# 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 U	SE ONLY		Docket No. TV- 30430					
Reception Num		Ø	Carrier ID# \(Q24					
111-0268-200-0			Employee (W)					
TYPE OF APPLICATION								
New Common Carrier Permit Authority,			Extension of Common Carrier Permit Authority					
or Transfer of Existing Permit Number								
\$275	GENERAL COMMODITIES ONLY	\$	100 GENERAL COMMODITIES, including ARMORED CAR SERVICE					
	ENERAL COMMODITIES, includi ARMORED CAR SERVICE	ng 🗆 \$	100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS					
\$275 0	ENERAL COMMODITIES, includi HAZARDOUS MATERIALS	ng 🗆 \$	100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE					
	GENERAL COMMODITIES, INCLUI HAZARDOUS MATERIALS and ARMORED CAR SERVICE	DING						
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation								
MOTOR CARRIER IDENTIFICATION								
Common Carrier #: Unified Business Identifier Number (UBI): 603-407-573								
Legal Name: MAXIM LLC USDOT: 2511621								
Trade Name(s), dba(s), if any								
Email address: maxim carrental @ hotmail.com								
Phone Number: 425-283-3993 Fax Number:								
Business (Mailing) Address: 16191-834d Ave NE-Redmond-WA-98052								
Physical Address (if different): Suite C 127								



TYPE OF BUSINESS STRUCTURE						
☐ Individual ☐ Partner	ship Corporation	Z Limited Lia	ability Company	State of Inc		
NAME	TITLE		Stock Distribution or % of Shares			
Emad A. Awad	Owner		100 %			
		- ,				
	*TRANSFER OF P	ERMIT NUM	BER			
*Complete this section ONL	Y if you are transferring an e	xisting perm	it to a new owne	r. List name of current		
permit holder and permit n transfer of the permit numb	umber to be transferred. Theer.	e current pe	rmit hold must si	gn below to authorize the		
NAME ON PERMIT			Permi	t Number		
Signature of current permit	holder	· · · · · · · · · · · · · · · · · · ·	Dat			
Signature of current permit	noide:		Dat	<b>e</b> 		
	INSURANCE REQUIREM					
	permit will not be issued until a					
$\square$ You will not haul	You will not haul	☐ You will	haul hazardous	You will haul hazardous		
hazardous materials in any	hazardous materials in any	materials requiring \$1		materials requiring \$5		
quantity. You will only	quantity. You will operate	million in Public Liability and		million in Public Liability		
operate vehicles with a	vehicles with a GVWR of	Property Damage Insurance.		and Property Damage		
GVWR of less than 10,000	10,000 pounds or more. You	You must complete Part C,		Insurance. You must		
pounds. You must obtain	must obtain \$750,000 in	Sections 1 and 2.		complete Part C, Sections 1		
\$300,000 in Public Liability Public Liability and Propert		1		and 2.		
and Property Damage Damage Insurance. Y						
Insurance. You do not need	complete Part B.			1		
to complete Part B.		<u>l</u>				
	OTOR VEHICLE LIST (Attach	additional n	ages if necessary	<u> </u>		
	icense Number	State	<del>,</del>	/IN number		
	<del></del>	WA		15AH161169		
1 C 72 980 B 2 C 74949 A		WA				
3   B 53 432 X		WA	a lite M M A a AA A a			
	SIGNA					
I ac applicant understand t	that the filing of this applicat	ion does not	in itself constitu	to authority to operate		

affirm that the information contained in this application is true to the best of my knowledge and belief.

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#### **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, fist the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. 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, www.wtatrucking.com, (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.

Controlle	ed Substances and Alcohol Testing
Name: Emad Awad	Position: Owner
Any driver who operates a vehicle that meets t	the definition of a commercial motor vehicle as described below must
have a valid CDL. The definition of a commercial	al motor vehicle is a vehicle that:
<ul> <li>has a gross combined weight rating of rating of more than 10,000 pounds; or</li> </ul>	26,001 pounds that includes a towed unit with a gross vehicle weight
<ul> <li>has a gross vehicle weight rating of 26,</li> </ul>	,001 pounds or more; or
<ul> <li>is designed to transport 16 or more part</li> </ul>	
	nazardous materials of an amount that requires placarding under
hazardous materials regulations.	
Any person who drives a commercial motor vel alcohol testing program as required by FMCSA 010.	hicle requiring a CDL must participate in a controlled substance and in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65
Commercial	Driver's License (CDL) Requirements
Name: Emad Awad	Position: Owner
Any driver who operates a vehicle that meets t	the definition of a commercial motor vehicle as described below must
nave a valid CDL, as required by the washingto webicle is a vehicle that:	on State $\underline{Department}$ of Licensing. The definition of a commercial moto
vehicle is a vehicle that:	26,001 pounds that includes a towed unit with a gross vehicle weight

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.

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has a gross vehicle weight rating of 26,001 pounds or more; or

Maxim IIc

Driver Qualification Requirements
Name: Emad Awad Position: Owner
Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehic 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.
Drivers Hours of Service
Name: Emad Awad Position: Owner
Each company must maintain true and accurate hours of service records for each individual that drives a motor vehic as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.
Vehicle Inspection, Repair, and Maintenance
Name: Emad Awad Position: Owner
Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required to 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.
<ul> <li>The nature and due date of various inspection and maintenance operations to be performed.</li> </ul>
<ul> <li>A record of inspections, repairs and maintenance indicating their date and nature.</li> </ul>
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.
Tours Auris
Cough New 2-26-2015 Signature of applicant  Date

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

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# Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATION OF INSURANCE

Filed with Washington Utilities & Transportation Commission	(herein after called Agency)
(Name of Agency)	
This is to certify that the Ohio Security Insurance Company	
(Name of Company)	
(herein after called Company) of 9450 Seward Rd., Fairfield, OH, 45014	
(Home Address of Company)	
· <del></del>	
16191 NE 83RD AVE NE C127 ,R	EDMOND, WA
has issued to MAXIM LLC of 98052	
(Name of Motor Carrier) (Address of Motor Carrier)	
A policy or policies of insurance effective from policy or policies and continuing until cancelled as provided herein, which by attachment of the Uniform Motor Canadae Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and provided automobile bodily automob	arrier Bodily Injury and Property
covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in regulations promulgated in accordance therewith.	
Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or polici.  This certificate and the endorsement described herein may not be cancelled without cancellation of the policy.	
cancellation may be effective by the Company or the insured giving thirty (30) days' notice in writing to the State commence to run from the date notice is actually received in the office of the Agency.	Agency, such thirty (30) days' notic
9450 Seward Rd	
Countersigned at Fairfield OH 45014 This 01st	day of Apr 20 15
(Address) (Day)	(Month) (Year)
Insurance Company File No. BAS 56140934 Margaret Dole	
(Policy No.) (Authorized C	ompany Representative)
(,,	,

Liability Limit :1,000,000.00