PART A

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-7250

Telephone (360) 664-1222 - Fax (360) 586-1181

Intrastate Common Carrier Operating Authority

APPLICATION FOR PERMIT Check #559 (excluding Household Goods and Common Carrier Brokers) FOR OFFICIAL USE ONLY Carrier ID#: Reception Number: Safety: 111 0268 200 02 Insurance: Employee: TYPE OF APPLICATION (check one) **Extension of Common Carrier Permit Authority** New Common Carrier Permit Authority, or Transfer of Existing Permit Number V \$100 GENERAL COMMODITIES, including **GENERAL COMMODITIES ONLY** ARMORED CAR SERVICE **GENERAL COMMODITIES, including** \$100 \$275 GENERAL COMMODITIES, including **HAZARDOUS MATERIALS** ARMORDED CAR SERVICE GENERAL COMMODITIES, including \$100 \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR **HAZARDOUS MATERIALS** SERVICE \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR **SERVICE** For Commission Use Only: \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT Auth #: (Must be filed within 10 months of cancellation) TYPE OF PAYMENT ☐ Discover ☐ Mastercard ☐ Visa **Expiration Date** ☑ Check ☐ Money Order □ Amex CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid. Date: Name (printed): Title: Signature: MOTOR CARRIER IDENTIFICATION WA UNIFIED BUSINESS IDENTIFIER (UBI) US DOT# CC#: 01887192 363

(city, state, zip)

d/b/a:

BUSINESS (MAILING) ADDRESS

(street address, P.O. Box)

PHYSICAL ADDRESS: (street address, if different)

Ln Sw 7867

Street April 1997	(che		PE OF BUSINE	74.47	STRUCTURE ship/corporation informat	ion)
☐ INDIVIDUA	L PA	RTNERSH			ION (LP, LLP, LLC) NCORPORATION	
NAME	<u>TIT</u>		ADDRI		DE	OCK DISTRIBUTION OR RCENTAGE OF SHARE
William Malmin		Decator	r 10,00		Washington	1009
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UNIT#	LICEN		STATE	ı at	-	/IN#
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			Signa	ture		
operate and the	at no opera and affirm	tions may	be conducted un	itil e	on does not in itself con a permit is received from I in this application is tr	m the Commission. I
Wi	<u>llcon</u> Signatu	Ω γν ire(s)	12-		Apr	7/12 2011 Date

PART B

SAFETY FITNESS SURVEY FOR ALL APPLICANTS THAT OPERATE A VEHICLE OVER 10,000 GVWR

Companies applying to transport any commodity must complete this survey.

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code (WAC) 446-65.

Copies of the FMCSR's are available from several vendors. These include, but are not limited to:

- Washington Trucking Association, 930 S. 336th St., Suite B, Federal Way, WA 98003, www.wtatrucking.com, (800) 732-9019 or (253) 838-1650.
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, (503) 236-1183.
- US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.

C																	

Name: William I Walmin	Position: Owner	/ Operator

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Any person who drives a commercial motor vehicle requiring a CDL must participate in a controlled substance and alcohol testing program as required by FMCSA in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65-010.

Commercial Drivers License (CDL) Requirements

Name:	lliam	IM	almin	Position:	Owner	10	perator
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Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL, as required by the Washington State Department of Licensing. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Driver Qualification Requirements
Name: William I. Malmin Position: Owner/operator
Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.
Drivers Hours of Service
Name: William J. Malmin Position: Owner Operator
Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.
Vehicle Inspection, Repair, and Maintenance
Name: William I Malmin Position: Owner Operation
Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010: • Identification of the vehicle.
 The nature and due date of various inspection and maintenance operations to be performed. A record of inspections, repairs and maintenance indicating their date and nature.
All companies must conduct periodic inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in WAC 446-65-010.
My signature below certifies that I understand my responsibility as a motor carrier and I will comply with all the safety requirements which apply to my operations.
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Signature of applicant

April 12 2011

Date

Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

RECEIVED

APR 11291

NASH. UT. & TP. COMM

Filed with Washington Utilities and Transportation Commission (Name of Commission)

(hereinafter called Commission)

This is to certify, that the Financial Indemnity Company
(Name of Company)

(hereinafter called Company) of EXECUTIVE CENTER II, 8360 LBJ FRWY, DALLAS, TX 75243 (Home Office Address of Company)

has issued to

MALMIN ENTERPRISES, LLC (Name of Motor Carrier)

of PO BOX 329

TENINO WA 98589

(Address of Motor Carrier)

a policy or policies of insurance effective from 03/01/2011 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to turnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at EXECUTIVE CENTER II, 8360 LBJ FRWY, DALLAS, TX 75243 (Street Address)

this 08 day of APRIL

2011

WA DOT NO:

Insurance Company File No 7859579

(Authorized Company Representative)

MC 1633a (Ed. 8-99) UNIFORM INFORMATION SERVICES INC.

IRB 3539B

FORM: SDOCS.SRFORM