

**PART A**  
**APPLICATION FOR PERMIT**  
(excluding Household Goods)

*done*  
*12/7/15*

**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

<b>FOR OFFICIAL USE ONLY</b>		Docket No. TV- <i>152202</i>
Reception Number	Safety <i>MD</i>	Carrier ID# <i>17250</i>
111-0268-200-02	Insurance <i>OL</i>	Employee <i>MM</i>

**TYPE OF APPLICATION**

*011946*

<b>New Common Carrier Permit Authority, or Transfer of Existing Permit Number</b>		<b>Extension of Common Carrier Permit Authority</b>	
<input checked="" type="checkbox"/> \$275 GENERAL COMMODITIES ONLY	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE			
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS			
<input type="checkbox"/> \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE			
<input type="checkbox"/> \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation			

**MOTOR CARRIER IDENTIFICATION**

Common Carrier #: *66143* Unified Business Identifier Number (UBI): *602630714*

Legal Name: *Walla Walla Nursery Co. Inc.* USDOT: *1254207*

Trade Name(s), dba(s), if any: \_\_\_\_\_

Email address: *trucking@wvnc.net*

Phone Number: *509-522-9885* Fax Number: *509-522-3556*

Business (Mailing) Address: *4176 Stateline Road, Walla Walla, WA. 99362*

Physical Address (if different): \_\_\_\_\_

**TYPE OF BUSINESS STRUCTURE**

Individual     Partnership     Corporation     Limited Liability Company    State of Inc. WA

NAME Kenneth R. Martin    TITLE Transportation Manager    Stock Distribution or % of Shares 0%

Lorne D Blackman    Pres    50%

Auralea C Blackman    Sec    50% see email

**\*TRANSFER OF PERMIT NUMBER**

\*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 (must check one)**

A permit will not be issued until acceptable insurance is received

<input type="checkbox"/> You will not haul 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 Insurance. You do not need to complete Part B.	<input checked="" type="checkbox"/> 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.	<input type="checkbox"/> You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.	<input type="checkbox"/> You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.
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**MOTOR VEHICLE LIST (Attach additional pages if necessary)**

Unit #	License Number	State	VIN number
1	YAGZ 331	OR	1FUYNMEB9WP961744
2	YAGZ 332	OR	1FUYNMEB7XP961758
3	YAHV 320	OR	1FUJA6CK54LN07085

**SIGNATURE**

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 affirm that the information contained in this application is true to the best of my knowledge and belief.

Kenneth R. Martin  
Signature

11/30/2015  
Date

**Vehicle list continued**

<b>Unit #</b>	<b>License #</b>	<b>State</b>	<b>VIN #</b>
5	YAHV321	OR	1FUJA6CK26LV85892
6	YAGF822	OR	1FUYSSEB4XL970129
7	YAHV322	OR	1FUJA6CK85LN37179
8	YAHV323	OR	1FUJA6CG35PU32859
9	YAHT128	OR	1FUJA6CK45PU51103
10	YARM952	OR	1HTMMAAN07H409619
11	YAHF037	OR	1FUJGLBG7ELFJ5199

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

**Controlled Substances and Alcohol Testing**

Name: Kenneth R. Martin Position: Transportation Manager

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: Kenneth R. Martin Position: Transportation Manager

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.

**Driver Qualification Requirements**

Name: Kenneth R. Martin Position: Transportation Manager

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: Kenneth R. Martin Position: Transportation Manager

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**

Name: Kenneth R. Martin Position: Transportation Manager

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.

**Signature**

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.

Kenneth R. Martin

11/30/2015

Signature of applicant

Date

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

**Leipski, Tina (UTC)**

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**From:** Ken Martin <trucking@wwnc.net>  
**Sent:** Monday, December 07, 2015 2:52 PM  
**To:** UTC DL Transportation  
**Subject:** Application Info. TV-152294  
**Attachments:** FO614222\_Form\_E\_filing.pdf

Application TV-152294

Here is the information on our ownership;

Lorne D Blackman, President, 50%  
Auralea C Blackman, Secretary, 50%

I am attaching the Form E to this e-mail for our application for a CC #.

--

Thank you, Ken Martin  
Transportation Manager  
Walla Walla Nursery Co. Inc.  
Phone 541-861-3434  
Fax 541-861-3435  
Cell 509-540-8245

17350  
(P)

Form E  
**UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY  
DAMAGE LIABILITY CERTIFICATE OF INSURANCE**  
(Executed in Triplicate)

Filed with WASHINGTON UTILITIES & TRANSPORTATION COMMISSION  
(Name of Commission)

(hereinafter called Commission)

**RECEIVED**

This is to certify, that the UNIGARD INSURANCE COMPANY

(Name of Company)

DEC 07 2015

(hereinafter called Company) of 15800 NORTHUP WAY, BELLEVUE, WA 98008

(Home Office Address of Company)

WASH. UT. & TP. COMM

has issued to WALLA WALLA NURSERY COMPANY INC

(Name of Motor Carrier)

of 4176 STATELINE RD

(Address of Motor Carrier)

a policy or policies of insurance effective from 11/30/2015 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.

\*NEW FILING\*

Countersigned at

15800 NORTHUP WAY

BELLEVUE

WA

98008

(Street Address)

(City)

(State)

(Zip Code)

this 1ST

day of DECEMBER 20 15

Insurance Company File No.

FO614222

(Policy Number)

**Tony Bury**

(Authorized company Representative)