

AUG 1 4 2015

BEFORE THE WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION 1-360-664-1222

In re Application of)
) DOCKET TV-151426
PETRUTA A. TUSA,)
d/b/a TRANSPORTATION USA,	ORDER 01
)
for a permit to operate as a motor freight) ORDER DISMISSING APPLICATION
carrier	

- Petruta A. Tusa, d/b/a Transportation USA, (Transportation USA), has filed an application with the Washington Utilities and Transportation Commission (Commission) for a permit to operate as a motor freight carrier within the state of Washington.
- 2 On August 7, 2015, Transportation USA notified the Commission that he does not wish to proceed with the application for a common carrier permit and requested that this application be withdrawn and the proceeding dismissed.

ORDER

- 3 **THE COMMISSION ORDERS** the application of Petruta A. Tusa, d/b/a Transportation USA, filed in Docket TV-151426, is dismissed.
- The Commission has delegated authority to the Secretary to enter this Order under RCW 80.01.030, and WAC 480-07-903(1)(c).

DATED at Olympia, Washington, and effective August 13, 2015.

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

STEVEN V. KING

Executive Director and Secretary

coll July # 971-221-6154

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

			Docket No. TV- \S 926
FOR OFFICIAL USE ONLY			Carrier ID# 1130
Reception Number	Safety No.		Employee 🕰
11-0268-200-02	TYPE OF AP	PLICATION	
New Common Carrier Permit Authority, or Transfer of Existing Permit Number		Extension o	of Common Carrier Permit Authority
\$275 GENERAL COMMOD	ITIES ONLY	\$100	GENERAL COMMODITIES, including ARMORED CAR SERVICE
\$275 GENERAL COMMODI	\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE		GENERAL COMMODITIES, including HAZARDOUS MATERIALS
\$275 GENERAL COMMOD HAZARDOUS MATE	ITIES, including	\$100	GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
\$275 GENERAL COMMOD HAZARDOUS MATE ARMORED CAR SER	RIALS and		
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation			
	MOTOR CARRIE	R IDENTIFICAT	ON
Common Carrier #: LSWD	Unified Rusiness	dentifier Numb	er (UBI): 26
Legal Name: Petrota A	1054	USDO	OT: 619 100 100 100 100 100 100 100 100 100 1
Trade Name(s), dba(s), if any	Irang pon	tation UC	1 COM
Email address: John Co	adar etus	a o yar	1-071-388-4968
Phone Number: 971-221	106.06	Fax Numb	er: 1-971-888-4958 CKER RD. Beaventon UK 97000
Business (Mailing) Address:	10427	ya will	01700
Physical Address (if different):		ioni_	

(all July # 971-221-6154

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 AMEX 128573

Docket No. TV-FOR OFFICIAL USE ONLY Carrier ID# Safety Reception Number 558 **Employee** Insurance 00 111-0268-200-02 4 TYPE OF APPLICATION **Extension of Common Carrier Permit Authority New Common Carrier Permit Authority,** or Transfer of Existing Permit Number **GENERAL COMMODITIES, including** \$100 \$275 GENERAL COMMODITIES ONLY \mathbf{Z} ARMORED CAR SERVICE **GENERAL COMMODITIES, including** \$100 \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS ARMORED CAR SERVICE **GENERAL COMMODITIES, including** \$100 \$275 GENERAL COMMODITIES, including **HAZARDOUS MATERIALS and** HAZARDOUS MATERIALS 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 CARRIER IDENTIFICATION Unified Business Identifier Number (UBI): Common Carrier #: ____ USDOT: <u>614756</u> Petrota ATOSA Legal Name: Trade Name(s), dba(s), if any Trang Pontation UGA John cadar itusa o yahoo - can 971-221-6154 Fax Number: 1-971-888-4958 Business (Mailing) Address: 10425 GW WACKER RD, Beaverton C Phone Number: Physical Address (if different): ______ Gand

