FEB 13 2015

# WASH. UT. & TP. COMM

## **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- (SO) 5						
Reception Number 54051 Safety NO	Carrier ID#\687>						
111-0268-200-02 <b>\$275</b> . Insurance	Employee						
Cneck# 12411 TYPE OF AF	PPLICATION						
New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority						
\$275 GENERAL COMMODITIES ONLY	S100 GENERAL COMMODITIES, including ARMORED CAR SERVICE						
\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	S100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS						
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	S100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE						
\$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE							
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation							
MOTOR CARRIER	IDENTIFICATION						
Common Carrier #: 65754 Unified Business Identifier Number (UBI): W02083445							
Legal Name: Chappelle's TWING LLC USDOT: 969864							
Trade Name(s), dba(s), if any Chuppelles Tow	ing LC North						
Email address: Mappelles towns @ gmail.um							
Phone Number: 360.696.1710 Fax Number: 360.696.6966							
Business (Mailing) Address: 4915 NW Fruit	Valley Rd Van conver wA 45660						
Physical Address (if different):							

## TYPE OF PAYMENT

		TYPE OF BUSI	NESS STRUCTL	IRE	
☐ Individua	l □ Partne	ership <b>A</b> Corporation	Limited Lia	ability Company	State of Inc. 6
NAME	n mala	TITLE mce		Stock Distr	ibution or % of Shares
Ki	na lons	Buyer Sr			270
		*TRANSFER OF	PERMIT NUM	BER	
permit hold		LY if you are transferring and umber to be transferred. ber.			
NAME ON P	ERMIT			Perm	it Number
Signature of	f current permi	t holder		Dat	re
	Ą	INSURANCE REQUIR permit will not be issued uni	[1985] 2 (1985) 2 (1985) 1 (1985) 2 (1985) 1 (1985) 1 (1985) 1 (1985) 1 (1985) 1 (1985) 1 (1985) 1 (1985) 1 (1	其時間,我使用有效的 12 mg (2.5% 至 )。在 12 mg (2.7%	l
You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage Insurance. You do not need to complete Part B.		You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. Yo must obtain \$750,000 in Public Liability and Propert Damage Insurance. You mucomplete Part B.	materials re million in Po Property Da You must co Sections 1 a	ublic Liability and amage Insurance. omplete Part C,	You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.
	<b>.</b>	MOTOR VEHICLE LIST (Attac	ch additional pa	ages if necessary	
Unit#	nta Chea	icense Number	State	\	/IN number
and that no	operations mathemation	that the filing of this applic y be conducted until a perr contained in this applicati	nit is issued by	the Commission	. I hereby declare and
Signature	TK W	ane		#/10/15 ate	·

en e	Lic#	VM
#12 07 Frightliner	C78261A	1FVACWCS07HX87673
14 07 Frightliner	B941794	1FVACWC\$X7H189627
15 11 Dodge	B04226V	306WAGEL6BG501562
16 07 Frightliner	B57492V	IFVACUC \$X7HY00400
17 12 Dodge	B77403Z	3C7WDMBLICG122897
18 14 Frightliner	0119170	IFVACWOTT EHFX3352
	BG.	
#1 12 Dodge	B77403Z	3C7WDMBLICG122897
#3 07 International	C75482A	1 HTMM AAL 67 H435611

A Commence of the Commence of

. <u>‡</u> .

## 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, <a href="https://www.wtatrucking.com">www.wtatrucking.com</a>, (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.

			Controlled Substance	s and Alcoho	l Testing
Name:	Secur	Mc Name	!!	Position:	Owner
					al motor vehicle as described below must

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.

010.	
Commercial Driver's Li	cense (CDL) Requirements
Name: Sean Mc Namel	— Position: OWNER

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 Q	ualification Requirements
Name: Secun Mc Namel	Position: OWNUR
as required by FMCSR Part 391.51 and by the WSP	ralification File for each employee authorized to drive motor vehicle in WAC 446-65-010. Owner/operators that work exclusively in ed exemptions. Owners/operators that conduct any interstate elves and any other driver that they may use.
Driv	vers Hours of Service
Name: Sell McNUMPP	Position: DWW
Each company must maintain true and accurate hor as required by the FMCSA in 49 CFR, Part 395.1(e) a	urs of service records for each individual that drives a motor vehicle and by the WSP in WAC 446-65-010.
	tion, Repair, and Maintenance
Name: Sean Mc Name	Position: UMPP
the FMCSA in 49 CFR, Part 396.11 and by the WSP i required records for each vehicle that includes the WSP in WAC 446-65-010:  • Identification of the vehicle.  • The nature and due date of various	cle Inspection Report" on each vehicle used each day as required by n WAC 446-65-010. In addition, each company must maintain certain following, as required by the FMCSA in 49 CFR, Part 396.3 and by the inspection and maintenance operations to be performed. I maintenance indicating their date and nature.
All companies must conduct periodic inspections as WAC 446-65-010.	required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in
	Signature
My signature below certifies that I understand the safety requirements which apply to my ope	my responsibility as a motor carrier and I will comply with all erations. $\frac{\mathcal{J}_{lo}/l\mathcal{S}}{\mathcal{J}_{lo}/l\mathcal{S}}$
Signature of applicant	Date

