



AUTO TRANSPORTATION AUTHORITY APPLICATION

FOR OFFICAL USE ONLY			
DATE FILED: 2/9/2024	Company: BLM Investments LLC	Docket #: TC-240084	
111-0268	Receipt ID:	Payment ID: 22527	Amount Paid: \$185
111-0268-232-01	111-0268-232-02	111-0268-230-01	111-0268-230-02

Type of Passenger Transportation Authority Requested (check one box)	Fee Required
<input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete Attachment F .	\$200.00
<input checked="" type="checkbox"/> Extension of Existing Auto Transportation Certificate C- 64605 Complete Sections 1-8. Submit a proposed tariff, time schedule and Attachment A .	\$150.00
<input type="checkbox"/> Transfer or Lease Auto Transportation Authority – Complete Sections 1-8 and Attachments C & G . <input type="checkbox"/> Transferring all of Certificate C- <input type="checkbox"/> Transferring a portion of Certificate C- 	\$200.00
<input type="checkbox"/> Temporary Auto Transportation Authority - New temporary authority or temporary to operate pending a commission decision on a parallel filed permanent application. Complete Sections 1-8 and Attachment B .	\$150.00
<input type="checkbox"/> Mortgage of Certificate – Complete Section 1 and Attachment E .	\$35.00
<input checked="" type="checkbox"/> 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 Attachment D .	\$35.00
<input type="checkbox"/> Reinstatement of Canceled Certificate – Complete Sections 1, 2 and 8.	\$200.00



Section 1 - Business Information

Legal Name: BM L Investments LLC
Trade Name, if applicable: Chelan Trolley Co.
Physical Address: 1511 S. Wenatchee Ave. Wenatchee, WA 98801
Mailing Address: Same
Telephone Number: 509-293-5773 Email: monique@wenatcheevalleyshuttle.com
Fax Number:
Contact Name: Monique Lott
USDOT#: 2270573 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#: 602-712-441

Type of Business
 Individual Partnership Corporation Other (LP, LLP, LLC)

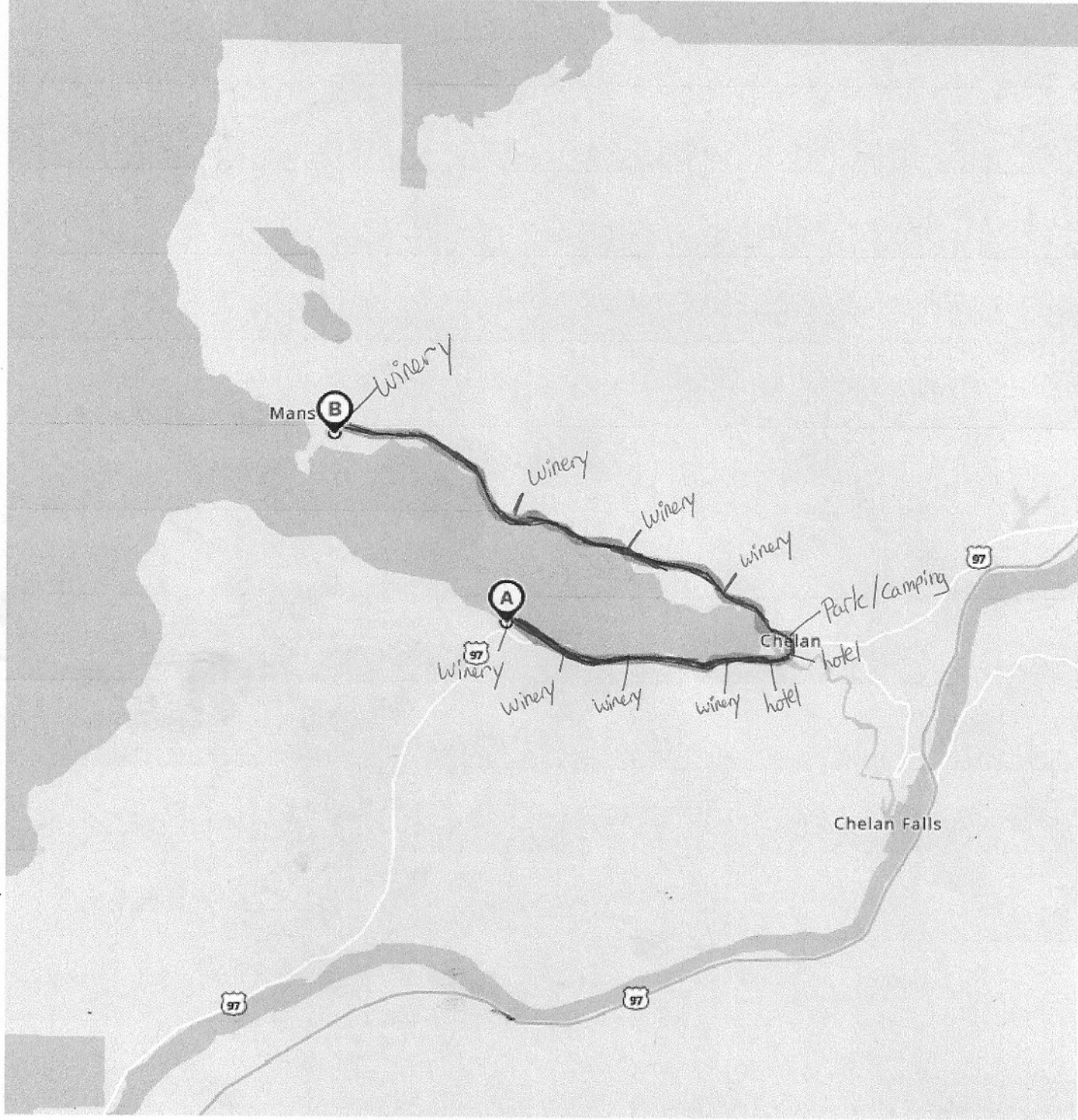
State of Incorporation
WA.