	TYPE OF BUSINESS	CTRUCTURE		
	LABE OF ROSINESS			
¶Individual □ Partnersh	nip 🗆 Corporation 🗖 I	Limited Liabili		State of Inc
NAME PETRUTA A CADA	TITLE (Dumer		Stock Distrib	oution or % of Shares
ERULA A LADI				
	*TRANSFER OF PE	RMIT NUMBE	R	List name of current
permit holder and permit nu	*TRANSFER OF PER f if you are transferring an ex imber to be transferred. The	isting permit current perm	to a new owne nit hold must si	gn below to authorize the
transfer of the permit numb	er.			t Number
NAME ON PERMIT				
	t- Jalon		Dat	e
Signature of current permit				
	INSURANCE REQUIREM	MENTS (must	check one)	
Å	permit will not be issued until a	Cceptable illsu	aul hazardous	
You will not haul	You will not haul hazardous materials in any	materials rec	quiring \$1	materials requiring \$5
hazardous materials in any	quantity. You will operate	million in Public Liability and million in Public Liability		
quantity. You will only	vehicles with a GVWR of	Property Da	mage Insurance.	and Property Damage Insurance. You must
operate vehicles with a	10,000 pounds or more. You		mplete Part C,	complete Part C, Sections
GVWR of less than 10,000	must obtain \$750,000 in	Sections 1 a	nd 2.	
pounds. You must obtain	Public Liability and Property	ľ		and 2.
\$300,000 in Public Liability	Damage Insurance. You must	: 1		
and Property Damage	complete Part B.			
Insurance. You do not need	Complete Part 5.			
to complete Part B.				
	MOTOR VEHICLE LIST (Attach	additional pa	ages if necessar	γ)
	License Number	State	4.6	VIN number
JIN "	118 591	UR	341 76	D6 x 17 0 17 0 17 0
110 941	111 776	OR	BAKY61	66197 79019
109 YA	111/27	on	TFUYEZ	B67CBM 8050
168 446	<u>U 166</u>	100	IVEED	49×3BJ291701
1071 476	PITE			
	SIGN	ATURE	t in itself const	itute authority to operate
Las applicant, understand	d that the filing of this applica	ation does no	In itsell collisi	on Thereby declare and
and that no operations m	d that the filing of this application to the conducted until a permon contained in this application.	nit is issued by on is true to t	he best of my k	nowledge and belief.
Poller	1 Cah		7-13-	-14
J. V.		<u> </u>	/ Date	
Signature		'		

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
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.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.

	Controlled Sub	stances and Alcohol T	esting
Name: John	CANAR	Position: _	manager
 have a valid CDL. The definition has a gross combined 	ed weight rating of 26,001	pounds that includes a	motor vehicle as described below must at: at towed unit with a gross vehicle weight
 has a gross vehicle is designed to trans is of any size and is hazardous materia 	weight rating of 26,001 possible to sport 16 or more passenge tused to transport hazard is regulations.	ous materials of an amo	
Any person who drives a coalcohol testing program as 010.	ommercial motor vehicle i required by FMCSA in 49	equiring a CDL must pa CFR Part 382 and 49 CF	rticipate in a controlled substance and R Part 40, and by the WSP in WAC 446-65-
	Commercial Driv	er's License (CDL) Rec	quirements
Name:	in Coda	Position:	m an age

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 Department of Licensing. 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.

