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

(excluding Household Goods and Common Carrier B

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Reception Number:	Cofota	A South Control of the Control	Carrier I	D# - c M \
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\$275 GENERAL COMMODITIE ARMORDED CAR SERVICE		\$100	GENERAL C	OMMODITIES, including
\$275 GENERAL COMMODITIE HAZARDOUS MATERIALS	S, including	\$100	GENERAL (HAZARDOUS I SERVICE	COMMODITIES, including MATERIALS and ARMORED CAR
\$275 GENERAL COMMODITIES HAZARDOUS MATERIALS and SERVICE	S, INCLUDING ARMORED CAR			
\$100 REINSTATEMENT OF CA (Must be filed within 10 months of ca	NCELLED COMMO ncellation)	N CARRIER PE	RMIT	For Commission Use Only: Auth #: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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CERTIFICATION: I, the undersigned, that I am authorized to execute and fil valid.	e ruis document on be	statement, certif	y that the followin ant, and that all in	ng information is true and correct, formation on file is current and
Name (printed): VAWEEN COUKLIN		Date:	11/14/2013	
Name (printed): VAWED COUKLY Signature: Valuer Cont	len		OFFICE M	4NAGER
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APPLICANT NAME:	2004400		603-185 PHONE#:	-861
TOBILL & RIEDESEL LOGG	NG LLC			19-8184
d/b/a:			FAX#;	PI OTOF
			360 - 2	49-8427
BUSINESS (MAILING) ADDRESS: PO Box 367 ABERT	EEN, WA	98520		
161 HOKAUSOU RD EXPHYSICAL ADDRESS: (street addr	MA, WA ess, if different)	98541		
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of the per	rmit nu	ımber.	-		helitiir iiotaoi iiiaoi alaii aa	low to authorize the transler
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and Prope	erty Da	amage	and Prop	0 in Public Liability perty Damage	complete Part C, Sections 1 and 2.	complete Part C, Sections 1 and 2.
Insurance need to co	e. You d	do not	Insurance	e. You must	1 Griga and	Sections I and Z.
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Signature of c	urrent permit	holder		_		Date	
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i, as applicant, operate and the	understand et no oneret	that the fil	ling of this applic	ation does not in .	itself con	stitute authority to	
hereby declare	and affirm t	hat the inf	be conqueted uni formation contain	III a permit is rece led in this applica	ived from	stitute authority to the Commission. I to the best of my	
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	Signatur	e(s)	— — —			Date	
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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.

Va. 1 1	Position: OFFICE MANAGER
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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. 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.

	icansos (1986) Astronoments
Name: VALLEEN CONKLIN	Position: OFFICE MANAGER

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.

Name: VALUEEN CONKLIN	Position: OFFICE MANAGER
Each company must maintain a complete Driver Qualific vehicles as required by FMCSR Part 391.51 and by the vexclusively in intrastate commerce within Washington has any interstate operations must maintain a complete file of	WSP in WAC 446-65-010. Owner/operators that work
Name: BRANNOLL SACKEIDER	Position: Truck Boss
Each company must maintain true and accurate hours of vehicle as required by the FMCSA in 49 CFR, Part 395.1	of service records for each individual that drives a motor 1(e) and by the WSP in WAC 446-65-010.
	value and Microsoft and Company
Name: VALLEEN CONKLIN	Position: OFFICE MANAGER
A record of inspections, repairs and mainte	the WSP in WAC 446-65-010. In addition, each hovehicle that includes the following, as required by the 446-65-010: ction and maintenance operations to be performed. tenance indicating their date and nature.
All companies must conduct periodic inspections as requi WSP in WAC 446-65-010.	ilred by the FMCSA in 49 CFR, Part 396.17 and by the
My signature below certifies that I understand my comply with all the safety requirements which ap	y responsibility as a motor carrier and I will oply to my operations.
Signature of applicant	

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed.

certificate holder in lieu of such end PRODUCER	orsen	ent(s	1).		_ ·			not confe	r rights to the
WCLA Insurance Agency				CONTACT Kristy Philpott PHONE (360) 352-5033 x2					
P O Box 2168			,	E-MA		352-5033		FAX (A/C. No): (360)	352-1689
_				ADOR		heloggers	. COM		
Olympia WA	850	7-21	L68	71001		VSURER(S) AFFO	RDING COVERAGE		NAIC#
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343 West Wishkah									
Aberdeen WA	8520	<u> </u>		INSUR					
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PO Box 24065	•		Ĺ						
Seattle, WA 98124			AUTHORIZED REPRÉSENTATIVE						

ACORD 25 (2010/05) INS026 (2010)51 01

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Janne Hules

The ACORD name and lone are registered marks of ACORD

Joanne Burley/JOANNE

ACORD"

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 10/28/2013

ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES I COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUC	NOT AFFIRMATIVELY OR CE OF INSURANCE DOES I	NEGATIVELY AM	END EVITUD AP	A . TED TIL
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P O Box 2168	Dept. 33117 PO Box 39000	ansurance Co) ,	
Olympia WA 98507-2168	San Francisco	CA 941	39-3117	
FAX (A/C, No): (360) 352-1600 E-MAIL ADDRESS; kristyh@loggers.com		CA 941	.JJ~311/	
CODE: SUB CODE:	-			
AGENCY CURTOMER ID #: 00004431				
INSURED	LOAN NUMBER		POLICY NUMBER	
Tobin & Riedesel Logging LLC C/o Aiken & Sanders			02-CA-019049	0750
343 West Wishkah	EFFECTIVE DATE	EXPIRATION DATE	CONTINUE	
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NA JUJEY	INIO METLAGES PRIOR EVIDE	INUE DATED:		
PROPERTY INFORMATION				
LOCATION/DESCRIPTION 2014 Peterbilt/367 1NPWX40X2ED241402 See Attached Overflow Pages				
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PER SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUC	ANY CONTRACT OR OTHE TAIN THE INSURANCE ARE	ER DOCUMENT W	ITH RESPECT TO	WHICH THIS
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Western Peterbilt, Inc. PO Box 24065 Seattle, WA 98124	MORTGAGEE X LOSS PAYER LOAN #	ADDITIONAL INSURE	D	,
	AUTHORIZED REPRESENTATIVE			
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	Linda Bethke/LINDA		Ja 15	- 11

ACORD 27 (2009/12) INS027 (2009/12)

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American Forest Casualty Company Risk Retention Group

COMMERCIAL AUTO COMMON POLICY CHANGE ENDORSEMENT

Named	Inc.
Named	insured

Tobin & Riedesel Logging

LLC

Policy Number AFC103461-12

Endorsement No. 7

Effective Date: 11/29/2012

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American Forest Casualty Company Risk Retention Group

COMMERCIAL AUTO COMMON POLICY CHANGE ENDORSEMENT

Named Insured

Tobin & Riedesel Logging

LLC

Policy Number

AUM103461-12

Endorsement No. 6

Effective Date: 11/29/2012

12:01 A.M. Standard Time

CHANGE DESCRIPTION

This endorsement provides only those coverages where a premium charge is shown below.

	W900	1XKWPBEX7SR683762	Extra Heavy Truck Tractor	\$23	\$2
			- Function	 	
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4.25					

Additional Premium	Return Premium				
\$23		\$0			
		120			