

1300 South Evergreen Park Drive SW PO Box 47250 Olympia, WA 98304-7250 Phone 360-664-1222 Fax 360-586-1181 Web Stre: www.utc.wa.gov

vog.sw.stu@nostatroqenart

## **COMMON CARRIER OF PROPERTY**

(Excluding Household Goods Carriers and Brokers)

## **APPLICATION FOR REINSTATEMENT - FEE \$100.00**

(Per WAC 480-14-220)

Applications for Reinstatement of a Cancelled Common Carrier permit must be within 10 months of the cancellation date of the permit. If over 10 months, you must submit a new application form.

Common Carrier # <u>CC-65055</u> to be reinstated.
Legal Name: Omar Navarro Medina or Christine Navarro
Trade Name(s), dba(s), if any: Omar Navarro Trucking
Business (Mailing) Address: 334 12th Ave SW Ephrata, WA 98823
Physical Address (if different): (Same)
Phone number: (509) 855 - 1806 Fax Number: (509) 754 - 1275
Email address: Ontrucking @[we-com usDOT#: 2421655
Unified Business Identifier Number (UBI): 603 293 882
Type of Business Structure
Individual   Partnership   Limited Liability Company   Corporation State of Inc.
NAME TITLE ADDRESS PERCENTAGE OF SHARES
same as above
For Official Use Only Received Date: 6(2)(4 ID: 243
111-0268-200-02 Insurance: Docket TV-14/214

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information applicant, ar	Is true and correct, to nd that all information	ed, under penalty for fa hat I am authorized to n on file is current and	execute and valid.	d file this docume	nt on behalf of the
Company Na	me: 0 mar	Navarro Le Navarro	Iruck	ing	
Name (print	ed): Christin	ie Navarro	Date:_	6-2-14	· · · · · · · · · · · · · · · · · · ·
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## Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

Filed with the WASHINGTON UTILITIES & TRANSPORTATION COMMISSION-OPERATIONS DIVISION (hereinafter called Commission) of PO BOX 47250, OLYMPIA, WA 98504

This is to certify, that the United Financial Casualty Company (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to OMAR NAVARRO, OMAR NAVARRO TRUCKING of 334 12TH AVE SW, EPHRATA, WA 98823-0000 a policy or policies of insurance effective from 08/08/2014 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 furnish 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 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143  $\,$ 

this 8th day of August, 2014

Insurance Company File No. CA 03236234

(Policy Number)

(Authorized Company Representative)

MC1633a(08/99)

IRB3539B

Pording