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 (350) 664-1222 - Fax (360) 586-1181 Intrastate Common Carrier Operating Authority

FOR OFFICIAL USE ONLY	<u> </u>			1405/			
Reception Number				Docket No. TV-			
111-0268-200-02 Insurance				Carrier ID# 16(95			
	TYPE OF A	DOI 1/	CATION	Employee M			
Trier Permit Authority			Extension of Common Carrier Permit Author				
or Transfer of Existing Pe			- Common Carrier Permit Authority				
GENERAL COMMO	\$275 GENERAL COMMODITIES ONLY		\$100	GENERAL COMMODITIES, Including			
\$275 GENERAL COMMODITIES, Including ARMORED CAR SERVICE			\$100	ARMORED CAR SERVICE GENERAL COMMODITIES, Including			
\$275 GENERAL COMMO				HAZARDOUS MATERIALS			
HAZARDOUS MATERIALS			\$100	GENERAL COMMODITIES, Including HAZARDOUS MATERIALS and ARMORED CAR SERVICE			
\$275 GENERAL COMMOD HAZARDOUS MATE ARMORED CAR SER	RIALS and VICE						
C S C Clo	MOTOR CARRIER			MIT - Must be filed within 10 months			
ommon Carrier #: 105 400	Unified Business Ide	ntifler	Number ((UBI): 602436674			
egal Name: Jose M Timenez USDOT:# 2542781							
rade Name(s), dba(s), if any JMJ. Trucking LLC 54							
mall address: MOVY 15 - 1002 @ NO+Mail-com							
one Number: (509) 831-851	3	Fax N	umber: (FO9) 488-2142			
siness (Malling) Address: P.O. 6	BOX 1774	ma	Hawa	WA 99349			
siness (Malling) Address: POE ysical Address (If different): 24	BOX 1774	ma	Hawa	LUA 99349			

			TYPE OF BUS	IMFSS STRUC	THE			
		****		HACOS SI NOC	IURE			
☐ Individual	☐ Partne	rship	☐ Corporation	☐ Limited	Liability Company	State of Inc.		
NAME TITLE				Stock Distribution or % of Shares				
·								
			*TRANSFER O	F PERMIT NU	MBER			
permit holder transfer of the			are transferring a	n ovietine		er. List name of current sign below to authorize the		
NAME ON PERMIT Permit Number								
Signature of a								
Signature of current permit holder Date								
10 10	A	ermit w	RANCE REQUIR	EMENTS (mu	est check one)			
hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage		Li You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. You must obtain \$750,000 in Public Liability and Property Damage Insurance. You must complete Part B.		Materials materials million in i Property E You must i Sections 1	I haul hazardous requiring \$1 Public Liability and Damage Insurance.	☐ You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.		
	MO	TOR VE	HICLE LIST (Attack	n lenoitibhs r	ages if accessors			
Unit # License Number		State	VIN number					
		WA		UYDCYB9KP352463				
			SIGN	ATURE				
I, as applicant, u and that no ope affirm that the li	inderstand this rations may be information co	at the file e condu entained	ing of this sonlies	tion does not	in itself constitut the Commission. e best of my know	e authority to operate I hereby declare and viedge and belief.		
Signature Signature					9 15 15			

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 JOSE M JIMENEZ, JMJ TRUCKING of PO BOX 1774, MATTAWA, WA 99349-0000 a policy or policies of insurance effective from 09/15/2015 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 15th day of September, 2015

Insurance Company File No. CA 03284819

(Policy Number)

MC1633a(08/99)

(Authorized Company Representative

IRB3539B