

# Assignment Report Motor Carrier Safety

Upload? 🗌 Yes 🛛 No - Reason For Not Uploading: I <del>nspe</del>	ections for Authority
1. Investigator(s):Ray Gardner_I577	2. Assignment No.: 112037
3. Current Date:3/14/12 4. I	Date of Activity: 3/8/12
5. Carrier Name:John Chi International Corp	
6. Permit: 7. New Entrant date of authorit	ty:
	is: Intrastate Only Interstate Only
10. Industry Code: <u>232</u>	☐ Intra and Interstate
11. USDOT No.: 2273250 12.	MC No.:
13. Destination Check	
<ul> <li>Number of Buses/Motor Coaches inspected: 7-15 passenger</li> <li>Number of vehicle inspections: Level 1 Level 2 _</li> <li>Any special emphasis placed on the destination check Y</li> <li>Describe Special Emphasis</li> <li>What might we do differently to increase our success at the</li> </ul>	Yes No
14. Safety Complaint	
Attach a copy of the Individual Safety Complaint Plan.  What activity did staff complete for this safety complaint:  Compliance review  Technical assistance  Number of vehicle inspections: Level 1  Unannounced terminal visit  Other (please explain):	vel 2 Level 5
15. New Entrant – Charter, Auto Transportation	
Is this carrier referred by FMCSA, operating intra and inters.  Is this carrier based in another state, requesting intrastate au Is this carrier based in Washington, requesting intrastate aut Did staff complete the following:  Inspect all vehicles between three and nine months?  Number of vehicle inspections: Level 1 Level 2  Conduct a SI/SA between three and nine months?	thority: Yes No thority: Yes No  Yes No  Level 5 Level 5
and the same of the same same same same same same same sam	☐ Yes ☐ No ☐ SI ☐ SA

1/2

16. New Entrant-HHG
■ Is this carrier referred by FMCSA, operating intra and interstate:
■ 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 5
◆ Conduct a SI/SA between three and eighteen months? ☐ Yes ☐ No ☐ SI ☐ SA
◆ Conduct technical assistance within three months? Yes No
Tes 100
17. CSA Investigation
Full Investigation
Focused Investigation
Basic is for: Passenger Carrier HHG Carrier Solid Waste Carrier
Basic Threshold Percentile is;
Unsafe Driving %
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 filles for prior year.
Recordable accidents for prior year:
E = ACCOCOLO NAHO:

Revised 9-16-2011 2

20. Part B Violations:

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

21. X 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				,				3			
Defective Vehicles								0			
OOS Vehicles								0			
Level								5			

	МС	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						-		1			
Exhaust								1			
Other											

23. 

Driver Inspection Violations:

Medical Card	Medical Waiver	Hours of Service	Drivers License
		<u> </u>	
Comment:			

This is a new entrant into the UTC system. John Chi has applied for authority to operate as a charter carrier
carrer
25. Findings:
LEVEL 5 CVSA safety inspections were performed on the three vans that John Chi International Corp
will be using for their charter business. John Chi International Corp has also applied for and obtained a DOT number which was verified by running a current MCMIC company record.
26 December 1-1 A-45
26. <b>Recommended Action:</b> 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: I would recommend that this assignment be closed and filed. I would also
recommend that this carrier be granted authority to operate as a charter company in the State of Washington.
Investigator's Signature:

Initial Review By: Date: 3-16-12
Reviewer's Recommendation: I care with 1000 mondature
Recommend Authority be issiel - Close I la
Final Review By: Date: 3/16/12
Reviewer's Recommendation:
AGREE WITH RECOMMENDATION.
Clase à file
dok to issue authority.
/
OFFICE USE ONLY
Date Closed: 3/19/12 By: CAC
Company Name: John Chi International Copp
Assignment #: 1/2037
Staff Assigned: Ray Gardner Co. Leansing
Ca. Liversing





