway numbers, AND attach a detailed map or sketch showing the proposed route or area.  
 Passenger and Express between Seattle and Ellensburg via I-90, SR-10, SR 906, and SR 97 with all intermediate stops, with service to off route point of Redmond via I-405 and SR-520

(NOTE: This statement may be a separate attachment labeled "7")

8. Is this an application for extension of your present route?  Yes  NO  
 If yes, attach a copy of your current certificate.
9. Attach two copies of your proposed tariff, which shows both the rates or fees to be charged for service and rules and regulations which govern how they will be assessed.
10. Attach two copies of your proposed time schedule and route, naming all service points.
11. State fully the conditions that justify the Commission granting you a certificate.

This is an extension to current certificate

(NOTE: This statement may be a separate attachment labeled "11")

12. List the terminal facilities you propose to use at each of the named points on your proposed route.  
 not @ this point

(NOTE: This statement may be a separate attachment labeled "12")

13. You must submit, prior to issuance of a certificate to operate as an Auto Transportation Company, a Form "E" Certificate of Insurance issued by an insurance company authorized to write insurance in the state of Washington.
14. List the names and addresses of all other transportation providers currently furnishing similar service by means of motor coach, railroad or boat lines, between any of the points or along any portion of the route you propose to serve.  
 N/A

(NOTE: This statement may be a separate attachment labeled "14")

15. Complete the following financial data\*:

ASSETS		LIABILITIES	
Cash in Bank and on hand	\$ 5000.	Salaries/Wages Payable	\$ 800.
Notes Receivable	\$	Accounts Payable	\$ 2500.
Accounts Receivable	\$ 6000.	Notes Payable	\$
Investments	\$	Mortgages Payable	\$
Other Current Assets	\$	Contracts and Bonds Payable	\$
Prepaid Expenses	\$	Other	\$
Land and Buildings		<b>TOTAL LIABILITIES</b>	\$ 3200.
Equipment (buses)	\$ 45,000	<b>NET WORTH</b>	
Office Furniture	\$ 1500.	Preferred Stock	\$
Other Equipment	\$ 6000.	Common Stock	\$
Other Assets <i>A/C + Mech Tools</i>	\$ 5000.	Retained Earnings	\$
	\$	Capital	\$
<b>TOTAL ASSETS</b>	\$ 82000.	<b>TOTAL LIABILITIES AND NET WORTH</b>	\$

\*Enclose Balance Sheet and Profit and Loss Statement, if available, and label it "15"

16. Complete the following statement of equipment to be used in connection with proposed service or attach equipment list with the appropriate information.

LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	SERIAL NUMBER (VEHICLE IDENTIFICATION NUMBER)	SEATING CAPACITY
#4903	1998 Van Hool		50
#807	1991 Ikarus	1H943601ZMA155243	64
#1108	1989 RTS TMC	1TUMDT9A4KR826822	46

(NOTE: This information may be an attachment labeled "16").

17. SAFETY COMPLIANCE REVIEW AND QUESTIONNAIRE:

GENERAL

Do you have a copy of the laws and rules relating to auto transportation companies?..... YES X NO \_\_\_ N/A \_\_\_  
Have you been cited within the last three years by the Commission for violations of it rules or laws? \_\_\_ X \_\_\_

If Yes, explain: \_\_\_\_\_

Are you familiar with the state passenger carrier safety rules?..... X \_\_\_ \_\_\_  
Will management review the carrier's compliance status on a periodic basis?..... X \_\_\_ \_\_\_

NOTIFICATION AND REPORTING OF ACCIDENTS

Are you familiar with the Commission accident reporting rule? ..... YES X NO \_\_\_ N/A \_\_\_  
Will you take any action against drivers involved in preventable accidents?..... X \_\_\_ \_\_\_

PART 391 - QUALIFICATION OF DRIVERS

Do you have written hiring policies/procedures that are being followed when hiring new drivers? X YES NO N/A  
Are oral interviews conducted with new drivers to verify information submitted on their applications? X  
Will you have a system established to ensure drivers' medical certificates remain current?... X  
Will you verify that physicians completing medical certifications are knowledgeable about the instructions for performing and recording driver physical examinations?..... X  
Will you review the results of the health history and physical examination?..... X  
Will you have a system established that will ensure drivers' operating licenses remain current?... X  
Will you have a system established that will ensure drivers' annual reviews and annual record of violations remain current?..... X  
Will you comply with the road test provisions of Section 391.31?..... X  
Can you maintain and produce complete driver qualification files on drivers?..... X

PART 392 - DRIVING OF MOTOR VEHICLES

Do you have established procedures concerning the use of alcohol and drugs?..... YES X NO \_\_\_ N/A \_\_\_  
Do you have a policy for monitoring speed?..... X \_\_\_ \_\_\_

PART 395 - HOURS OF SERVICE OF DRIVERS

Can you explain the hours of service limitations, i.e., 10, 15, 60 in 7, 70 in 8?..... YES X NO \_\_\_ N/A \_\_\_  
Will you file records of duty status in systematic manner?..... X  
Will drivers be required to complete recaps of their records of duty status?..... X

Will dispatchers be aware of drivers' hours of service prior to trip?..... X \_\_\_ \_\_\_

Will other independent records be compared to drivers records of duty status for accuracy?... X \_\_\_ \_\_\_

Will you have a system for recording hours of duty status on 100 mile radius drivers?..... X \_\_\_ \_\_\_

Will you have a disciplinary policy for noncompliance with Part 395?..... X \_\_\_ \_\_\_

