



Assignment Report Motor Carrier Safety

Upload? [] Yes [X] No - Reason For Not Uploading: New Entrant Inspection

1. Investigator(s): Ray Gardner I577 2. Assignment No.: 113114

3. Current Date: 6/4/13 4. Date of Activity: 6/3/13

5. Carrier Name: Apex Limo Service LLC

6. Permit: New Entrant 7. New Entrant date of authority:

8. MOTCAR No.: 7283 9. Carrier is: [] Intrastate Only [] Interstate Only [] Intra and Interstate

10. Industry Code: 232

11. USDOT No.: 000000 12. MC No.:

13. [] Destination Check

Form for Destination Check containing checkboxes for safety plan attachment, inspection counts, 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 completion.

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											
Defective Vehicles											
OOS Vehicles											
Level											

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 entrant.

25. Findings:

A level One CVSA inspection was performed on the one vehicle owned by the carrier, a 2003 International bus with a seating capacity of 24, vehicle license Apex 1. The vehicle passed the inspection with no violations found and was issued a CVSA inspection decal # 18361276.

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 offered up the one vehicle that they own and will be offering for service, a 2003 International bus with a seating capacity of 24. The vehicle passed the CVSA inspection. I would recommend that this carrier be granted authority to operate as an intra-state charter carrier.

Investigator's Signature: Ray Lardre

Initial Review By: [Signature]

Date: 6-10-13

Reviewer's Recommendation: I concur with recommendation for
Authority.

Final Review By: Pratt Date: 6/10/13

Reviewer's Recommendation:
Agree with recommendation.
close & file.

* OK to issue authority.

OFFICE USE ONLY

Date Closed: 6/10/13 By: Mike Dorn

Company Name: Aper Cino

Assignment #: 11311A

Staff Assigned: Gardner

DRIVER/VEHICLE EXAMINATION REPORT

Aspen 2.14.1.1

Report Number: WAU002000145
Inspection Date: 06/03/2013
Start: 12:00:00 PM PT End: 12:30:00 PM PT
Inspection Level: I - Full
HM Inspection Type: None

APEX LIMOUSINE SERVICE LLC
4752 S 172ND ST
SEATAC, WA 98188
USDOT#: 000000000
MC/MX#:
State#:
Location: SEATAC
Highway:
County: KING, WA

Phone#:
Fax#:

Driver: HUSSAIN, ALEAWI A
License#: ALEASAH315R5
Date of Birth: 12/25/1969
CoDriver:
License#:
Date of Birth:

State: WA
State:

MilePost:
Origin: SEATTLE, WA
Destination: SEATTLE, WA
Shipper:
Bill of Lading:
Cargo: EMPTY

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	CVSA #	CVSA Issued #	OOS Sticker
1	BU	INTL	2003	WA	APEX1	1	1HVBTA FM53H589840	28,000		18361276	

BRAKE ADJUSTMENTS

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

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:
ALEAWI HUSSAIN



X Ray Gardner

X 1313463