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

Name	Title	Stock Distribution/% of Shares
<u>Byron Lott</u>	<u>COO</u>	<u>50%</u>
<u>Monique Lott</u>	<u>CEO</u>	<u>50%</u>

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."
- 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.



Mans **B** Winery

Winery

Winery

Winery

A

Winery **97**

Winery

Winery

Winery

hotel

Park/Camping **97**

Chelan

hotel

Chelan Falls

97

97

97



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:

Daily passenger service during Memorial day and Labor day weekends (or thereabouts). During the general hours of 11am to 9 pm between winery locations and hotels and other major pick up locations for tourists along the route (fixed). Route is set between Siren Song winery on S. Lakeshore rd stopping at wineries along US-97 to downtown, then up WA-150 stopping at wineries, ending near Wapato Point Cellars, Manson, WA.

4) State the conditions that demonstrate this proposed service is for the public convenience and necessity:

This transportation need has been the largest complaint among locals, businesses and tourists alike. The streets are single lane and highways as well. There is not enough parking and transportation to meet the city's needs. Another huge problem has been drunk driving, which we hope we will greatly reduce.

5) State the applicant's prior experience and familiarity with the statutes and rules that govern operations they proposes:

We opened BML Investments DBA Wenatchee Valley Shuttle & Charters in 2012 and have been operating since.

6) 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:

[Empty box for listing other transportation companies]

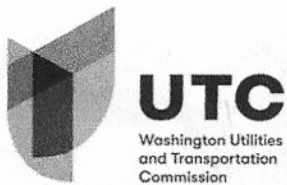
7) Do you currently hold, or have you ever held, an auto transportation certificate? No Yes
If yes, please indicate your certificate number C- 64605

8) Have you ever applied for and been denied an auto transportation certificate? No Yes
If yes, please explain:

[Empty box for explaining denial of certificate]

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

[Empty box for explaining violations]



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 480-30-256 through 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

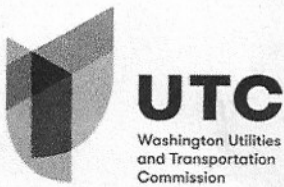
Section 4 - Financial Statement
 Complete the following or attach a balance sheet, profit and loss statement, or business plan.

Assets		Liabilities	
Cash in Bank		Salaries/Wages Payable	
Notes Received		Accounts Payable	
Investments		Notes Payable	
Other Current Assets		Mortgages Payable	
Prepaid Expenses		Total Liabilities	\$ 0
Land and Buildings		Net Worth	\$ 0
Trucks and Trailers		Preferred Stock	
Office Furniture		Common Stock	
Other Equipment		Retained Earnings	
Other Assets		Capital	
TOTAL ASSETS	\$.0	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? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, complete the following:	
Attorney's Name:	Attorney's Phone Number:
Attorney's Firm:	Fax Number:
Street:	
City, State, Zip:	Email:



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 aisle is not a party bus.

