

RELEASE OF AUTHORITY FOR CANCELLATION

TO: Washington Utilities and Transportation Commission
Licensing Services
P.O. Box 47250
Olympia, WA 98504-7250
(360) 664-1222 or fax (360) 586-1181

The undersigned, holder of G _____ C _____ CH/ES _____
Permit/certificate number(s):
CC 063004 HG _____
^{DOT}
OTHER 1797643

Does hereby declare that the authority is no longer being used and is hereby
surrendered to the Commission for cancellation. (Attach original permit or
certificate, if available)

Clara Avelar 11-04-14
SIGNATURE OF CARRIER DATE

Clara Avelar
NAME OF CARRIER (Please print)

P.O. Box 189
ADDRESS

Pasco WA 99301
CITY-STATE-ZIP

509-528-6261
(AREA CODE) - PHONE NUMBER



1300 South Evergreen Park Drive SW
PO Box 47250
Olympia, WA 98504-7250
Phone 360-664-1222
Fax 360-586-1181
Web Site: www.utc.wa.gov
transportation@utc.wa.gov

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 # 63333
54456 to be reinstated.

Legal Name: Claro Avelar

Trade Name(s), dba(s), if any: C. A. Trucking

Business (Mailing) Address: P.O. Box 189 Pasco, WA 99301

Physical Address (if different): 625 Madrona Ave Pasco, WA 99301

Phone number: 509-528-6261 Fax Number: 509-545-5325

Email address: _____ USDOT #: 1797643

Unified Business Identifier Number (UBI): 608^R 852 360

Type of Business Structure:

Individual Partnership Limited Liability Company Corporation State of Inc. _____

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
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<u>Claro Avelar</u>	<u>Owner</u>	<u>P.O. Box 189</u>	<u>100%</u>
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For Official Use Only	Received Date: <u>9/2/14</u>	ID: <u>4748</u>
111-0268-200-02	Insurance:	Docket TV- <u>145260</u>
Receipt ID:	Payment ID:	

4748
Pending

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 CLARO AVELAR, DBA: C A TRUCKING of PO BOX 189, PASCO, WA 99301-0000 a policy or policies of insurance effective from 10/09/2014 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 9th day of October, 2014

Insurance Company File No. CA 03249710
(Policy Number)



(Authorized Company Representative)

MC1633a(08/99)

IRB3539B