P.1/2 TO: 13605861181 26-2016 FROM: DNA SERVICES 15094882084 12:41 No. 1676. Jan. 26. Ρ, Services MAME Mindividual | Partnership | Limited Hability Company | Corporation State of Inc. a new application form. Unified Business Identifier Number (UBI):\_ Business (Malling) Address: Trade Name(s), dba(s), if enyc 10 months of the cancellation date of the permit. If over 10 months, you must submit Email address: Physical Address (If different) 24 KISI SA Legal Name Applications for Reinstatement of a Cancelled Common Carrier permit must be within HACE DE ID. 111-0258-200-02 For Official Use Only APPLICATION FOR REINSTATEMENT - FEE \$100.00 Common Carrier 🗗 COMMON CARRIER OF PROPERTY (Baileding Household Goods Carriers and Sinkers) Ŧ 180-1884 - Non-405 201-488- 5084 Payment ID: Type of Business Structure: Received Date: insurance 180X (Per WAC 480-14-220) ECM) 601 USDOT #: ADDRESS NO SA X P -2037 to be reinstated Darchet 14-16013 S ななら PERCENTAGE OF SHARES 1370 Stuck Everyrese Auth Other Stel 1002 17 WH 8535 1 WA 99357

## 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 HECTOR LEDEZMA, HECTOR LEDEZMA TRUCKING of PO BOX 293, ROYAL CITY, WA 99357 a policy or policies of insurance effective from 01/29/2016 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 29th day of January, 2016

Insurance Company File No. CA 02854399

(Policy Number)

(Authorized Company Representative

MC1633a(08/99)

IRB3539B