Year	Make	License Number	Vehicle ID (VIN)	Seating Capacity	Party Bus?

*attach additional pages if necessary

13) Will you be employing CDL drivers? Yes No

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: Monique Lott Position: CEO

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: Jeff Jones Position: Manager

Customer Service Person responsible for customer service complaints, and customer notice requirements.

Name: Jeff Jones Position: manager

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: Monique Lott Position: CEO

VEHICLE VIN & PLATE NUMBERS

VEHICLE	YEAR	MAKE/MODEL	CAPACITY	VIN #	PLATE #
			CHARTER		
MCI #4	2004	Motor Coach/ Transit	56	2M93JMPA84W062384	C60994L
MCI #5	2005	Motor Coach/ Transit	54	2M93JMPA85W063083	C82515S
MCI #6	2014	MCI international/J4500	56	2MG3JMBA0EW066804	C84129Y
MB2	2008	International/3200	34	1HVBTAAN28H635616	BSA7613
MB3	2016	Freightliner/ S2 106	35	4UZADRDUD7GCHT7911	C60188Z
Trailer 1	2014	Wells/UT/Black	--	575200B1XFU279182	9340YW
Trailer 2	2016	W/C/UT/Black	--	575200B19RU305434	
Trailer 3	2019	Well/Box	--	7KE1E0614K4000753	17065AJ
			SHUTTLE		
VAN 7	2016	Ford/ Tran Wag	14	1FBVU4XG6GKKB21753	D16646C
VAN 8	2016	Ford/ Tran Wag	14	1FBVU4XG2GKKB24455	D16647C
VAN 10	2016	Mercedes/Sprinter	14	WDAPF4DD5GP265390	C24895K
VAN 11	2014	Mercedes/Sprinter	14	WDZPE8CC0E5853559	CFJ9840
VAN 12	2014	Mercedes/Sprinter	14	WD3PF4CC9E5875141	CBSA639
VAN 14	2017	Ford/Transit	14	1FBVU4XG7HKA95360	CGZ6634
VAN 15	2017	Ford/Transit HD XLT	14	1FBVU4XV3HKB19636	
Mini Suba	1997	Suba/Sambar	Non Shuttle Use	KV3201446	CFJ9842

Attached

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:	Position:
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Driver Qualification Requirements (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:	Position:
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Driver Hours of Service (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:	Position:
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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:	Position:
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Safety Regulations, General (Title 49, Code of Federal Regulations Part 390)

Name:	Position:
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Driving of Commercial Motor Vehicles (Title 49, Code of Federal Regulations Part 392)

Name:	Position:
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Parts and Accessories Necessary for Safe Operation (Title 49, Code of Federal Regulations Part 393)

Name:	Position:
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Section 9 - Declaration of Applicant

INITIAL

ML 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.

ML 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.

ML 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.

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

Name: Monique Lott	Date: 2/8/24
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Count	Donor Name	Primary ID	Location	Personnel Status	Active date	Inactive Date	Termination Date	Regulatory Mode	Employee Category
1	Aldrich, Brady	WDL1T3Z3103BWA						FMCSA	Driver
2	Ayers, Jason	WDLB753B053B						FMCSA	Driver
3	Cardajal, Carlos	WDL62R50D73B						FMCSA	Driver
4	Gonzalez, Juan	GONZAJ1245BG						FMCSA	Driver
5	Jones, Bryan	WDL1P785623BWA						FMCSA	Driver
6	LuBean, Jared	WDL4Z94B023BWA						FMCSA	Driver
7	Manke, Deborah	MANKED4454RU-WA						FMCSA	Driver
8	Moore, William	MOOREWL342L TWA			09/17/2021			FMCSA	Driver
9	Thackeray, Zane	WDL7T7S6C73B						FMCSA	Driver
10	Tolliver, John	WDL7ZPT5F4SB						FMCSA	Driver
11	Walls, Roger	WDL45P18813B						FMCSA	Driver

Records
count: 11