



UTILITIES AND TRANSPORTATION COMMISSION

Assignment Report Motor Carrier Safety

Upload? [ ] Yes [X] No - Reason For Not Uploading: New Carrier Applicant

1. Investigator(s): Ray Gardner J577

2. Assignment No.: 112125 / 112106

3. Current Date: 8/7/12

4. Date of Activity: 8/6/12

5. Carrier Name: James D. Pilant DBA Amazons Limousines

6. Permit: TE-121063 Pending 7. New Entrant date of authority: Docket #

8. MOTCAR No.: 1 D 6944

9. Carrier is: [X] Intrastate Only [ ] Interstate Only [ ] Intra and Interstate

10. Industry Code: 232

11. USDOT No.: 2315942

12. MC No.:

13. [ ] Destination Check

Form for Destination Check containing checkboxes for safety plan, inspection levels, and special emphasis.

14. [ ] Safety Complaint

Form for Safety Complaint containing checkboxes for complaint types and inspection levels.

15. [ ] New Entrant - Charter, Auto Transportation

Form for New Entrant - Charter, Auto Transportation containing checkboxes for carrier status and inspection requirements.

16.  **New Entrant-- HHG**

- Is this carrier referred by FMCSA, operating intra and interstate:  Yes  No
- Is this carrier based in another state, requesting intrastate authority:  Yes  No
- Is this carrier based in Washington, requesting intrastate authority:  Yes  No
- Did staff complete the following:
  - ◆ Inspect all vehicles between three and eighteen months?  Yes  No
  - Number of vehicle inspections: Level 1 \_\_\_\_\_ Level 2 \_\_\_\_\_ Level 5 \_\_\_\_\_
  - ◆ Conduct a SI/SA between three and eighteen months?  Yes  No  SI  SA.
  - ◆ Conduct technical assistance within three months?  Yes  No

17.  **CSA Investigation**

- Full Investigation
- Focused Investigation
- Basic is for:**  Passenger Carrier  HHG Carrier  Solid Waste Carrier
- Basic Threshold Percentile is;**
  - Unsafe Driving \_\_\_\_\_ %
  - Fatigued Driving (HOS) \_\_\_\_\_ %
  - Crash \_\_\_\_\_ %
  - Driver Fitness \_\_\_\_\_ %
  - Drug/Alcohol \_\_\_\_\_ %
  - Vehicle Maintenance \_\_\_\_\_ %

18.  **Individual Safety Plan Only:**

What activity did staff complete for this safety complaint?

- Attach a copy of the Individual Carrier Safety Plan.
- Safety Investigation
- Technical assistance
- Number of vehicle inspections: Level 1 \_\_\_\_\_ Level 2 \_\_\_\_\_ Level 5 \_\_\_\_\_
- Unannounced terminal visit
- Other (please explain): \_\_\_\_\_

19.  **Safety Investigation:**

**Safety Audit:**

- SI Rating:  Satisfactory  Unsatisfactory  Conditional
- SA Rating:  Pass  Fail
- Number of vehicles operated: \_\_\_\_\_
- Number of drivers operated: \_\_\_\_\_
- Total miles for prior year: \_\_\_\_\_
- Recordable accidents for prior year: \_\_\_\_\_
- Accident Ratio: \_\_\_\_\_

20.  **Part B Violations:**

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	
390		391		392	
395		396		397	

21.  **Vehicle Inspection Data:**

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Inspections		1									
Defective Vehicles		0									
OOS Vehicles		0									
Level		5									

22.  **Vehicle Inspection Violations:**

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Brakes											
Steering											
Lights											
Tires, wheels, rims											
Horn											
Windshield and Wipers											
Mirrors											
Emergency Equip, Exits											
Coupling Devices											
Frame											
Suspension											
Exhaust											
Other											
Comment:											

23.  **Driver Inspection Violations:**

Medical Card	Medical Waiver	Hours of Service	Drivers License
Comment:			

**24. Relevant Carrier History:**

This is a new carrier that is applying for Charter/Excursion authority. The carrier offered up the bus they will be offering for service on June the 26/ 2012 for inspection and the vehicle was placed out-of-service. The carrier made the repairs to the bus and offered it back up for inspection.

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**25. Findings:**

A Level five CVSA inspection was performed on the bus the carrier will be offering for service and was found to have no violations.

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**26. Recommended Action:**

- No further action.
- Notify the company in writing of the findings by providing a copy of the safety investigation, vehicle inspection report, safety audit or other similar document.
- Require the company to submit a compliance plan in response to the 15-day letter requirement.
- Recheck – Safety Investigation (Date: \_\_\_\_\_ )
- Revisit to recheck a specific issue (Date: \_\_\_\_\_ )
- Send the company a compliance letter. Require a response:  Yes  No
- Issue administrative penalties in the amount of \$
- Issue a complaint.
- Stop company operations.

**27. Is this carrier considered a high risk carrier as a result of this activity?**

- Carrier accident ratio is higher than aggregate ratio.
- Carrier had an out-of-service ratio 25% or higher at the last vehicle inspection.
- Carrier had a defect ratio 75% or higher at the last vehicle inspection.
- Carrier received more than one conditional or unsatisfactory safety investigation rating in more than one of the last four safety investigations (or less than four if four are not completed).
- Other (please explain): \_\_\_\_\_

28. Additional Comments: The carrier's 14 passenger bus passed a CVSA level five safety inspection and I would recommend that the carrier be granted permanent authority.

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Investigator's Signature: Ray Gardner

Initial Review By: [Signature] Date: 8-7-12

Reviewer's Recommendation: I concur with recommendations for Authority  
Please submit reports within 10 days of conducting field work.

Final Review By: [Signature] Date: 8/8/12

Reviewer's Recommendation:  
\* OK to issue permit  
close & file.

**OFFICE USE ONLY**

Date Closed: 8/9/12 By: CAC

Company Name: Bilant, James D. d/b/a Amazona Limousines

Assignment #: 112125

Staff Assigned: Ray Garneau



# DRIVER/VEHICLE EXAMINATION REPORT

Aspen 2.13.3.9

Utilities And Transportation Commission  
1300 S. Evergreen Park Dr. SW  
PO Box 47250  
Olympia WA 98504-7250  
Ray Gardner 360-664-1232

Report Number: WAU002000106  
Inspection Date: 08/06/2012  
Start: 11:00:00 AM PT End: 11:30:00 AM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

JAMES D PILANT  
906 DEXTER AVE N  
SEATTLE, WA 98109

USDOT#: 02315942 Phone#:  
MC/MX#: Fax#:  
State#:

Location: 620 FINDLAY SEATTLE  
Highway:  
County: KING, WA

MilePost: Shipper:  
Origin: SEATTLE, WA  
Destination: SEATTLE, WA

Bill of Lading:  
Cargo:

Driver: License#: State:  
Date of Birth:  
CoDriver: License#: State:  
Date of Birth:

## VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	CVSA #	CVSA Issued #	OOS Sticker
1	BU	FORD	1998	WA	B86881S	88	1FDXE4055WHB99030	10,000		17288401	

## BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

**VIOLATIONS:** No Violations Were Discovered.

**HazMat:** No HM Transported.

**Placard:** No **Cargo Tank:**

**Special Checks:** No Data for Special Checks.

Report Prepared By:  
RAY GARDNER

Badge #:  
J577

Copy Received By:

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X Ray Gardner

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