Choose Subsystem Go



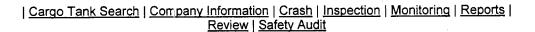
### **View Company Record**

ف	
8	71
4	

Identification Operation Classification	on C	argo C∣assification	Ha <u>z</u> a	rdous Materials Eguipmen			<u>D</u> rivers	Show All Data		
USDOT Number:		2273	250 AI	pplication Tracking lumber:				· ·		
Company Type:	CAR	RIER								
					·					
			ntifica							
Status:		ACTIVE		MC/MX Num	iber:			<del> </del>		
Legal Name:		JOHN CHI INTERI	NATIO	NAL CORP	<del> </del>		· · · · -			
DBA Name (Doing Busines	S AS)		<del></del>		<del> </del>		<del> </del>			
		Phys	ical A	ddress						
Street:	7934	NE 182ND PLACE						· · · · · · · · · · · · · · · · · · ·		
City:	<del></del>	MORE								
State / Country:	WAS	HINGTON	ZI	P/Postal Code:		980	28			
Colonia (Mexico Only):				ounty:	KING			. <del> </del>		
Phone#:	4258	068338 Cell Phone	#: 20	067799998	Fax#:	425	4868078			
		Maili	na Ad	dress						
Street (PO Box):	7034	NE 182ND PLACE	ilg Au	uress		<u> </u>	<del></del>			
City:	Д	MORE		· · · · · · · · · · · · · · · · · · ·			<del></del>	*****		
State / Country:	<del>}</del>	HINGTON	71	P/Postal Code:	<del></del>	980	128			
Colonia (Mexico Only):	IVVAS	THING I DIN		ailing County:			(ING			
Colonia (Mexico Omy).	<u> </u>		100	anning County.		IXIIV				
			Othe							
Dun & Bradstreet No.:							·			
EIN:				SSN:			536319317			
State Director Code:		53		Service Center:			WESTERN			
Internet E-Mail Address:		JOHN_CHI_57@YAHOO.COM								
MCS-150 Date (MM/DD/YY)	<b>′</b> Y):	02/13/2012								
MX Type:				RFC Number:						
New Entrant Status:		CURRENTLY IN N	WEN	TRANT PROGRA	АМ			. 116 2-000		
New Entrant Entry Date:		02/15/2012		New Entrant E	xit Date:					
Name of Authorized Perso	n:	JOHN CHI		Title of Authorized Person:			WNER			
Do not put in NE Program	(Y/N):	YES ® NO								
1. Officer Name:	JOH	N CHI								
1. Officer Title:	OW	NER					<del>"</del>			

2. Officer Name:			
2. Officer Title:			
	Car	rier/Shipper	
Carrier Operation:	A. INTERSTATE HAZMAT	B. INTRASTATE HAZMAT	C. INTRASTATE NON-
Mileage (MCS 150):		Mileage Year(YYYY):	
Mileage (MCS 151):			

March 15, 2012



Options for this Company



FMCSA Home | Feedback | Privacy Policy | USA.gov | Freedom of Information Act (FOIA) | Accessibility | OIG Hotline | Web Policies and Important Links | Plug-ins

Federal Motor Carrier Safety Administration
1200 New Jersey Avenue SE, Washington, DC 20590 - 1-800-832-5660 - TTY: 1-800-877-8339 - Field Office Contacts

#### UNIFORM DRIVER/VEHICLE INSPECTION REPORT

1312533

PERSONN		DIST / CET	1	I =\/=  .	1	2		a ·	1	ı	=	<b>~</b>	
15	77	Ha		LEVEL:	! <del></del>			³	4	·	_ °.		_
			IERAL					HAZ	ARDO	US N	MATE	RIALS	;
DATE		TIME (MILITARY)	70	TIME (MILITA		н	AZARD CI	ASS / DIV	ISION NO	D			
LOCATION	/ 75 / 1 S	BEGUN 9	<del>30</del> :	FINISHED /C	$O: \mathcal{O}($	TY CODE RE	PORTABL	E QTY? Y	N	HAZAR	DOUS W	/ASTE?	Y
_	ERMIN/						ACARD	REQUIR	ED? Y	N	CARGO	TANKS	5? Y N
1	CEM HO A	<u>, , , , , , , , , , , , , , , , , , , </u>			ARRI								
CARRIER I	NAME (Inclue D	BA when applicable)						<u> </u>		-			
Jo	HN	CHI	NTER	SNATIO	NA		COR	ρ					
ADDHESS	•												
CITY	7	NE	STATE	ZIP CODE	CE	INTERS	TATE I	OOT NO.		10	CC NO.		
	EMORE		AW			(YES)	ИО	22.	7325	5			
				1	DRIVE	R	•			•			
DRIVER NA	AME		7		LICENS	E NO.		/		ST	ATE	EXP	. YEAR
DATE OF E	RIOTU		/	HIPPER NAME	<u></u>		_/			SHIPPI	NO NO	<u> </u>	
		1	Y N SH	TIFFER NAME			1			SHIPPI	NG NO.		
	1	WELL !	. " [	V.	EHIC	F				1			
l .	ED OWNER NAI	ME/ADDRESS		V	L1 11V	<b></b>	G.	V,W.			PBT R	ATE	
S	AME							10,0	<i>0</i> 0				
UNIT	TYPE	YEAR/MAKE		CO. UNIT NO			L	ICENSE N		10.			STATE
1	VAW .	2006 / FOR	n 1			B439	RIS F	,				G	UA
2	دورط ١١	7		<del> </del>		1FBS			DR 5	1442	1.	_	
3						- <del>-/-1</del> 1/-3	<u></u>	ئىك.لى مىل. -	4717	<u></u>		_	
4													
	1	2 3	4	5 6	7	8	9	10	11	12			
_	<u> </u>	1	·			<del></del> _		<del> </del>		12	$\neg$		
<b>₹</b> R0	DNT AND	1 -			-					-	$\dashv$		
			<u></u>							1			
C	OFR		ν	IOLATION	VS.			D 1	2	3	4	Unit #s O/S	Camplied
				owns	W 5	)			<del>                                     </del>	<u> </u>			
				1770	) 1					1			
	_			100		-	•		1	1			
			$\overline{}$	.10	-	<del></del> -	-	_					<del> </del>
		N	10	W.					<del> </del>				<u> </u>
				<del>/U</del>				<del>   </del>	+-				<del> </del> -
	<del></del>					<del></del>			<del> </del>				
					-				+				
				- ·		<del></del>			<del> </del>				<u> </u>
							$\neg +$		<del> </del>	<del>  </del>			
							+	+-	<del> </del>				
	_	<del></del>	<del></del> .						<del> </del> -	<del>                                     </del>			
CVSA DECA	LS UNIT 1	UNIT 2	Jui	NIT 3	——	UNIT 4			NOIC N	l io.	i		
164	20254			19/50 0:0: =	<u></u>				1				
		y not be operated until		NVER SIGNATUR		1-1	1/0	_ <	1				
		ed above are repaired. not drive until in compl	liance. OF	FICER SIGNATE	<u>/ ( )</u>	<u>///</u>	1				<i>-</i>		
3000-150-1	60 R (2/99)			Ki	n rek	1/2-1	<i>F</i>						
0000-100-1	55 (1 (B 55)			<del>- / - 2/</del>	<del></del>	ماسمي							

