PART A

APPLICATION FOR PERMIT

(excluding Household Goods)

SECENER DIS SHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 & Evergreen Park Dr. SW, PO Box 47250, Olympia, WA 98504-7250

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

Pay ID: 303

FOR OFFICIAL USE ONLY 675 Docket No. TV- \ 57 96 **Reception Number** Safety N Carrier ID# \(\gamma\) Insurance 111-0268-200-02 Employee I TYPE OF APPLICATION **Extension of Common Carrier Permit Authority** New Common Carrier Permit Authority, or Transfer of Existing Permit Number X **GENERAL COMMODITIES, including** \$275 GENERAL COMMODITIES ONLY \$100 ARMORED CAR SERVICE **GENERAL COMMODITIES, including** \$100 \$275 GENERAL COMMODITIES, including **ARMORED CAR SERVICE HAZARDOUS MATERIALS** \$100 **GENERAL COMMODITIES, including** \$275 GENERAL COMMODITIES, including **HAZARDOUS MATERIALS 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 CARRIER IDENTIFICATION Common Carrier #: 603.47.5037
Unified Business Identifier Number (UBI): 603.47.5037 Legal Name: DELGADO FARM SERVICES LLC USDOT: 2584146 Trade Name(s), dba(s), if any____ Email address: eberlanga65@gmail.com Phone Number: 509.545.8174 Fax Number: 509.545.8174 Business (Mailing) Address: 7421 N RD 45 PASCO, WA 99301 Physical Address (if different):

		TYPE OF BUSINI	SS STRUCT	URE		
☐ Individual	☐ Partnership	☐ Corporation 【	🛭 Limited Li	ability Company	State of Inc. WA	
NAME TITLE NOEL DELGADO SOLE MEMBER		Stock Distribution or % of Shares 100				
permit holder a	-	_	xisting pern	nit to a new owne	er. List name of currentign below to authorize the	
NAME ON PERI				Permi	it Number	
Signature of current permit holder			Date			
	PASSE IN THE PROPERTY OF THE PASSES.	NSURANCE REQUIRES		GUNU 기업 경영 및 10 10 10 10 10 10 10 10 10 10 10 10 10		
You will not ha hazardous mater quantity. You will operate vehicles GVWR of less tha pounds. You mus \$300,000 in Publi and Property Dar Insurance. You do to complete Part	ials in any haza l only quar with a vehic n 10,000 10,00 t obtain must c Liability Publi nage Dam o not need com	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.		haul hazardous requiring \$1 Public Liability and ramage Insurance. complete Part C, and 2.	You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.	
	MOTOI	R VEHICLE LIST (Attach	additional p	ages if necessary		
Unit #	License 6 1 22 1	Number	State VIN number WA 1FUPCSEB4RP609925			
and that no ope	erations may be co	SIGNAte filing of this applicate onducted until a perminined in this application	ion does no	the Commission		
Signature	I Illu	Goslo		$\frac{9/27}{2}$	7/15	

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 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.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 Substances	and Alcoho	l Testing		,
Name:	NOEL DELGADO		Position:	DRIVER		
· varrie:						

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 License (CDL) Requirements	
Name:	NOEL DELGADO	Position:DRIVER	

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 Quali	fication Requireme	ents
Name: NOEL DELGADO	——— Position:	DRIVER
Each company must maintain a complete Driver Qualifi as required by FMCSR Part 391.51 and by the WSP in W intrastate commerce within Washington have limited e operations must maintain a complete file on themselve	/AC 446-65-010. Owr exemptions. Owners/	ner/operators that work exclusively in operators that conduct any interstate
Drivers	Hours of Service	
Name: NOEL DELGADO	Position:	DRIVER
Each company must maintain true and accurate hours of as required by the FMCSA in 49 CFR, Part 395.1(e) and l		
Vehicle Inspection	n, Repair, and Mair	ntenance
NOEL DELGADO Name:	—— Position:	
Each company must prepare a written "Driver Vehicle I the FMCSA in 49 CFR, Part 396.11 and by the WSP in W required records for each vehicle that includes the follow WSP in WAC 446-65-010: Identification of the vehicle. The nature and due date of various instance of the vehicle of the vehicle. A record of inspections, repairs and materials are serious instance.	AC 446-65-010. In acoming, as required by pection and mainten	ddition, each company must maintain certain the FMCSA in 49 CFR, Part 396.3 and by the ance operations to be performed.
All companies must conduct periodic inspections as rec WAC 446-65-010.	_	
	Signature	
My signature below certifies that I understand my the safety requirements which apply to my operat		motor carrier and I will comply with all
That Sulper		9/22/15
Cianatura of applicant		Date

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 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 DELGADO FARM SERVICES LLC of 7421 N RD 42, PASCO, WA 99301-0000 a policy or policies of insurance effective from 09/22/2015 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 22nd day of September, 2015

Insurance Company File No. CA 02683680

(Policy Number)

(Authorized Company Representative)

MC1633a(08/99)

IRB3539B