

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

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

Received Time-Dec-1-2014 1:26PM-No. 7021

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 # CC- 61931 to be reinstated.

Legal Name: Wesley Gibson

Trade Name(s), dba(s), if any: Steeler Trucking

Business (Mailing) Address: P.O. Box 73 Thorp, Wa. 98946

Physical Address (if different): 10560 N. Thorp Hwy, Thorp, Wa. 98946

Phone number: 509-964-2379 Fax Number: _____

Email address: lizza@fairpoint.net USDOT #: 906493

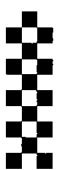
Unified Business Identifier Number (UBI): 192-003-627

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>
<u>Wesley Gibson</u>	<u>owner</u>	<u>10560 N Thorp Hwy Thorp, wa. 98946</u>	<u>100%</u>

<i>For Official Use Only</i>	Received Date: <u>12/1/14</u>	ID: <u>M32615</u>
111-0268-200-02	Insurance: <u>NO</u>	Docket TV- <u>144023</u>
Receipt ID:	Payment ID:	



Approved _____

Form E

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE
(Executed in Triplicate)

Filed with WUTC (hereinafter called Commission)
(Name of Commission)

This is to certify, that the ZURICH AMERICAN INSURANCE COMPANY
(Name of Company)

(hereinafter called Company) SCHAUMBURG, IL
(Home Office Address of Company)

has issued to WESLEY F GIBSON DBA: STEELER TRUCKING to P O BOX 73 THORP WA 98946
(Name of Motor Carrier) (Address of Motor Carrier)

a policy or policies of insurance effective from 12-01-2014 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 regulations promulgated in accordance herewith.

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 affected 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 1333 S RUSTLE RD SPOKANE WA 99224
(Street Address) (City) (State) (Zip Code)

this 1ST day of DECEMBER, 2014

NS. CO. ID# _____



(Authorized Company Representative)

Insurance Company File No. PRA-9016414
(Policy Number)

PO BOX 19150 SPOKANE, WA 99219
(Address of Authorized Company Representative)