



1300 South Evergreen Park Drive SW PO Box 47250 Olympia, WA 98504-7250 Phone 360-664-1222 Fax 360-586-1181 Web Site: www.ut.,wa.gov transportation@utc.wa.gov

COMMON CARRIER OF PROPERTY

(Excluding Household Goods Carriers and Brokers)

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 # $CC - 65692$ to be reinstated.		
Legal Name: Thomas MayLish		
Trade Name(s), dba(s), if any: Transport		
Business (Mailing) Address: 1720 W Henry St PASCO, WA 9930		
Physical Address (if different):	9AMC	
Phone number: 599 - 380 - 5129 Fax Number:		
Email address: Sports Mc Service Library USDOT #: 2555363		
Unified Business Identifier Number (UBI): 603 444 005		
Type of Business Structure:		
☐ Individual ☐ Partnership ☐ Limited Liability Company ☐ Corporation State of Inc		
NAME TITE	<u>E</u> <u>ADDRESS</u>	PERCENTAGE OF SHARES
Thomas Maydish 100%		
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For Official Use Only	Received Date:) \2545	ID: 16797
111-0268-200-02	Insurance: MO	Docket TV- (50 32 5
Receipt ID:	Payment ID:	
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Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

Filed with the WASHINGTON UTILITIES & TRANSPORTATION COMMISSION-OPERATIONS DIVISION (hereinafter called Commission) of PO BOX 47250, OLYMPIA, WA 98504

This is to certify, that the United Financial Casualty Company (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to THOMAS R MAYDISH of 1720 W HENRY ST, PASCO, WA 99301 a policy or policies of insurance effective from 02/25/2015 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled 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 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 cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected 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 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143 this 25th day of February, 2015

Insurance Company File No. CA 03321996

(Policy Number)

MC1633a(08/99)

(Authorized Company Representative)

IRB3539B