State:

State:

**Utilities And Transportation Commission** 

1300 S. Evergreen Park Dr. SW

PO Box 47250

Olympia WA 98504-7250 Ray Gardner 360-664-1232 Report Number: WAU002000061

Inspection Date: 03/08/2012

Inspection Level: V - Terminal HM Inspection Type: None

JOHN CHI INTERNATIONAL CORP.

7934 NE 182ND PLACE

KENMORE, WA 98028

**USDOT#**: 02273250

Phone#: (425)806-8338

MC/MX#:

State#: Location: 7934 NE 182ND PLACE

MilePost:

Highway:

County: KING, WA

Driver:

License#:

Date of Birth:

CoDriver: License#:

Date of Birth:

Shipper:

Bill of Lading: Cargo:

VEHICLE IDENTIFICATION

Unit Type Make Year State

VN FORD 2006 WA

Plate # B93818

Fax#:

Equipment ID 1

Origin:

Destination:

**VIN** 

1FBSS31L56DB44436 10,000

GVWR CVSA # CVSA Issued # OOS Sticker

16438354

**BRAKE ADJUSTMENTS** 

Axle# Right

1 N/A

Left Chamber

N/A N/A **HYDR HYDR** 

VIOLATIONS: No Violations Were Discovered.

N/A

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:



