

PO Box 47250 Olympia, WA 98504-7250 Phone 350-664-1222

Fax 360-586-1181 Web Site: www.utc.wa.gov transportation@utc.wa.gov

## **COMMON CARRIER OF PROPERTY**

(Excluding Household Goods Carriers and Brokers)

## **APPLICATION FOR REINSTATEMENT - FEE \$100.00**

(Per WAC 480-14-220)

Applications for Reinstatement of a Cancelled Common Carrier permit must be within 10 months of the cancellation date of the permit. If over 10 months, you must submit a new application form.

Common	Carrier # 0005	505	_ to be reinstated.
Legal Name:	Transport	LLC	
Trade Name(s), dba(s), if any	•		
Business (Mailing) Address:_	4104 M-10	dy ian	Pasco WA 94301
Physical Address (if different	):		<u> </u>
Phone number: (Soa) 8	51-7200	Fax Number	(809) 380-0477
Email address: Jesus Pol	ng vez 1297064	<u>سا</u> : #ا	2522946
Unified Business Identifier N	umber (UBI): <u> </u>	3-418-0	13
•	Type of Bu	siness Struct	ture:
☐ Individual ☐ Partnershi			Corporation State of Inc.
NAME	TITLE	ADDRESS	PERCENTAGE OF SHARES
tesus Podriquez	nuner	4104 Welledy	lane pase war 9430]
	-,	<del></del>	
For Official Use Only	Received Dat	te:	ID:
111-0268-200-02	Insurance:		Docket TV- S>476
Receipt ID:	Payment ID:	D 11(2)	(3 - 1 - 0

## 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 Finandal Casualty Company (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to JR TRANSPORT LLC of 4104 MELODY LN, PASCO, WA 99301-0000 a policy or policies of insurance effective from 07/29/2015 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 4th day of August, 2015

Insurance Company File No. CA 02595134

(Policy Number)

MC1633a(08/99)

(Authorized Company Representative)

IRB3539B