

Completed Activity Report Motor Carrier Safety

Upload? Yes X No	
1. Investigator(s):TOM MCVAUGH	2. Assignment No.: 109116
3. Current Date:6-16-09	4. Date of Activity: 6-11-09
5. Carrier Name: 5 STAR MOVERS AND DI	ELIVERY LLC
6. Permit: <u>THG-62885</u>	7. Industry Code: 207
8. MOTCAR No. 1 2 5213	
9. DOT No.:	10. MC No.:
	· .
Describe any special emphasis placed on the	enger # of 16+ passenger Level 2 Level 5 Level 5 destination check and the results:
Unannounced terminal visit	

13. New Entrant - Charter, Auto Transportation
■ Is this carrier referred by FMCSA, operating intra and interstate:
■ Is this carrier based in another state, requesting intrastate authority: ☐ Yes ☐ No
■ Is this carrier based in Washington, requesting intrastate authority: ☐ Yes ☐ No
• Did staff complete the following:
♦ Inspect all vehicles between three and nine months?
Number of vehicle inspections: Level 1 Level 2 Level 5
♦ Conduct a CR/SA between three and nine months?
14. X New Entrant- HHG
■ Is this carrier referred by FMCSA, operating intra and interstate: Yes X No
■ Is this carrier based in another state, requesting intrastate authority: ☐ Yes X No
■ Is this carrier based in Washington, requesting intrastate authority: X Yes No
Did staff complete the following:
♦ Inspect all vehicles between three and eighteen months?
Number of vehicle inspections: Level 1 Level 2 Level 5 _ 2
♦ Conduct a CR/SA between three and eighteen months? X Yes ☐ No X CR ☐ SA
♦ Conduct technical assistance within three months? X Yes \ \ \ No
15. X Individual Safety Plan Only: Attach a copy of the Individual Carrier Safety Plan. What activity did staff complete for this safety complaint: X Compliance review X Technical assistance Number of vehicle inspections: Level 1 Level 2 Level 5 _2 Unannounced terminal visit Other (please explain):
16 V.Compliano Deview Detect
16. X Compliance Review Data: Safety Rating: X Satisfactory Unsatisfactory Conditional Number of vehicles operated: 4 Number of drivers operated: 3 Total miles for prior year: 60,000 Recordable accidents for prior year: 1 Accident Ratio:

Revised 10-06-08

17. X Part B Violations:

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	,
390		391	6	392	
395	1	396	2	397	

Y	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Inspections	<u> </u>		1		<u> </u>					ļ	<u> </u>
Defective Vehicles									1		
OOS Vehicles									0		
Location									TER		
Level									5		

	МС	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	ТТ	TRA
Brakes					,						
Steering											
Lights									1		
Tires, wheels, rims											
Horn											
Windshield and Wipers										_	
Mirrors											
Emergency Equip, Exits											
Coupling Devices											
Frame										ļ	
Suspension											
Exhaust											
Other											

20. Driver Inspection Violations:							
Medical Card	Medical Waiver	Hours of Service	Drivers License				

ARATE CFR VIOLATIONS WERENOTED DURING COMPLIANCE REVIEW. N	
No further action. Notify the company in writing of the findings by providing a copy of the CR, vehicle ins report, safety audit or other similar document. Require the company to submit a compliance plan in response to the 15-day letter requirent Recheck – Compliance review (Date:) Revisit to recheck a specific issue (Date:)	
Send the company a compliance letter. Require a response: Yes No Issue administrative penalties in the amount of \$ Issue a complaint.	
carrier considered a high risk carrier as a result of this activity? NO Carrier accident ratio is higher than aggregate ratio. Carrier had an out-of-service ratio 25% or higher at the last vehicle inspection. Carrier had a defect ratio 75% or higher at the last vehicle inspection. Carrier received more than one conditional or unsatisfactory compliance review rating an one of the last four compliance reviews (or less than four if four are not completed).	in more
EPA THE	ecommended Action: No further action. Notify the company in writing of the findings by providing a copy of the CR, vehicle ins report, safety audit or other similar document. X Require the company to submit a compliance plan in response to the 15-day letter requirer Recheck — Compliance review (Date:

Revised 10-06-08 4

Investigator's signature: 16-16-09
Investigator's signature: Compared to the content of the conten
Reviewer's recommendation: Hopee with recommendations.
consider for permantherity. 9. Hr (recently response. I'
consider for permantherity.
Final review by: Date:
Reviewer's recommendation:
Date closed: Lon Mc Varigh By: CAC
Company name Star Mours and Delivery 10 Assignment # 109116
Staff Assigned John Mc Vaugh/_
3/29/2010 - Smortor McVaugu approved 15-day letter. Recommend carrier for permanent authority. Kthurter

"ILITIES & TRANSPORTATION COMM!" - ON

Legal: 5 STAR MOVERS AND DELIVERY LLC US DOT#

Operating (DBA):

State #: THG62885

Federal Tax ID: 20-8106355 (EIN)

Review Type: Compliance Review (CR)

Scope:

Location of Review/Audit: Company facility in the U.S.

Territory:

Operation Types Interstate Intrastate

Principal Office

N/A

N/A Carrier:

Shipper:

Non-HM

N/A

N/A

Business: Corporation

Gross Revenue: \$465,157.00

for year ending: 6/11/2009

Company Physical Address:

3410 - 160TH AVENUE EAST

SUMNER. WA 98391

Cargo Tank:

Contact Name:

Phone numbers: (1) 253-255-1216

(2)

Fax

E-Mail Address:

Company Mailing Address:

PO BOX 1033

SUMNER, WA 98390

Carrier Classification

Other: TEMP HHG

Cargo Classification

Household Goods

Does carrier transport placardable quantities of HM?

Is an HM Permit required?

No N/A

Driver Information

Inter Intra Average trip leased drivers/month: 0

< 100 Miles:

>= 100 Miles:

Total Drivers: 3

CDL Drivers: 0

Equipment

Truck

Owned Term Leased Trip Leased

3

Owned Term Leased Trip Leased

Power units used in the U.S.: 4

Percentage of time used in the U.S.: 100



5 STAR MOVERS AND DL. /ERY LLC

U.S. DOT #:

State #: THG62885

Review Date: 06/11/2009

Part A

QUESTIONS regarding this report or the Federal Motor Carrier Safety or Hazardous Materials rules may be addressed to the WUTC at:

WUTC ATTN: TOM McVAUGH 360-664-1237 PO BOX 47250 OLYMPIA, WA 98504-7250

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: JANEA DELUZ

Title: MANAGER

Title:

Name:

5 STAR MOVERS AND DE LERY LLC

U.S. DOT #:

State #: THG62885

Review Date: 06/11/2009

Part B Violations

1 STATE	Primary: 391.11(b)(6) Secondary: 391.11(a) CFR Equivalent: 391.11(b)(6)	 Discovered 2	Checked 3	Drivers/V In Violation 2	ehicles Checked 3
Description		40			

Failing to require driver to furnish list of motor vehicle traffic violations each 12 months.

Example

RANDY MUNSON, TRIP DATE: 6-8-09.

2	Primary: 391.11(b)(8)		[Drivers/V	ehicles
STATE	Secondary: 391.11(a)	Discovered	Checked	In Violation	Checked
	CFR Equivalent: 391.11(b)(8)	3	3	3	3

Description

Using a driver who has not taken a road test or who has not been issued a certificate of driver's road test or presented an operators license, or certificate of road test which the motor carrier accepted as equivalent.

Example

JERAMI JONES, TRIP DATE: 6-11-09.

3	Primary: 391.21(a)			Drivers/Vehicles	
STATE	(4,7)	Discovered	Checked	In Violation	Checked
	CFR Equivalent: 391.21(a)	3	3	3	3

Description

Using a driver who has not completed and furnished an employment application.

BRUCE ELLIS, TRIP DATE: 6-11-09

į	4	Primary: 391.23(a)			Drivers/V	ehicles
	STATE	, , , , , , , , , , , , , , , , , , , ,	Discovered	Checked	In Violation	Checked
		CFR Equivalent: 391.23(a)	3	3	3	3

Description

Failing to investigate driver's background.