02273250 WA WAU002000061

Special	Project	A

AUTHORITY

#### UNIFORM DRIVER/VEHICLE INSPECTION REPORT

1312534

TOTAL STATE SHAPE SPEED OWNER NAME SPORTS OF THE STATE OF	PERSONN		DIST / DET		FEVEL.	1	2		2	4		_	V			
DATE  3, 8 / 2 BEGIN RC IS  SCARFOUR SAME  CERTIFIC SAME  FOR THE MULTIPAY  SCARFOUR ROLL  SAME  CARRIER  CARRIER NAME PROCES BLA WITH REPUBBINI  CARRIER NAME PROCESS BLA WITH REPUBBINI  CARRIER NAME  CARRIER NAME  COLUMN TO THE VEHICLE  STATE  LICENSE NO.  STATE  DIVER NAME  COLUMN DEPTH NAME  COLUMN DEPTH NAME  COLUMN DEPTH NAME  LICENSE NO.  STATE  LICENSE NO.  STATE  DIVERNAME  LICENSE NO.  STATE  LICENSE NO.  STATE  DIVERNAME  LICENSE NO.  STATE  LICENSE NO.  STATE  LICENSE NO.  STATE  DIVERNAME  LICENSE NO.  STATE  LICENSE NO.  ST	5	<u>577</u>	H/		LEVEL:	' <u> </u>			ა	4	·	_ 5 .	_	<u> </u>		
ACARDE CLASS INVESTMENT OF THE PROPERTY OF THE									HAZA	ARDO	US N	IATE	RIALS	i		
PLACARD REQUIRED? Y N CARRO TANNS? Y N CARRO TANNS? Y N CARRIER NAME (INCLUDED) Y N CARRO TANNS? Y N CARRIER NAME (INCLUDED) Y N CARRO TANNS? Y N CARRIER NAME (INCLUDED) Y N CARRO TANNS? Y N CA		0. 1					НА	ZARD CLA	ASS / DIV	ISION NO	)					
CARRIER INAME (INCLUDED AND PERPORTIONS)  ADDRESS 7934 NE 183 ND PLACE  CITY STATE 2P CODE  TORONO NO. 273550  DRIVER DATE OF BIRTH MED. CERT. N SHIPPER NAME  UNT TYPE YEARANAE CO. UNIT NO. LICENSE NO. /VN NO. STATE  1 VAN DOOS FRANC  2 IJ PRS  3 A 5 6 7 8 9 10 11 12  THOUT TYPE YEARANAE CO. UNIT NO. LICENSE NO. /VN NO. STATE  1 VAN DOOS FRANC  3 A 5 6 7 8 9 10 11 12  THOUT TYPE YEARANAE CO. UNIT NO. LICENSE NO. /VN NO. STATE  1 VAN DOOS FRANC  3 A 5 6 7 8 9 10 11 12  THOUT TYPE YEARANAE CO. UNIT NO. LICENSE NO. /VN NO. STATE  1 VAN DOOS FRANC  3 A 5 6 7 8 9 10 11 12  THOUT TYPE YEARANAE CO. UNIT NO. LICENSE NO. /VN NO. STATE  NOOT NO. STATE  1 VAN DOOS FRANC  2 UNIT 1 NO. NO. STATE  NOOT	LOCATION	/ 8 / 6 N: SR/MP	BEGUN	10:15	: FINISHED (C	NO ICN	TY CODE REF	PORTABLE	ατγ? Υ	N	HAZARI	oous w	ASTE?	Y 1		
CARRIER  CARRIER  CARRIER  CARRIER  JOHN CHI INTERNATIONAL CORP  ADDRESS  7934 NE 183 ND PLACE  CITY  LEW MORE  LAA 18038 ® NO 2373350  CITY  LEW MORE  LICENSE NO.  STATE  SHIPPRIN NAME  LICENSE NO.  STATE  EXT, YAN  SHIPPRIN NAME  LICENSE NO.  STATE  EXT, YAN  ONTE OF BRITH  MADD. CERT. N SHIPPER NAME  LICENSE NO.  SHIPPRIN NO.  SHIPPRIN NO.  SHIPPRIN NO.  STATE  EXT, YAN  PST ANTE  LICENSE NO.  STATE  EXT, YAN  PST ANTE  SHIPPRIN NO.  STATE  AND  THE STATE  TO DOWN NO.  STATE  STATE  TO DOWN NO.  STATE  STATE  LICENSE NO.  STATE  LICENSE NO.  STATE  SHIPPRIN NO.  STATE  AND  THE STATE  LICENSE NO.  STATE  SHIPPRIN NO.  STATE  AND  THE STATE  TO DOWN NO.  STATE  STATE  AND  THE STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  AND  THE STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  AND  THE STATE  TO DOWN NO.  STATE  TO DOWN NO.  STATE  AND  THE STATE  TO DOWN NO.  SHATE  TO DOWN NO.  SHATE  TO	1 7	ERMIN	IAL					ACARD F	REQUIRE	D? Y	N	CARGO	TANKS	3? Y M		
ADDRESS 7934 NE 183 NO PLACE  CITY  CEN MORG  WA 1809S  TO 373350  DRIVER NAME  DRIVER NAME  DATE OF BRITH  MED. CERT. Y N SHIPPER NAME  LICENSE NO.  STATE  DATE OF BRITH  MED. CERT. Y N SHIPPER NAME  UNIT TYPE  VEARMANE  ONTO DO NOT NO.  STATE  UNIT TYPE  VEARMANE  CO. UNIT NO.  LICENSE NO. VIN NO.  STATE  UNIT TYPE  VEARMANE  ONTO DO NOT NO.  STATE  I VAN  DOSS TOPEN  1 2 3 4 5 6 7 8 9 10 11 12  TRONT  THE STATE  ONTO DO NOT NO.  COMMING  VEHICLE  ONTO DO NOT NO.  STATE  UNIT TYPE  VEARMANE  ONTO DO NOT NO.  ONTO DO NOT NO.  STATE  ONTO DO NOT NO.  ONTO DO NO.  ONTO DO NOT NO.  ONTO DO NOT NO.  ONTO DO NOT NO.  ONTO DO NO.  ONTO DO NOT NO.  ONTO DO NOT NO.  ONTO DO NOT NO.  ONTO DO NO.  ONT					Ċ	ARRI	ER									
TOTAL NE ISONO PLACE  STATE ZIPCODE INTERSTATE DOT NO.  LOC NO.  STATE EXPLYSAN  AND CHIT Y N SHIPFER NAME  LOC NOTER NAMEAUADDRESS  SAM C  LOC NO.  LOC NO.  STATE EXPLYSAN  SHIPPING NO.  VEHICLE  LOC NO.  PST RATE  LO	1 .										-			200000000000000000000000000000000000000		
TYPE YEARMARE CO. UNIT NO. LICENSE NO. STATE EXEMPTION NO. STATE  UNIT TYPE YEARMARE  1 2 3 4 5 6 7 8 9 10 11 12  THOUTH THE TOTAL OF STATE IN THE TOTAL O	3	ohn	<u>CH</u> :	IN	TERNATIO	MA	<u> </u>	orp	1							
DRIVER NAME  DRIVER NAME  DATE OF BIRTH  MED. CERT. V N SHIPPER NAME  LICENSE NO. STATE EXP. YEAR  DATE OF BIRTH  MED. CERT. V N SHIPPER NAME  VEHICLE  REGISTERED OWNER NAME/ADDRESS  SAME  UNIT TYPE YEAR/MAKE CO. UNIT NO. LICENSE NO. I'VIN NO. STATE  1 VAN 2005/ Fiden  2 1/ PMS  3 1 FBSS31 LOS 47.24.3  3 4 5 6 7 8 9 10 11 12  FRONT HAP  COFR  VIOLATIONS  D 1 2 3 4 Unit #1  OSS Complete  CVSA DECAME, UNIT 1  VEHICLE  ONIT A NOIC NO.  DRIVER SIGNATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE  ORIVER SIGNATURE  NOIC NO.  DRIVER SIGNATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE	ADDRE22															
