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

1CA14

FOR OFFICIAL USE ONLY			Docket No. TV- 120 (70					
Reception Number			Carrier ID# 16934					
111-0268-200-02		Employee MO						
	TYPE OF AF	PLIC	ATION					
New Common Carrier Permit or Transfer of Existing Permi	•	Extension of Common Carrier Permit Authority						
Several commodia	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE							
	\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE					including		
\$275 GENERAL COMMODIT HAZARDOUS MATERIA		\$100	00 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE					
\$275 GENERAL COMMODIT HAZARDOUS MATERIA ARMORED CAR SERVI	ALS and							
\$100 REINSTATEMENT OF CA of cancellation	NCELLED COMMO	N CAR	RIER PER	MIT - Must be fil	ed within :	10 months		
	MOTOR CARRIER			N				
Common Carrier #: 6 STLS L Legal Name: SHB FROM	 Unified Business Ide	entifier	Number	1				
Trade Name(s), dba(s), if any		29						
Email address: Silvestre	ostfinator	<u> 9m</u> c	ail.co	M				
Phone Number: <u>360 - 880 - 2</u>								
Business (Mailing) Address: 205	Se Lo as	;+ U	+ (y InLock	WA	98586		
Physical Address (if different):								

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			*TRANSFER OF PI		BER					
*Complete +	his costion ON					r list name of current				
permit holde		umber to				r. List name of current gn below to authorize the				
NAME ON PI	NAME ON PERMIT Permit Number									
Signature of	Signature of current permit holder Date									
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Unit #	L	icense Nu	umber	State	. V	'IN number				
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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.

na Silvestic Signature

27-15 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</u> <u>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.jjkeller.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.

Controlled Substances	and Alcohol Testing	
Name: Josefina Silvestac	Position: Blanca	Sanchez ~

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.

	1	Comm	nercial Drive	r's License	e (CDL) Re	quirement	S	
Name:	Blanca	Sanch	120		Position:			

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 Requirements
Name: Blanca Sonchiz	Position:

Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.

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Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

Vehicle insp	ection, Repair, and Maintenance	
		and the second
N. Jours Lova La C		
Name: Astanca Jonche 7	Position:	· · · · · · · · · · · · · · · · · · ·
Name:	10510011	

Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010:

- Identification of the vehicle.
- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspections, repairs and maintenance indicating their date and nature.

All companies must conduct periodic inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in WAC 446-65-010.

Signature

My signature below certifies that I understand my responsibility as a motor carrier and I will comply with all the safety requirements which apply to my operations.

Date

Signature of applicant

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

X _											
CER [®] CER	TIF	IC	ATE OF LIA	BIL	ITY IN	ISURA	NCE	DATE	(MM/DD/YYYY) 015		
CERTIFICATE DOES NOT AFFIRMAT BELOW. THIS CERTIFICATE OF IN	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.										
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC REEFER BREAKDOWN INCLUDED	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) REEFER BREAKDOWN INCLUDED										
	-										
				CANC	ELLATION						
WUTC PO BOX 47250						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
OLYMPIA WA 98504											
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