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- \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Reception Number	Safety M			Carrier ID# (1007	
111-0268-200-02	Insurance MS			Employee M	
	TYPE OF A	PLIC	ATION		
New Common Carrier Permit Authority, or Transfer of Existing Permit Number		Extension of Common Carrier Permit Authority			
\$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 COMMODITIES, including HAZARDOUS MATERIALS		\$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					
MOIOR CARRIER DENDIECTION TO THE PROPERTY OF T					
Common Carrier #: 65875 Unified Business Identifier Number (UBI): 603 796 734					
Legal Name: Crossfire Trucking Company, LLC USDOT: 2468931					
Trade Name(s), dba(s), if any Grossfire Constructions / Grossfire Hay Company, UC					
Email address:gamil.com					
Phone Number: 253-677-8348 Fax Number: N/A					
Business (Mailing) Address: 41403 120th Ave Ct. E. Eaton ville, WA 98328					
Physical Address (if different):					

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			TYPE OF BUSIN	essistikue	Die			
□ Individua	al 🔲 Partn	ership	☐ Corporation	Limited L	lability Company	State of Inc. WA		
NAME GARY R. Durham Owner/Manager Stock Distribution or % of Shares 10:370						ibution or % of Shares		
		_	•	<u> </u>				
			TIRANSEROE	PERMIT NUN	ABER T			
*Complete this section ONLY if you are transferring an existing permit to a new owner. List name of current permit holder and permit number to be transferred. The current permit hold must sign below to authorize the transfer of the permit number.								
NAME ON PERMIT Permit Number								
Signature of current permit holder					Date			
INSURANCE REQUIREMENTS (musticherk one) A permit will not be assired until acceptable insurance is received								
☐ You will not	hauí		will not haul		haul hazardous	☐ You will haul hazardous		
hazardous ma	,	hazard	ous materials in any	materials requiring \$1 materials requiring \$5				
quantity. You	•	_	y. You will operate		ublic Liability and	million in Public Liability		
operate vehicl GVWR of less 1			s with a GVWR of		amage Insurance.	and Property Damage		
pounds. You m	-		pounds or more. You btain \$750,000 in	Sections 1	omplete Part C,	Insurance. You must		
\$300,000 in Pu			iability and Property	Sections 1	anu Z.	complete Part C, Sections 1		
and Property D			e Insurance. You must			alia Z.		
Insurance. You	do not need	1 -	te Part B.					
to complete Pa	art B.		<u> </u>					
Sold Property of the Control of the				_				
	V V	OTOR Y	ERICE EST (Attach	additional p	ges flarecessary)			
Unit#	_	icense N		State	V	IN number		
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2	2 A 50087Y		WA	1NKWXBOX7WR7673760				
	w asawa Markata Personanan		MCCU NOTES 1240 - Annual Control Contr					
			AS ESTEDED SIGNA	WHAT I WAS A COMMENT OF THE PARTY OF THE PAR				
I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is issued by the Commission. I hereby declare and								
and that no o	perations may	be cond	lucted until a permit	is issued by	the Commission.	I hereby declare and		
affirm that the information contained in this application is true to the best of my knowledge and belief.								
Signature Date								
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Signature	y JUU CA (W				<u> つ/<i>し</i>/ の</u> ete	15)		

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 <u>Code of Federal</u> <u>Regulations at 49 CFR</u>. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code <u>(WAC) 446-65</u>.

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.ijkeller.com, 877 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, 800-727-7293.
- US Government Printing Office, 732 N. Capitol Street, NW, Washington, DC 20401, www.gpo.gov, 866 512-1800.

		Controller	fSubstances and Alcoho	l Testing	
Name:	GARY	Durham	Position:	Owner / opera	ctor

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight 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.

Any person who drives a commercial motor vehicle requiring a CDL must participate in a controlled substance and alcohol testing program as required by FMCSA in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65-010.

Commercial Driver's Licen	ise (CDL) Requirements
Name: Gary Durham	Position: OWNEN Openator

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL, as required by the Washington State <u>Department of Licensing</u>. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight 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.

Driver Qualification Requirements

Name: Gan: Durnam

Position: Owner/operator

Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles 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: Gans Durvary

Position: <u>OWNOW! Operator</u>

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle 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

Savy Durham Position: Durrer Operato

Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by 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.
- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspections, repairs and maintenance indicating their date and nature.

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.

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.

Signature of applicant

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

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

Filed with Washington Utilities and Transportation Commission (hereinafter called Commission)

This is to certify, that the Western National Assurance (hereinafter called Company)

of 9706 4th Ave. NE, Ste 200, Seattle, WA 98115

has issued to Crossfire Trucking Company, LLC of 41403 120th Ave. Ct. E., Eatonville, WA 98328

a policy or policies of insurance effective from May 6, 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 9706 4th Ave NE, Seattle, WA 98115 this 6th day of May, 2015

Insurance Company File No. CPP 1086419 (Policy Number)

Linda K Skurdal (Authorized Company Representative)