DRIVER NAME  DRIVER NAME  DATE OF BIRTH  MED. CERT. V N SHIPPER NAME  LICENSE NO. STATE EXP. YEAR  DATE OF BIRTH  MED. CERT. V N SHIPPER NAME  VEHICLE  REGISTERED OWNER NAME/ADDRESS  SAME  UNIT TYPE YEAR/MAKE CO. UNIT NO. LICENSE NO. I'VIN NO. STATE  1 VAN 2005/ Fiden  2 1/ PMS  3 1 FBSS31 LOS 47.24.3  3 4 5 6 7 8 9 10 11 12  FRONT HAP  COFR  VIOLATIONS  D 1 2 3 4 Unit #1  OSS Complete  CVSA DECAME, UNIT 1  VEHICLE  ONIT A NOIC NO.  DRIVER SIGNATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE  ORIVER SIGNATURE  NOIC NO.  DRIVER SIGNATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE  OFFICER SGRATURE	CITY	197	100	I OCH	TE ZIP CODE	<u>U</u> _							ICC NO.			
DRIVER  DRIVER  DRIVER  LICENSE NO.  STATE  EXT YEAR  DATE OF BIRTH  MED. CERT. Y N  WAAVER N N  VEHICLE  SCHIPPING NO.  STATE  EXT YEAR  SHIPPING NO.  STATE  SCHIPPING NO.  SCHIPPING NO.  STATE  SCHIPPING NO.  SCHIPPING	1	en mor	2 <i>E</i>	1	UA 19808	<del>3</del> 8	ŒS	o								
DATE OF BIRTH  WED. CERT. V. N. SHIPPER NAME  VEHICLE  REGISTERED OWNER NAME/ADDRESS  SAME  UNIT TYPE  VEARMAKE  CO. UNIT NO.  B7938877  WM  PBT RATE  1 VAW 20087 FORD  2 B7938877  WM  1 2 3 4 5 6 7 8 9 10 11 12  FRONT  FORD  CFR  VIOLATIONS  D 1 2 3 4 Unit # 10 Complete  UNIT 3 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Vehicle may not be operated until 0 / S defects noted above are repaired.  Driver may not the operated until 0 / S defects noted above are repaired.  Driver may not drive until in compliance.  OFFICER SKRATURE					กลางเหมือน เพลง เมื่องเหมือน เพลง เพลง เหมือน เพลง เพลง เพลง เพลง เพลง เพลง เพลง เพลง		004006000000000000000000000000000000000									
REGISTERD OWNER NAMICADORESS SAME  UNIT TYPE VEARMAKE CO. UNIT NO. LICENSE NO. / VIN NO. STATE  1 VAN 2005 Form 2 B793887 WM  2 11 PM3  3 IFBSS31L08 47.24.3  4 I 2 3 4 5 6 7 8 9 10 11 12  FRONT WORLD DIVERSIONATIONS  D 1 2 3 4 Ontar No. Compiled  CFR VIOLATIONS  D 1 2 3 4 Ontar No. Compiled  CVSA PECIAL UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Vehicle may not be operated until 0 / S officien stored above are regarded.  Driver may not drive urt lin compliance.  OFFICIEN SEQUATURE	DRIVER NA	AME			/	LICENS	E NO.		1		ST	ATE	EXP.	YEAR		
REGISTERD OWNER NAMICADORESS SAME  UNIT TYPE VEARMAKE CO. UNIT NO. LICENSE NO. / VIN NO. STATE  1 VAN 2005 Form 2 B793887 WM  2 11 PM3  3 IFBSS31L08 47.24.3  4 I 2 3 4 5 6 7 8 9 10 11 12  FRONT WORLD DIVERSIONATIONS  D 1 2 3 4 Ontar No. Compiled  CFR VIOLATIONS  D 1 2 3 4 Ontar No. Compiled  CVSA PECIAL UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Vehicle may not be operated until 0 / S officien stored above are regarded.  Driver may not drive urt lin compliance.  OFFICIEN SEQUATURE	DATE OF F	RIBTH	1		SHIPPED NAME						Теціроіі	IG NO	/_			
VEHICLE  REGISTRADO OWNER NAME/ADDRESS  SAME  UNIT TYPE YEAR/MAKE CO. UNIT NO. LICENSE NO. / VIN NO. STATE  1 VAM 2008/ FORM 2 B7.93887  2 II PHS  3 IFBSS31L 08 47.24.3  4 I 2 3 4 5 6 7 8 9 10 11 12  RRONT HAP 1 1 2 3 4 000 000 000 000 000 000 000 000 000			•	/	•			1			SHIFFII	10 NO.				
REGISTERED OWNER NAME/ADDRESS SAME UNIT TYPE YEARMAKE CO. UNIT NO. LICENSE NO. / VIN NO. STATE  1 VAW 2008/ FREN 2 B7.98887 WM  1 1 2 3 4 5 6 7 8 9 10 11 12  RRINT HUN	/	/	1			/EHIC	F				<u> </u>					
UNIT TYPE VEARMAKE CO. UNIT NO. LICENSE NO. / VIN NO. STATE  1 VAW 2005 Form 2 B73385T WM  2 II PMS  3 I FBSS 31 L 08 47.24.3  4 I 2 3 4 5 6 7 8 9 10 11 12  RRONT WYOLATIONS D 1 2 3 4 Unit ** Compliance Officer signature  CFR VIOLATIONS D 1 2 3 4 Unit ** Compliance Officer signature  CVSA PECAS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Driver may not be operated until 0 / S defects noted above as repaired.  Driver may not drive until in compliance.  DFICER SIGNATURE  OFFICER SIGNATURE  OFFICER SIGNATURE			ME/ADDRESS		<u></u>	51.10		G.V	.W.			PBT P	IATE			
UNIT TYPE VEARMAKE CO. UNIT 10. LICENSE NO. / VIN NO. STATE  1 VAW 2005 Form 2 B79355T UM  2 II PMS  3 IFBSS 31 L 08 47.26.3  4 II 2 3 4 5 6 7 8 9 10 11 12  FRONT HUP NO. STATE  CFR VIOLATIONS D 1 2 3 4 Unit s Complied  ONE COMPLETE ON THE COMPLETE ON TH	<u>S</u>	AME							0,00	D						
1   2   3   4   5   6   7   8   9   10   11   12	1	1 1	YEAR	/MAKE	CO. UNIT NO			LIC	CENSE NO	). / VIN N	10.			STATE		
