

**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-152282
Reception Number	Safety MD	Carrier ID# 17370
111-0268-200-02	Insurance	Employee MD

**TYPE OF APPLICATION**

New Common Carrier Permit Authority, or Transfer of Existing Permit Number		Extension of Common Carrier Permit Authority	
<input checked="" type="checkbox"/> \$275 GENERAL COMMODITIES ONLY		<input type="checkbox"/> \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE	
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE		<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	
<input type="checkbox"/> \$275 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 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 #: 66287 Unified Business Identifier Number (UBI): 603-021-634  
Legal Name: American Strategic Group LLC USDOT: 2579570  
Trade Name(s), dba(s), if any: Vista Clean Air Transport  
Email address: peter@americanstrategicgroup.com  
Phone Number: 503-236-8776 Fax Number: \_\_\_\_\_  
Business (Mailing) Address: 14205 SE 36<sup>th</sup> Street, Suite 100, Bellevue, WA 98006  
Physical Address (if different): Same

**TYPE OF BUSINESS STRUCTURE**

Individual     Partnership     Corporation     Limited Liability Company    State of Inc. \_\_\_\_\_

<u>NAME</u>	<u>TITLE</u>	<u>Stock Distribution or % of Shares</u>
D. Scott Peterson	CEO	51%
Stephen Lumbo	President	49%

**\*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
1501	L55296C	WA	1FUNA6CG63PK44805
1502	L55297C	WA	1FUNA6CG83PK44806
1503		WA	1XKTD39X21J8599376
1504		WA	1XKTD39X81J859365

**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.

 \_\_\_\_\_  
 Signature CEO

\_\_\_\_\_ 12-18-2015  
 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 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.ijkeller.com](http://www.ijkeller.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: D. Scott Peterson Position: CEO

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: D. Scott Peterson Position: CEO

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: D. Scott Peterson Position: CEO

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: D. Scott Peterson Position: CEO

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: D. Scott Peterson Position: CEO

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.



Signature of applicant

12-18-2015

Date

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

**PART C – SECTION 1  
SAFETY FITNESS SURVEY  
FOR HAZARDOUS MATERIALS APPLICANTS**

**Companies applying to transport hazardous materials must complete this survey.**

1. Name the person or position responsible for maintaining and understanding current hazardous material regulations. \_\_\_\_\_
2. Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600?  Yes  No
3. Are drivers trained in the use of Emergency Response Information?  Yes  No
4. Is the Emergency Response Information carried in the vehicle?  Yes  No
5. Name the person or position responsible for providing training to all employees handling hazardous materials as required by Title 49 CFR, Part 177.800 and 177.816.  
\_\_\_\_\_
6. Are you familiar with accident reporting requirements in Title 49 CFR, Part 177, Subpart D?  Yes  No
7. Who is responsible for completing hazardous materials shipping papers?  
\_\_\_\_\_
8. Where are hazardous material shipping papers located during transportation?  
\_\_\_\_\_
9. If you transport Radioactive Materials, name person or position that will be familiar with and provide training to employees for all transportation under CFR, Part 173, Subpart I - Radioactive Materials.  
\_\_\_\_\_
10. Please attach a copy of your US Pipeline and Hazardous Materials Safety Administration (PHMSA) permit.

**Signature**

My signature below certifies that I understand my responsibility as a transporter of hazardous materials and I will comply with all the safety requirements which apply to my operations.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

# PART C – SECTION 2

## HAZARDOUS MATERIALS QUESTIONNAIRE

**Companies applying to transport hazardous materials must complete the following questions.**

1. Please indicate if you plan to transport:

- Petroleum or petroleum products in bulk in tank-type vehicles  Yes  No
- Radioactive substances  Yes  No
- Explosives  Yes  No
- Corrosives  Yes  No

2. As part of transporting any of these four materials, do you or your company intend to build, or have someone else build, install or otherwise create a new structure, or a new addition to an existing structure?  Yes  No

- If yes, does the proposed construction require a building permit by a city, county or other governmental agency?  Yes  No
- If yes, which governmental agency will issue the permit? \_\_\_\_\_
- If yes, please explain what you intend to build: \_\_\_\_\_

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3. In granting an application for hazardous materials transportation, the commission is required to consider possible impacts such transportation may have on the environment. Please answer the following questions related to possible environmental impacts:

- a. Do you understand you are required to comply with Washington State Patrol safety standards for hazardous materials transportation, as defined in WAC 446-65-010?  
 Yes  No
- b. Do you understand that you are required to comply with Washington State Patrol noise emission standards for commercial motor vehicles, as defined in WAC 446-65-010?  
 Yes  No
- c. Do you understand that in the case of a hazardous materials spill, you must immediately contact the local emergency services agency, such as the 911 operator?  
 Yes  No

- If your answer to a, b, or c is no, please explain: \_\_\_\_\_