	ALC: ALC: ALC: ALC: ALC: ALC: ALC: ALC:	Driver Qualific	ation Requirement	
	John	Codor_	Position:	monage
s required by	FMCSR Part 391	complete Driver Qualifica .51 and by the WSP in WA ashington have limited exe mplete file on themselves	tion File for each em C 446-65-010. Owner	ployee authorized to drive motor vehicles r/operators that work exclusively in perators that conduct any interstate
		Drivers I	lours of Service	
Name: —	John			monage
	y must maintain y the FMCSA in 4	true and accurate hours of 9 CFR, Part 395.1(e) and b	f service records for e y the WSP in WAC 44	each individual that drives a motor vehicle 16-65-010.
		Vehicle Inspection	, Repair, and Main	tenance
Name: —	John			monagla
Each compar the FMCSA is required reco WSP in WAC	ords for each veloads for each of i	6.11 and by the W3r in W3 nicle that includes the follo n of the vehicle. nd due date of various inspections, repairs and ma	wing, as required by pection and maintend intenance indicating	each vehicle used each day as required by dition, each company must maintain certain the FMCSA in 49 CFR, Part 396.3 and by the ance operations to be performed. Their date and nature.
All companion	es must conduct 5-010.	periodic inspections as rec	uired by the FMCSA	in 49 CFR, Part 396.17 and by the WSP in
			Signature	
My signatu	ure below certif requirements v	ies that I understand my which apply to my opera	responsibility as a tions.	motor carrier and I will comply with all
	Date de la la	- Coda		7-13-15
Signature	of applicant			Date

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/13/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME: WHA Processing Center	
Wilson-Heirgood Associate	es ·	PHONE (A/C, No, Ext): 800-852-6140 (A/C,	No): 541-342-3786
2930 Chad Drive PO Box 1421		E-MAIL ADDRESS: info@whainsurance.com	
Eugene OR 97440-1421	1	PRODUCER CUSTOMER ID #: 20560	
		INSURER(S) AFFORDING COVERAGE	NAIC#
INSURED		INSURER A: Great West Casualty Company	11371
Petruta A Tusa		INSURER B :	
DBA: Transportation USA 10425 SW Walker Road		INSURER C:	
Beaverton OR 97005		INSURER D:	
		INSURER E :	
		INSURER F:	
001/504050	OFFICIATE NUMBER: 100C44240F		

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED MAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) ADDLISUBR TYPE OF INSURANCE INSR WVD POLICY NUMBER GENERAL LIABILITY MCP17769A \$1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 COMMERCIAL GENERAL LIABILITY \$5,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$1,000,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE PRODUCTS - COMP/OP AGG \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY COMBINED SINGLE LIMIT 6/23/2015 6/23/2016 AUTOMOBILE LIABILITY MCP17769A \$1,000,000 (Ea accident) ANY AUTO BODILY INJURY (Per person) ALL OWNED AUTOS \$ BODILY INJURY (Per accident) SCHEDULED AUTOS PROPERTY DAMAGE х (Per accident) HIRED AUTOS \$ х NON-OWNED AUTOS ŝ UMBRELLA LIAB EACH OCCURRENCE \$ OCCUR EXCESS LIAB CLAIMS-MADE AGGREGATE \$ \$ DEDUCTIBLE RETENTION \$ WC STATU-TORY LIMITS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH)
If yes, describe under
DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 6/23/2016 \$200,000 MCP17769A Cargo Broad Form Deductible \$2,500 Included Reefer Breakdown

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Form E to follow. CC#616756.

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
WA Utilities & Transportation Commission	
PO Box 47250	
Olympia WA 98504	AUTHORIZED REPRESENTATIVE
	Catina Stanks

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This is to certify, that the

\$1,000,000 616756

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

Filed with WASHINGTON UTILITIES & TRANSPORTATION COMMISSION

(hereinafter called Commission)

GREAT WEST CASUALTY COMPANY P.O. BOX 277 SO SIOUX CITY NE 68776

(hereinafter called Company)

PETRUTA A TUSA DBA TRANSPORTATION USA 10425 SW WALKER RD BEAVERTON OREGON 970051904

issued to: has

a policy or policies of insurance effective from 6/23/15 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carine Bodily Injury and Property Damage Libbility transmos Endorsement, has or have been amended to provide automobile bodilyinpuy and property damage lability 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. 6/23/15

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 canceled without cancellation of the potoy 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 1100 W 29TH ST this 14 TH

SOUTH SIOUX CITY NE 6877 0277 2015 MCP17769A dayof JULY

(Poficy Number)

insurance Company File No.

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provisions of Section 202(b) (2) of the Interstate Commerce Act (49 U.S.C., sec. 302(b) (2)).