2   1   PMS	1	VAN	2008	Forn	2	2			ST			,	WA			
1	2	11 P785	7							2/, 3						
1	3							<del></del>								
CFR VIOLATIONS D 1 2 3 4 Unit # Compiled  NO FOR STATURE  VIOLATIONS D 1 2 3 4 Unit # Compiled  OFFICER SCHATURE  OFFICER SCHATURE  OFFICER SCHATURE  OFFICER SCHATURE	4															
CFR VIOLATIONS D 1 2 3 4 Unit fs Compiled  UNIT S U	<u> </u>	1	2	3 4	5 6	7	8	9	10	11	12	<u></u>				
CFR VIOLATIONS D 1 2 3 4 Unit #s Complied  NO FIGURE SIGNATURE  Vehicle may not be operated until 0 / S defects noted above ars repaired.  Driver may not drive until in compliance.  OFFICER SIGNATURE  OFFICER SIGNATURE	_	141				T		<u> </u>			T					
CVSA DECARS. UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Wehicle may not be operated until 0 / S defects noted above ar a repaired.  Driver may not drive ur til in compliance.  OFFICER SMATURE	<b>₹</b> R0	ONT HOTE	<del>' </del> -			-	1	· ·		·		$\dashv$				
CVSA DECARS. UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  Wehicle may not be operated until 0 / S defects noted above ar a repaired.  Driver may not drive ur til in compliance.  OFFICER SMATURE		<u> </u>						l			1					
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive ur til in compliance.  OFFICER SKSNATURE  OFFICER SKSNATURE		CFR			VIOLATIO	VS		D	1	2	3	4		Complied		
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive ur til in compliance.  OFFICER SKSNATURE  OFFICER SKSNATURE				-												
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive ur til in compliance.  OFFICER SKSNATURE  OFFICER SKSNATURE					205											
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive urtil in compliance.  OFFICER SIGNATURE  OFFICER SIGNATURE					14/10.											
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive urtil in compliance.  OFFICER SIGNATURE  OFFICER SIGNATURE		-		1/1	), [											
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive ur til in compliance.  OFFICER SKSNATURE  OFFICER SKSNATURE			V	10	سرم م											
CVSA DECAIS UNIT 1 UNIT 2 UNIT 3 UNIT 4 NOIC NO.  — Vehicle may not be operated until O / S defects noted above ara repaired.  — Driver may not drive ur til in compliance.  OFFICER SKSNATURE  OFFICER SKSNATURE				7	<del></del>											
Vehicle may not be operated until 0 / S     defects noted above are repaired.     Driver may not drive until in compliance.  Driver may not drive until in compliance.  Driver may not drive until in compliance.																
Vehicle may not be operated until 0 / S     defects noted above are repaired.     Driver may not drive until in compliance.  Driver may not drive until in compliance.  Driver may not drive until in compliance.										1						
Vehicle may not be operated until 0 / S     defects noted above are repaired.     Driver may not drive until in compliance.  Driver may not drive until in compliance.  Driver may not drive until in compliance.							<del></del>									
Vehicle may not be operated until O / S defects noted above are repaired. Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.		-		<u> </u>										<del></del>		
Vehicle may not be operated until 0 / S     defects noted above are repaired.     Driver may not drive until in compliance.  Driver may not drive until in compliance.  Driver may not drive until in compliance.				· · · · · ·				<u> </u>	-	<del>                                     </del>				-		
Vehicle may not be operated until O / S defects noted above are repaired. Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.					· · · · · · · · · · · · · · · · · · ·		<del></del>		<del>                                     </del>	1	$\vdash \dashv$					
Vehicle may not be operated until O / S defects noted above are repaired. Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.		<del></del>	· · ·	<del></del> .					+	1				<b> </b>		
Vehicle may not be operated until O / S defects noted above are repaired. Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.  Driver may not drive urtil in compliance.	CVSA DECA	ALS UNIT 1	UNIT 2		UNIT 3	<del></del> -	UNIT 4			NOIC N	<u>ı                                     </u>	1		L		
Vehicle may not be operated until 0 / S defects noted above are repaired.  Driver may not drive until in compliance.  OFFICER SIGNATURE	101	00 20 J			DRIVER SIGNATU	RF /7	Je : ,			<u> </u>						
Driver may not drive urtil in compliance. OFFICER SKNATURE					J VEN SIGHALD		CK	Q	ے ر	$\equiv$						
3000-150-160 R (2/99)					OFFICER SIGNATU	JRE /	/									
	3000-150-1	160 R (2/99)			Kan	200						_				