**PART 396 - INSPECTION, REPAIR AND MAINTENANCE**

	YES	NO	N/A
Will you have written procedures explaining a systematic, periodic maintenance program?...	<u>X</u>	___	___
Will you periodically review maintenance records for all equipment?.....	<u>X</u>	___	___
Will you comply with the vehicle inspection procedure?.....	<u>X</u>	___	___

**PART 396 - INSPECTION, REPAIR AND MAINTENANCE**

	YES	NO	N/A
Will you train drivers to perform pre-trip inspections?.....	<u>X</u>	___	___
Will you maintain the prior three months vehicle inspection reports on a vehicle?.....	<u>X</u>	___	___
Will you maintain a complete maintenance file on all vehicles?.....	<u>X</u>	___	___

The applicant understands that the filing of this application does not in itself constitute authority to operate; that he/she is familiar with the law and the rules of the Washington Utilities and Transportation Commission governing Auto Transportation Companies and promises strict compliance therewith.

Dated at: Enumclaw, Washington, 7-24-04  
(City or Town) (Month/Day/Year)

Diamond West Transportation  
(Name of applicant)

By: William J. Davis  
(Signature)

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

7/24/04  
(Date and Place)

William J. Davis  
(Signature)

**TIME SCHEDULE NUMBER**   1  

Cancels

Time Schedule Number \_\_\_\_\_

Of

Company Name: Diamond-West Transportaiton

Certificate Number: C-1035

Address: P.O. Box 1313

City/State/Zip: Enumclaw, WA 98022

**TERRITORY:**

Between Seattle and Ellensburg, via I-90, SR-10, SR-906, and SR-97 with all intermediate stops with service to off route point of Redmond via -I405 and SR-520.

**BY THE FOLLOWING ROUTE:**

From Seattle to Ellensburg with all intermediate stops.

<u>FROM:</u>	<u>TO:</u>	<u>DEPARTURE TIMES:</u>	<u>MILEAGE:</u>	<u>ARRIVAL:</u>
Ellensburg	Seattle	4:30 AM (a)	110	6:50 AM
Seattle	North Bend	5:00 AM (a)	110	7:15 PM
Seattle	Snoqualmie Pass	7:00 AM (b)	52	8:30 AM
Snoqualmie Pass	Seattle	5:00 PM (b)	52	6:30 PM

- (a) weekdays only – No Sat/Sun or Holiday
- (b) weekends and holidays only
- (c)

Issue Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Issued by: \_\_\_\_\_

Effective: \_\_\_\_\_ TC- \_\_\_\_\_ LSN \_\_\_\_\_

Order/Other \_\_\_\_\_ By: \_\_\_\_\_

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TARIFF NO. 1

Cancels

TARIFF NO. \_\_\_\_\_

Of

Company Name: Diamond West Transportation

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For the transportation of passengers and express in the following territory:

Between Seattle and Ellensburg via I-90, SR-10, and SR-906 with all intermediate stops with service to the off route point of Redmond via I-405 and SR-520.

Issued by:

Name: William J. Davis

Address: P.O. Box 1313

City, State/Zip: Enumclaw, WA 98022

Telephone No: 360-802-1115

Telefacsimile No. 360-802-1119

Issue Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_

(For Official Use Only)

Effective: \_\_\_\_\_ TC \_\_\_\_\_ LSN \_\_\_\_\_

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Tariff No: 1

Revised Page No. \_\_\_\_\_

Company Name: Diamond-West Transportation

## RATE SCHEDULE

And	BETWEEN				
	Seattle	North Bend	Snoq. Pass	Cle Elum	Ellensburg
Seattle	-	\$6.00	\$10.50	\$18.00	\$22.00
North Bend	\$6.00	-	\$4.50	\$12.00	\$16.00
Snoq. Pass	\$10.50	\$6.00	-	\$8.00	\$12.00
Cle Elum	\$18.00	\$12.00	\$8.00	-	\$12.00
Ellensburg	\$22.00	\$16.00	\$12.00	\$8.00	-

Issue Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_

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Cle Elum	\$18.00	\$12.00	\$8.00	-	\$12.00
Ellensburg	\$22.00	\$16.00	\$12.00	\$8.00	-

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Tariff No. 1  
No. \_\_\_\_\_

Revised Page

Company Name: Diamond West Transportation

## PASSENGER RULES

**Animals:** Generally dogs, cats and other live animals or birds will not be carried. Exception: Service animals traveling with sight or hearing-impaired passengers will be carried free of charge. Service animals will not be permitted to occupy a seat, but must lie or stand at the feet of the passenger.

**Objectionable passengers:** This company reserves the right to refuse to transport persons under the influence of drugs or alcohol, or who are incapable of taking care of themselves, or whose conduct or behavior may be objectionable to other passengers. The carrier also reserves the right to refuse carriage of any materials that the carrier considers unsafe and not in the best interest of the passengers.

**Schedule maintenance:** Carrier will not be liable for delays caused by accidents, breakdowns, bad conditions of roads, snow storms or other conditions beyond the control of the carrier and does not guarantee arrival at, or departure from, any point at any specific time. The time schedules provided are schedules the carrier endeavors to maintain, but does not guarantee to be able to do so at all times due to conditions listed above.

**Stopovers:** Stopovers will be allowed at any point on the route within the limit of the ticket, upon notice to the agent or bus driver.

The company will redeem unused portions of tickets by charging the regular fare for the portions used and refunding the balance of the purchase price. The company will redeem commuter tickets by charging the cheapest fare applicable to the purchase price and refunding the balance of the purchase price.

Issue Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Issued By: \_\_\_\_\_

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Effective \_\_\_\_\_ TC- \_\_\_\_\_ LSN \_\_\_\_\_

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