FOR OFFICIAL USE ONLY

Reception Number

111-0268-200-02

Docket No. TV- 50702

Carrier ID# \ 6 8 46

Employee M

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

Safety

Insurance

	TYPE OF A	PPLIC	ATION	I.		
	v Common Carrier Permit Authority, Transfer of Existing Permit Number	Ех	tension	of Common Carrier Permit Authority		
	5 GENERAL COMMODITIES ONLY		\$100	GENERAL COMMODITIES, including ARMORED CAR SERVICE		
\$27	75 GENERAL COMMODITIES, including ARMORED CAR SERVICE		\$100	GENERAL COMMODITIES, including HAZARDOUS MATERIALS		
\$27	75 GENERAL COMMODITIES, including HAZARDOUS MATERIALS		\$100	GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE		
\$27	'S 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 #: 031721 Unified Business Identifier Number (UBI): 68-0592270 Legal Name: Princehouse Trucking, LLC USDOT: 1280809						
	e(s), dba(s), if any					
Email addre	ess: jmfriend_45@yahoc	, co	m			
Phone Num	iber: (541)-963-6373	_ Fax	Number:	(541)-663-8857		
Business (N	lailing) Address: <u>514 Benton Court</u>	<u> </u>	La G	rande, OR 97850		
Physical Add	dress (if different): Same					

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 American States Insurance Company of Texas						
(Name of Company)						
(herein after called Company) of 4333 Brooklyn Avenue NE , Seattle , WA , 98185 (Home Address of Company)						
(Home Address of Company)						
PRINCEHOUSE TRUCKING						
has issued to LLC of 514 BENTON CT ,LA GRANDE ,OR	97850					
(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 Car Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and proportion of the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in Vertical Cardian	rier Bodily Injury and Property perty damage liability insurance					
regulations promulgated in accordance therewith.						
Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or policies. 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 Agrommence to run from the date notice is actually received in the office of the Agency.	to which it is attached. Such					
9450 Seward Rd						
	layof <u>Apr</u> 20 <u>15</u>					
(Address) (Day)	(Month) (Year)					
Insurance Company File No. 04CC231522	а					
(Policy No) (Authorized Cor	mpany Representative)					

Liability Limit :1,000,000.00