State:

State:

**Utilities And Transportation Commission** 

1300 S. Evergreen Park Dr. SW

PO Box 47250

Olympia WA 98504-7250 Ray Gardner 360-664-1232 Report Number: WAU002000062

Inspection Date: 03/08/2012

Start: 10:15:00 AM PT End: 10:45:00 AM PT

Inspection Level: V - Terminal HM Inspection Type: None

JOHN CHI INTERNATIONAL CORP

7934 NE 182ND PLACE

KENMORE, WA 98028

**USDOT#:** 02273250

Phone#: (425)806-8338

MC/MX#:

State#:

Fax#:

Location: 7934 NE 182ND PLACE

Highway:

County: KING, WA

MilePost:

Origin:

Destination:

Driver: License#:

Date of Birth: CoDriver:

License#: Date of Birth:

> Shipper: Bill of Lading:

Cargo:

VEHICLE IDENTIFICATION

Unit Type Make Year State VN FORD 2008 WA

Plate # B72888T

Equipment ID

2

VIN 1FBSS31LO847263

10.000

GVWR CVSA # CVSA Issued # OOS Sticker

16438355

BRAKE ADJUSTMENTS

Axle #

1 Right Left

N/A N/A N/A N/A

HYDR Chamber

**HYDR** 

VIOLATIONS: No Violations Were Discovered.

2

HazMat: No HM Transported.

Placard: No

Cargo Tank:

Special Checks: No Data for Special Checks.



