

**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**

<i>For Official Use Only</i>		ID: <u>W 887</u>
111-0268-200-02	Received Date:	Docket TV-
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- 60520 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: Linda McCraw Phone: 360-880-7155  
 Trade Name: Real Deal Trucking, Inc. Fax #: \_\_\_\_\_  
 Mailing Address: 162 Sanderson Rd #B Physical address (if different): \_\_\_\_\_  
 Street/PO Box: \_\_\_\_\_ Street: \_\_\_\_\_  
 City, State Zip Chehalis WA 98532 City, State, Zip \_\_\_\_\_  
 Unified Business Identifier Number (UBI): 603-303-058  
 Email address: lindamecraw@gmail.com USDOT number: 1025575

Type of Business Structure:

Individual  Partnership  Limited Liability Company  Corporation State of Inc. WA

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
<u>Real Deal Trucking</u>	<u>Owner</u>	<u>162 Sanderson Rd #B Chehalis, Wa</u>	<u>100%</u>

Current Business Information

Current Legal Name: Linda McCraw Phone: 360-880-7155

Trade Name: ~~Real Deal~~ Linda McCraw Trucking Fax #: \_\_\_\_\_

Mailing Address: 162 Sanderson Rd #B Physical address: (if different): \_\_\_\_\_

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

City, State Zip: Chehalis, Wa 98532 City, State, Zip: \_\_\_\_\_

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

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
<u>Linda McCraw Trucking</u>	<u>owner</u>	<u>162 Sanderson Rd</u>	<u>100%</u>

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-60520 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.

Linda McCraw \_\_\_\_\_ 2-20-2015  
Signature Date



PHILLIPPS INS GROUP  
 PO BOX 607  
 TOLEDO, WA 98591  
 1-360-864-8844

**PROGRESSIVE**<sup>®</sup>

**Policy number: 03525754-0**

Underwritten by:  
 United Financial Casualty Company  
 February 20, 2015  
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## Certificate of Insurance

Certificate Holder	Insured	Agent
UTC 1300 S. EVERGREEN PARK DR. SW OLYMPIA, WA 98504	REAL DEAL TRUCKING INC 162 SANDERSON ROAD CHEHALIS, WA 98532	PHILLIPPS INS GROUP PO BOX 607 TOLEDO, WA 98591

This document certifies that insurance policies identified below have been issued by the designated insurer to the insured named above for the period(s) indicated. This Certificate is issued for information purposes only. It confers no rights upon the certificate holder and does not change, alter, modify, or extend the coverages afforded by the policies listed below. The coverages afforded by the policies listed below are subject to all the terms, exclusions, limitations, endorsements, and conditions of these policies.

Insurance coverage(s)	Limits
Bodily Injury/Property Damage	\$750,000 Combined Single Limit
Underinsured Motorist Bodily Injury	\$100,000 Combined Single Limit
Underinsured Motorist Property Damage	\$50,000 w/\$100 Ded (\$300 if Hit & Run)

Policy Effective Date: Feb 20, 2015

Policy Expiration Date: Feb 20, 2016

### Description of Location/Vehicles/Special Items

#### Scheduled autos only

1999 KW W90 1XKWDB9X4XR794151	
Medical Payments	\$10,000
Comprehensive	\$1,000 Ded
Collision	\$1,000 Ded

1978 PEERLESS TRAILER W78793

#### Certificate number

05115A09754

**Please be advised that the certificate holder will not be notified in the event of a mid-term cancellation.**

Form 5241 (10/02)