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-150,590						
FOR OFFICIAL USE ONLY Reception Number Safety (1)				Carrier ID# 6477		
Reception Number 111-0268-200-02	Insurance (M)			Employee (4)		
111-0268-200-02	·		ATION			
TYPE OF APPLICATION New Common Carrier Permit Authority. Extension of Common Carrier Permit Authority						
New Common Carrier Permit Authority, or Transfer of Existing Permit Number			ension (of Common Carrier Persian Additionty		
\$275 GENERAL COMMODITIES ONLY			\$100	GENERAL COMMODITIES, including ARMORED CAR SERVICE		
	\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE		\$100	GENERAL COMMODITIES, Including HAZARDOUS MATERIALS		
\$275 GENERAL COMMODIT HAZARDOUS MATER		0	\$100	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 CARRIES	R IDENT	IFICATION	OÑ		
Common Carrier #:65857	Unified Business Id	entifier		er (UBI): <u>603 481 301</u>		
Legal Name: Ruan Lenssen M uspot: 2584352						
Trade Name(s), dba(s), if any Chucks Truckin Inc.						
Email address: lenssen 73@ gmail. Com						
Phone Number: 360-595-0138 Fax Number:						
Business (Mailing) Address: 5179 Strand Rd Deming, Wa. 98244						
Physical Address (if different):	· 					

		TYPE OF BUSINE	SS STRUCTU	RE,			
☐ Individual	☐ Partners	hip Corporation [☐ Limited Lia	bility Company	State of Inc		
NAME		TITLE	Stock Distribution or % of Shares				
Ryan Le	enssen	president			100%		
		*TRANSFER OF P					
permit holder	s section ONL) and permit nu e permit numb	If you are transferring an ember to be transferred. There	existing perm le current pe	nt to a new owne rmit hold must si	gn below to authorize the		
NAME ON PERMITPermit Number							
Signature of c	urrent permit	holder		Dat	e		
	A:	INSURANCE REQUIRE	MENTS (mus	t check one) surance is received			
☐ You will not h	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	X You will not haul	☐ You will	haul hazardous	☐ You will haul hazardous		
hazardous mate		hazardous materials in any quantity. You will operate	materials re	equiring \$1 ublic Liability and	materials requiring \$5 million in Public Liability		
quantity. You wo		vehicles with a GVWR of	Property Damage Insurance.		and Property Damage		
GVWR of less th		10,000 pounds or more. You		omplete Part C,	Insurance. You must		
	. You must obtain must obtain \$750,000 in		Sections 1 and 2. complete Part C, Secand 2.				
\$300,000 in Pub		Public Liability and Property			allu Z.		
	and Property Damage Insurance. You do not need complete Part B.		`		·		
to complete Par							
	M	OTOR VEHICLE LIST (Attack	additional p				
Unit#	نا	cense Number	State	VIN number			
88	MORCHAN	HOLHOW SHARESTON	HOSE.	- 	000770111201.2		
33	33 C23440D		wa.	1 12h			
trailer	55	32 - ZF	Wu.	130			
ROLLEN SET SET SET		SIGN	ATURE				
Lac applicant	t understand t	hat the filing of this applica	ition does no	t in itself constitu	ite authority to operate		
and that no o	nerations may	be conducted until a perm	it is issued by	/ the Commissior	i. Thereby declare and		
affirm that th	e information	contained in this application	n is true to th	ne best of my kno	owledge and belief.		
Rusa.	1			April 9	1015		
Signature	- Just 3			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 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

Controlled Su	bstances and Alcohol Testing
Name: Ryan Lenssen	Position: president driver
rating of more than 10,000 pounds; or	01 pounds that includes a towed unit with a gross vehicle weight
 has a gross vehicle weight rating of 26,001 period Is designed to transport 16 or more passenger 	pounds or more; or gers, including the driver; or dous materials of an amount that requires placarding under
 has a gross vehicle weight rating of 26,001; Is designed to transport 16 or more passenged is of any size and is used to transport hazard hazardous materials regulations. Any person who drives a commercial motor vehicle alcohol testing program as required by FMCSA in 49	gers, including the driver; or
 has a gross vehicle weight rating of 26,001; Is designed to transport 16 or more passenged is of any size and is used to transport hazard hazardous materials regulations. Any person who drives a commercial motor vehicle alcohol testing program as required by FMCSA in 45,010.	gers, including the driver; or down materials of an amount that requires placarding under materials of an amount that requires placarding under requiring a CDL must participate in a controlled substance and

- has a gross combined weight rating of 26,001 pound 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.

		And the second second	Je in the Company of the Company	Trade Control to ACE (197		
			Driver Qualifica	tion Requirem		
Name:	yan	Lenssen		— Position:	president	/driver_
as required b	y FMCSR	Part 391.51 and b vithin WashIngtor	by the WSP in WAC n have limited exem	446-65-010. Owners	employee authorized vner/operators that w s/operators that condo ver that they may use	act any interstate
			Drivers Ho	urs of Service	A CONTRACTOR OF THE STATE OF TH	
Name: R	yan	lenssen		Position:	president	driver
Each compar as required b) ny must m ny the FM	naintain true and a CSA in 49 CFR, Pa	accurate hours of s rt 395.1(e) and by t	ervice records fo the WSP in WAC	or each individual that 2 446-65-010.	drives a motor vehicle
		Vel	nicle Inspection, F	Repair, and Ma	ilntenance	
Name:	yan	Lenssen		Position:	presiden	<u>t / driver</u>
the FMCSA in required red WSP in WAC	n 49 CFR, ords for e : 446-65-0 Identi The n A reco	Part 396.11 and k ach vehicle that in 20: fication of the veh ature and due dat ord of inspections	by the WSP in WAC includes the followi shicle. Ite of various inspec s, repairs and maint	446-65-010. In ng, as required states the states are states to the states are states as the states are states are states are sampled to the states are states are sampled to the states are states are sampled to the states are sampled to the states are sampled to the states are states are sampled to the states are state	addition, each compa by the FMCSA in 49 Cf enance operations to l ng their date and natu	ire.
All companie WAC 446-65		onduct periodic in	nspections as requi	red by the FMCS	6A in 49 CFR, Part 396.	17 and by the WSP in
			Si	gnature		
My signatu	re below requirem	certifies that I used to the control of the central control of the c	understand my re ly to my operatior	sponsibility as	a motor carrier and	I will comply with all
R	1				Armi 1	9 2015

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

Signature of applicant

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 CHUCK'S TRUCKIN' INC. of 5179 STRAND RD, DEMING, WA 98244-0000 a policy or policies of insurance effective from 04/10/2015 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 10th day of April, 2015

Insurance Company File No. CA 03651966

(Policy Number)

MC1633a(08/99)

(Authorized Company Representative)

IRB3539B