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

AC	ORD, CERTIFIC	ATE OF LIA	BILITY IN	SURAN	CE		TE(MM/DD/YYYY)	
	erpointe Insurance Serv	1 vice	ONLY AN HOLDER.	D CONFERS N	UED AS A MATTER OF THE PROPERTY OF THE PROPERT	OF IN HE END,	CERTIFICATE EXTEND OR	
	ISE#194145	3	ALTER TH	E COVERAGE	AFFORDED BY THE	POL	ICIES BELOW.	
	B Camarillo Springs F	OAC	INGLIDEDS A	AFFORDING CO	/FDAGE		NAIC#	
Camai SURED	cillo, CA 93012-9464 CHAPPELLE'S TOWING	T.T.C			TALTY INS. CO.		27154	
	DBA: CHAPPELLE'S TO		INSURER B:	DWALLC SEDE	TADII IMB, CO.		2/234	
	4915 NW FRUIT VALLE		INSURER C:					
	VANCOUVER, WA 9866		INSURER D:					
	madoutan, ma soci	CHAP01	INSURER E:					
OVER	AGES							
ANY R	DLICIES OF INSURANCE LISTED BEL EQUIREMENT, TERM OR CONDITION ERTAIN, THE INSURANCE AFFORDE IES. AGGREGATE LIMITS SHOWN MAN	N OF ANY CONTRACT OR OT D BY THE POLICIES DESCRIE	THER DOCUMENT WITH BED HEREIN IS SUBJEC	H RESPECT TO W	HICH THIS CERTIFICATE	MAY	BE ISSUED OR	
ISR ADD I	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIN	ITS		
A	GENERAL LIABILITY	613-00-04-55-0001	10/20/2014	10/20/2015	EACH OCCURRENCE	\$	1,000,000	
	X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurence)	\$	100,00	
	CLAIMSMADE X OCCUR				MED EXP (Any one person)	\$	5,00	
	X CONTINGENT LIABILI				PERSONAL & ADV INJURY	\$	1,000,000	
ļ	X INCLUDES STOP GAP				GENERAL AGGREGATE	\$	2,000,000	
	GEN L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$	2,000,00	
A	X POLICY PRO- JECT LOC  AUTOMOBILE LIABILITY  ANY AUTO	613-00-04-55-0001	10/20/2014	10/20/2015	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,00	
	ALL OWNED AUTOS  X SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
	X HIRED AUTOS NON-OWNED AUTOS			, ,	BODILY INJURY (Peraccident)	\$		
					PROPERTY DAMAGE (Peraccident)	\$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
	ANYAUTO				OTHER THAN EA ACC		<u> </u>	
+	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$		
	OCCUR CLAIMS MADE				AGGREGATE	\$		
						\$	<u> </u>	
	DEDUCTIBLE					\$		
	RETENTION \$					\$		
woi	RKERS COMPENSATION AND			·	WCSTATU- OTH TORYLIMITS EF	-		
	PLOYERS LIABILITY				E.L. EACH ACCIDENT	\$		
OFF	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOY	EE\$		
If yet SPE	s, describe under CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$		
<b>А</b> ОТН	ER	613-00-04-55-0001	10/20/2014	10/20/2015	100,000			
ON-HOOK/GARAGE KEEPER				100,000				
3ARAG 1109	ION OF OPERATIONS/LOCATIONS/VEHICL EEKEEPERS LEGAL LIABILI SE GRACE AVE., STE 100 RKS FORM ATTACHED.	TY-LOC 1): 4915 N	W FRUIT VALLEY	, VANCOUVER				
ERTIF	ICATE HOLDER		CANCELLAT		UDED DOLLOUES DE CAMPE	<b>F</b> F	FORE THE EVENT	
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION				
UTC: UTILITIES AND TRANSPORTATION			1	DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL DAYS WRITTEN  NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL				
	*********************************	TO OUR	NOTICE TO THE	CERTIFICATE HOUDE	R NAMED TO THE LEFT DIT	FAHIL	RE TO DO SO SHAP	
1	300 S. EVERGREEN PARK O. BOX 47250	DR. SW			R NAMED TO THE LEFT, BUT TY OF ANY KIND UPON THE			