02273250 WA WAU002000062

## UNIFORM DRIVER/VEHICLE INSPECTION REPORT

1312535

PERSONN	IEL NO.	DIST / DET			1 5	EVEL:	1	2		2		1		_	V	
2	577	<u>  H/</u>	Q			- <b>V</b>	' <del></del>			- `				_ 3		
		/ 		ERAL	<u></u>					ŀ	IAZ/	ARDO	USI	ЛАТЕ	RIAL	S
DATE な	. S	TIME (N	IILITARY)	15		ME (MILITAI	RY)	<u> </u>	AZARD	CLAS	s / DIV	ISION NO	)			
LOCATION	/ 8/12 N: SR/MP	BEGUN	-/) :	<i>1.</i> ) :	SC	ALEHOUSE	NO. CN	Y CODE	EPORTA	BLE Q1	ry? Y	N	HAZAF	DOUS V	WASTE?	Y
l	ERMIN								LACAR	D RE	QUIRE	D? Y	N	CARG	O TANK	(S? Y I
						C	ARRI	ER								
	NAME (Inclue D			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			one standards		<u> </u>	200000000	-		-	00000000000		
م	HN 1	CHL.		INT	ERI	NATI	MCI	<u> </u>	60	7/2	ρ					
7	300	<b>n</b> 7:	ر. در	127		Ó	1 10	<u>.</u>								
CITY	934 Cen Ma	10		STATE		ZIP CODE	بهد	INTER	STATE	рот	NO.		Ţi	CC NO.		
K	CEN MO	ME		W	4	980	98	(£\$_)	) NO	2	57:	325	0			
							DRIVE									
DRIVER N	AME		1				LICENS	E NO.			/	/	s	<b>FATE</b>	EX	P. YEAR
DATE OF E	BIRTH		CERT.		SHIPPE	R NAME	<u> </u>	<del></del>					Темпры	NG NQ	4	
ļ	, ,	WAN		N						/			Januari			
					<u> </u>	V	EHIC	F					l			
REGISTERI	ED OWNER NAM	ME/ADDRESS	<u> </u>							G.V.W	<u></u>			РВТ	RATE	
	SAME	<u>.</u>							10,000							
UNIT	TYPE	YEA			CO. UNIT NO.						,	). / VIN N	10.			STATE
1	VAN	2007	/For	0		3		B	293	58	6					WA
2	H A455	7	<i></i>			<del></del>		B698886 IFBNE31L670B06655								<u> </u>
3		<del></del> ,							<del> </del>	7.1						
, 4												<del></del>			$\neg \uparrow$	<del></del>
	1	2	3	4	5	6		8	9	10	)	11	12			
,	141	1	Ī		ļ	T	T	T	T	Τ.			T			
FRO	ONT 1491	1		·	-		<del> </del>	+	<del> </del>	+-			<del> </del>	-		
		l			<u> </u>		<u> </u>	<u> </u>	L				<u></u>			
(	CFR				VIO	LATION	IS			D	1	2	3	4	Unit #s	Complied
						205										<b>—</b>
						12)										1
				1	$\nu_{\sum_{x}}$											1
				- Tr										ĺ		
			NU		400			·								
			1									<del> </del>				
												<b>†</b>		-		
													-			<del> </del>
	<del></del>			-								1				<del> </del>
	<del></del>	<u> </u>				·						<del> </del>			<del> </del>	<del> </del>
	-	<del>                                     </del>							-			<del>                                     </del>			<del> </del> -	<del>                                     </del>
	*	<del>                                     </del>	-							$\dashv$				<del></del>		<del> </del>
VSA DECA	15 UNIT 1 3856	UNIT 2	<del></del>		UNIT 3			UNIT 4		1	<del></del>	NOIC N	O.		<u> </u>	L
16016	0056				DBIVE	SIGNATUR	· · · ·	<u> </u>								
	- Vehicle may			) / S	PULLE	SIGNATUR		11	1	•	10		~		_	
	defects note Driver may r			ance.	OFFICE	R SIGNATU	RE/	<u> </u>	<u>_</u>						<del></del>	
∩∩∩_1 5∩_1	60 R (2/99)				j j	Kas la	h	1								
555 156-1	55 (£ 55)			·		<del></del>										

State:

State:

**Utilities And Transportation Commission** 

1300 S. Evergreen Park Dr. SW

PO Box 47250

Olympia WA 98504-7250 Ray Gardner 360-664-1232

Report Number: WAU002000063 Inspection Date: 03/08/2012

Start: 11:15:00 AM PT End: 11:45:00 AM PT

Inspection Level: V - Terminal HM Inspection Type: None

JOHN CHI INTERNATIONAL CORP

**7934 NE 182ND PLACE** 

KENMORE, WA 98028

**USDOT#:** 02273250

Phone#: ( )425-8068

MC/MX#:

State#:

Fax#:

Location: 7934 NE 182ND PLACE

Highway: County: KING, WA

MilePost: Origin:

Destination:

Driver:

License#:

Date of Birth:

CoDriver: License#:

Date of Birth:

Shipper:

Bill of Lading:

Cargo:

VEHICLE IDENTIFICATION

Unit Type Make Year State

Plate # 1 VN FORD 2007 WA B69888G 3

Equipment ID

<u> VIN</u> 1FBNE31L67DB06655

10,000

GVWR CVSA # CVSA Issued # OOS Sticker

01643856

**BRAKE ADJUSTMENTS** 

Axle # Right

1 N/A

Left

N/A N/A N/A

Chamber **HYDR HYDR** 

VIOLATIONS: No Violations Were Discovered.

HazMat: No HM Transported.

Special Checks: No Data for Special Checks.

Placard: No

Cargo Tank:

Report Prepared By: RAY GARDNER

Badge #: J577

Copy Received By:

1312535

02273250 WA WAU002000063