### **APPLICATION FOR PERMIT**

## Intrastate Common Carrier Operating Authority

(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

K0150

FOR OFFICIAL USE ONLY Employee			CC	× () (4	
Reception Number Insurance		Carrier ID# h941		0000	
111-(	111-0268-200-02				
		TYPE OF A	PLIC	ATION	
		Defined in <u>W</u>	AC 480	14-040	(14203
New Common Carrier Permit Authority, or Transfer of Existing Permit Number		Extension of Common Carrier Permit Authority			
Į.	\$275 GENERAL COM	MODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE		
	\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE			<ul> <li>\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS (Complete Supplementary Hazardous Materials Safety Survey)</li> </ul>	
	<ul> <li>\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS (Complete Supplementary Hazardous Materials Safety Survey)</li> </ul>			HA	NERAL COMMODITIES, including ZARDOUS MATERIALS and MORED CAR SERVICE upplementary Hazardous Materials y)
	HAZARDOUS M ARMORED CAR	SERVICE			
	(Complete Supplementary Hazardous Materials Safety Survey)				

MOTOR CARRIER IDENTIFICATION
Legal Name (see definitions pg. 1): 574500 Steward
Trade Name(s), dba(s), if any: JAsen Steward Twickney
Trade Name(s), dba(s), if any: JAsan Steward Tuckney Email address: jason. Staward 11@yahad, Gon (Plave Envir Copy)
Phone Number: Fax Number:
Business (Mailing) Address: 1159 Kgetzel way Emmet Id 83617
Physical Address (if different):
Unified Business Identifier Number (UBI): 603580021
USDOT: 2109266 OR Check Grunder 16,001 GVW
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IN: A permit v	INSURANCE REQUIREMENTS (must check one) A permit will not be issued until acceptable insurance is received			
<ul> <li>GVWR of Less than 10,000</li> <li>pounds:</li> <li>You will not haul hazardous materials in any quantity.</li> </ul>	To prevent delay, please attach a <i>temporary</i> Certificate of Liability from your insurance company. Your insurance company must provide a Form E within 60 days.			
<ul> <li>You must obtain \$300,000 in Public Liability and Property Damage Insurance.</li> <li>GVWR of more than 10,000</li> </ul>	Applicants must have their insurance company file proof of liability and property damage insurance covering each vehicle used under the permit.			
pounds:				
<ul> <li>You will not haul hazardous materials in any quantity.</li> </ul>	The name on the insurance must match your company's legal name <u>exactly</u> .			
<ul> <li>You must obtain \$750,000 in Public Liability and Property Damage Insurance.</li> </ul>	Proof of insurance must be on either a uniform motor carrier bodily injugation of the second seco			
Hazardous Materials (\$1,000,000)	bodily injury property damage liability certificate of insurance (FORM E) or a Certificate of Liability.			
<ul> <li>You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance.</li> </ul>	The Certificate of Liability must show the Washington Utilities & Transportation Commission as the Certificate Holder.			
• You must complete Part B, Sections 1 and 2.	A Certificate of Liability is effective for 60 days. Your insurance company must file the required FORM E within 60 days			
Hazardous Materials	otherwise your permit will be cancelled.			
(\$5,000,000)	otherwise your permit will be cancelled.			
<ul> <li>You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance.</li> </ul>				
• You must complete Part B, Sections 1 and 2.				

### TYPE OF BUSINESS

Check the type of business. If other than INDIVIDUAL, list the names of all shareholders, partners, or members and their percentage of interest in the company.

Individual	Partnership	Corporation	Limited Liability Company
State of Incorpo	pration:	<u>&gt;</u>	
NAME	TITLE		Stock Distribution or % of Owned Shares
	<u></u>		
		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 holder must sign below to authorize the transfer of the permit number.

NAME ON PERMIT:	Permit Number:	
Signature of current permit holder	Date	

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.

mon U Stein

-29-16 Date

Signature

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

### 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</u> <u>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 (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, <u>www.wtatrucking.com</u>, (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, <u>www.wtbtraffic.com</u>, 800-727-7293.
- US Government Printing Office, 732 N. Capitol Street, NW, Washington, DC 20401, www.gpo.gov, 866 512-1800.

1	Controlled Substances and Alcohol Testing
Name: 6 con them	Position: Ower

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** 1 con W Name: Position: Oure

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 Qualification Requirements	
Name:	Spon	Stand	Position: Ouver	 

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.

Driver	s Hours of Service
Name: JAzon Steward	Position: _

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, Re	pair, and Maintenance	
Name: JAzan Steward	Position: Our	·····

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: (app. Ullum

Date /-29-16

#### 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 JASON STEWARD of 1159 KAETZEL WAY, EMMETT, ID 83617 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 07781879

MC1633a(08/99)

(Policy Number)

(Authorized Company Representative)

IRB3539B