

WASHINGTON



UTILITIES AND TRANSPORTATION COMMISSION

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](http://www.utc.wa.gov)  
transportation@utc.wa.gov

**COMMON CARRIER OF PROPERTY**  
(Excluding Household Goods Carriers and Brokers)

**APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE**

Per WAC 480-14-210

FEE: \$50.00

For Official Use Only		ID: 1653
111-0268-200-02	Received Date: 9/18/14	Docket TV-193516
Receipt ID:	Payment ID:	Insurance:

Application for Change of Name or Business Structure may be used **ONLY** in the following circumstances:

- Carrier changes registered name, with no change in ownership or business structure.
- The carrier changes its business structure:
  - a. From an individual to a corporation or limited liability company (LLC), when the individual is the majority stockholder.
  - b. From an individual to a partnership, when the individual is the majority partner.
  - c. From a corporation or LLC to a sole proprietorship of the majority shareholder.
  - d. From a partnership to a sole proprietorship of the majority partner.
- Carrier changes from partnership to a corporation or LLC when the partners are the majority stockholders in the same proportionate ownership.
- Carrier changes from a corporation or LLC to another corporation or LLC where both corporations or LLC's are wholly owned by the same stockholders in the same proportions.

Holder of Permit CC-65008 asks the UTC for authority to change the name of its business or the business structure of the carrier named below under RCW 81.80 and WAC 480-14 to:

New Business Information

New Legal Name: T's Auto Transport LLC Phone: 360 532 8440  
 Trade Name: \_\_\_\_\_ Fax #: 360 532 9887  
 Mailing Address: 521 E. 1st Physical address (if different): \_\_\_\_\_  
 Street/PO Box: \_\_\_\_\_ Street: \_\_\_\_\_  
 City, State Zip: Aberdeen Wa 98520 City, State, Zip: \_\_\_\_\_  
 Unified Business Identifier Number (UBI): 603422232  
 Email address: \_\_\_\_\_ USDOT number: 2402804

SEP. 18. 2014 11:59 AM LICENSING SERVICES

Type of Business Structure:

Individual  Partnership  Limited Liability Company  Corporation State of Inc. \_\_\_\_\_

NAME	TITLE	ADDRESS	PERCENTAGE OF SHARES
Joe Lasky	owner	53 Baretich Rd 98520	100%

Current Business Information

Current Legal Name: Ts Auto Transport Phone: 360 532 8440

Trade Name: Joseph Lasky Fax #: 360 532 9887

Mailing Address: 521 E. 1st Physical address: (if different): \_\_\_\_\_

Street/PO Box: \_\_\_\_\_ Street: \_\_\_\_\_

City, State Zip: Aberdeen Wa 98520 City, State, Zip: \_\_\_\_\_

Individual  Partnership  Limited Liability Company  Corporation State of Inc. \_\_\_\_\_

NAME	TITLE	ADDRESS	PERCENTAGE OF SHARES
Joe Lasky	owner	53 Baretich Rd. 98520	

Certification: I, the undersigned, affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. The undersigned applicant requests that the Commission transfer CC-\_\_\_\_\_ as provided in RCW 81.80.

I, the undersigned, under penalty for false statement, certify that the information contained in this application is true and correct, and that I am authorized to execute and file this document on behalf of the applicant.

Joe Lasky  
Signature

9/18/14  
Date

No. 5931 P. 2

Licensing Services

Sep. 18. 2014 11:51AM

16653

56-1430

*Pending*

FARMERS

**Form E**  
**Uniform Motor Carrier Bodily Injury and Property Damage**  
**Liability Certificate of Insurance (Executed in quadruplicate)**



Filed with WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION  
(Name of Commission)

This is to certify, that the MID CENTURY INSURANCE COMPANY  
(Name of Company)

(herein called Company) of 4680 WILSHIRE BLVD., LOS ANGELES, CA 90010  
(Home Office, Address of Company)

has issued to T'S AUTO TRANSPORT LLC  
(Name of Motor Carrier)

of 521 E 1ST ST, ABERDEEN, WA 98520  
(Address of Motor Carrier)

a policy or policies of insurance effective from 11/03/2014, 12:01 a.m. standard time at the address of the insured stated in said policy or policies and continuing until canceled 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 regulation 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 canceled without cancellation of the policy to which it is attached. Such cancellation may be effect 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 23175 NW BENNETT ST., HILLSBORO, OR 97124  
(Street Address) (City) (State) (ZIP Code)

this 3RD day of NOVEMBER, year 2014.

Insurance Company File No. 605040493  
(Policy No.)

*Barbara Dukes*  
Authorized Company Representative

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C., sec.302(b)(2)).