# **PART A**

## **APPLICATION FOR PERMIT**

(excluding Household Goods)

## 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** 

FOR OFFICIAL USE ONLY			Docket No. TV- 43 7 6			
Reception Number 5			, , , , , , , , , , , , , , , , , , , ,	Carrier ID# \662 C		
111-0268-200-02	Insurance			Employee MQ		
two	TYPE OF AF	PLICA	ATION			
New Common Carrier Permit A	¥	Ext	ension o	of Common Carrier Permit Authority		
or Transfer of Existing Permit						
\$275 GENERAL COMMODITI	ES ONLY		\$100	GENERAL COMMODITIES, including ARMORED CAR SERVICE		
\$275 GENERAL COMMODITIE ARMORED CAR SERVIC	_		\$100	GENERAL COMMODITIES, including HAZARDOUS MATERIALS		
\$275 GENERAL COMMODITIE HAZARDOUS MATERIA	•		\$100	GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE		
\$275 GENERAL COMMODITIES HAZARDOUS MATERIA ARMORED CAR SERVICE	LS and					
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation						
	MOTOR CARRIER	RIDENT	IFICATIO	on the discussion of the second		
Common Carrier #: 65566 Ur	nified Business Id	entifier	Numbei	(UBI): 1003 4210943		
Legal Name: Hauplus Lo	gistics		USDOT	2491987		
Trade Name(s), dba(s), if any						
Email address: Tonya @ C	lbcomps	ser	<u>v. C</u>	W)		
Phone Number: 253 · 520 ·	3030	_ Fax.f	Number:	253.269.7176		
				1 \$457 Aubum Wa95		
Physical Address (if different): 231	05 104B	Ava	SE	Kunt WA 98031		

TYPE OF BUSINESS STRUCTURE							
☐ Individual	☐ Partne	rship	☐ Corporation	Limited Li	ability Company	State of Inc	
NAME Varind	arinderjeet Singh			Stock Distribution or % of Shares			
		· · · · · · · · · · · · · · · · · · ·		waannaisan a namaan a			
			*TRANSFER OF P	ERMIT NUN	BER		
*Complete this section ONLY if you are transferring an existing permit to a new owner. List name of current permit holder and permit number to be transferred. The current permit hold must sign below to authorize the transfer of the permit number.							
NAME ON PE	RMIT				Permi	t Number	
Signature of earrent permit holder			Date				
Digitature QL	carrein perime	. ribider			Date	E. Martine Mar	
Jigrature of		INS	URANCE REQUIREN	MENTS (mus	t check one)		
☐ You will not I	A	INS permit w	vill not be issued until a will not haul	cceptable in	t check one)		
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## **SIGNATURE**

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is issued by the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Signature

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 <u>Code of Federal Regulations at 49 CFR</u>. 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, <u>www.wtatrucking.com</u>, (800) 732-9019 or (253) 838-1650.
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jikeller.com, 877 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, 800-727-7293.
- US Government Printing Office, 732 N. Capitol Street, NW, Washington, DC 20401, www.gpo.gov, 866 512-1800.

Contro	olled Substances and Alcoho	ol Testing	
Name: Dana Blady	Position:	Comphance	Agent

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 Driver's License (CDL) Requirements Name: Varinderijeet Singh Position: Managing Member

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 <u>Department of Licensing</u>. 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	n Requirer	nents	
Name: Dana Brady	Position:	Λ	e Agent
Each company must maintain a complete Driver Qualification as required by FMCSR Part 391.51 and by the WSP in WAC 446 intrastate commerce within Washington have limited exemption operations must maintain a complete file on themselves and a	5-65-010. Ov ons. Owner	n employee authorized to wner/operators that work s/operators that conduct	J drive motor vehicles exclusively in
Drivers Hours	of Service		
Name: Varinderjeet Singh	Position:	managing	member
Each company must maintain true and accurate hours of service as required by the FMCSA in 49 CFR, Part 395.1(e) and by the V	ce records f WSP in WAC	or each individual that dri	ves a motor vehicle
Vehicle Inspection, Repa	ir, and Ma	intenance	
Name: Varinderjeet Singh	Position:	Managing	Member
Each company must prepare a written "Driver Vehicle Inspection the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-required records for each vehicle that includes the following, at WSP in WAC 446-65-010:  Identification of the vehicle.  The nature and due date of various inspection.  A record of inspections, repairs and maintenance.	-65-010. In a s required be and mainte	addition, each company m by the FMCSA in 49 CFR, Pa nance operations to be pe	ust maintain certain art 396.3 and by the
All companies must conduct periodic inspections as required by WAC 446-65-010.	y the FMCS	A in 49 CFR, Part 396.17 ai	nd by the WSP in
Signatu	ıre		
My signature below certifies that I understand my responsible safety requirements which apply to my operations.	sibility as a	motor carrier and I will	comply with all
Muh		9.2.14	<u>k</u>
Signature of applicant		Dat	e

NOTE: Once issued, you must keep a copy of your permit in your vehicle.

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

16626 Jending

Filed with Washington Utilities & Transportation Commission (Name of Agency)	(herein after called Agency)
This is to certify that the Wilshire Insurance Company (Name of Company) (herein after called Company) of 702 Oberlin Road ,Raleigh ,NC ,27605	
(Home Address of Company)	
has issued to Haulplus Logistics LLC (Name of Motor Carrier) of 23105 104th Ave SE kent .CA .98031 (Address of Motor Carrier)	
A policy or policies of insurance effective from policy or policies and continuing until cancelled as provided herein, which by attachment of the Uniform Motor Carrier E Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which regulations promulgated in accordance therewith.	Bodily Injury and Property damage liability insurance
Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or policies and This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to v cancellation may be effective by the Company or the insured giving thirty (30) days' notice in writing to the State Agency commence to run from the date notice is actually received in the office of the Agency.	which it is attached. Such
702 Oberlin Road Countersigned at Raleigh NC 27605 This 08th day of (Address) (Day)	f Sep 20 14 (Year)
Insurance Company File No. BA2600322  (Policy No)  (Authorized Company	ny Representative)
erlying Limit :0.00 Liability Limit :750,000.00	

STATE OF WASH

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