Example

RANDY MUNSON, TRIP DATE: 6-8-09. HIRE DATE: 4-25-08.

Ì	5	Primary: 391.25(a)			Drivers/Vehicles	
	STATE		Discovered	Checked	In Violation	Checked
		CFR Equivalent: 391.25(a)	2	3	2	3

Description

Failing to make an inquiry into the driving record of each driver to the appropriate State agencies in which the driver held a commercial motor vehicle operator's license at least once every 12 months.

Example

BRUCE ELLIS, TRIP DATE: 6-11-09.

6	Primary: 391.25(b)	Discourage	Ohaalaad	Drivers/V In Violation	ehicles Checked
STATE	CFR Equivalent: 391.25(b)	Discovered 2	Checked 3	2	3

Description

Failing to review the driving record of each driver to determine whether that driver meets minimum requirements for safe driving or is disqualified to drive.

Example

BRUCE ELLIS, TRIP DATE: 6-11-09.

5 STAR MOVERS AND DE. RRY LLC

U.S. DOT #:

State #: THG62885

Review Date: 06/11/2009

Part B Violations

7 STATE	Primary: 395.8(a)		Discovered	Checked	Drivers/V In Violation		
SIAIL	CFR Equivalent: 395.8(a)		11	90	1	3	
Description Failing to requ	uire driver to make a record of duty status.				•		
Example	ON, TRIP DATE: 2-19-09. DRIVER WAS ON-L DIUS EXEMPTION AND FAILED TO COMPLE	OUTY FOR T	13.5 HOURS W BOOK FOR TH	/HILE WORKI IS DAY.	NG WITHIN T	HE 100	
8 STATE	Primary: 396.3(a)(1)			Checked	Drivers/\ In Violation	Checked	
017112	CFR Equivalent: 396.3(a)(1)		11	2	1 1	. 2	
Example REFER TO U	pect and maintain vehicle to ensure safe and pr UNIFORM DRIVER/VEHICLE INSPECTION RE UNIT #2, WA LICENSE #808395E.			DEFECTIVE	AND COMPLI	ANCE	
9 STATE	Primary: 396.17(c)		Discovered 4	Checked	Drivers/\ In Violation 4		
Example	CFR Equivalent: 396.17(c) mercial motor vehicle not periodically inspected	in accordar	nce with minimu	ım standards.			
UNIT #2. WA LICENSE #B08395E Safety Fitness Rating Information: Total Miles Operated 60,000 Recordable Accidents 0 Recordable Accidents/Million Miles 0.00			OOS Vehicle (CR): 0 Number of Vehicle Inspected (CR): 2 OOS Vehicle (MCMIS): 0 Number of Vehicles Inspected (MCMIS): 0				
Your proposed safety rating is : SATISFACTORY			Factors		Acute Critica		
			tor 1:	S S	0 0	•	
			tor 2: tor 3:	S	0 0		
			tor 3. tor 4:	S	0 0		
		'	tor 5:	N	0 0)	
			tor 6:	S			

Null Null

5 STAR MOVERS AND DŁ ZERY LLC

U.S. DOT #:

State #: THG62885

Review Date: 06/11/2009

Part B Requirements and/or Recommendations

- THIS COMPLIANCE REVIEW WILL RESULT IN AN INTRASTATE SAFETY RATING. TO OBTAIN A COPY OF THIS RATING, CONTACT CAROLYN CARUSO AT 360-664-1244.
- 2. OBTAIN A DRIVING RECORD FROM THE ISSUING STATE EACH YEAR FOR EVERY DRIVER EMPLOYED BY THE COMPANY. MAINTAIN A COPY OF THIS ANNUAL DRIVING RECORD IN THE DRIVER'S QUALIFICATION FILE.
- 3. If you want some drivers to use the 100 air-mile radius exemption, make sure that the drivers meet all terms of the exemption, including being released from duty no more than 12 hours from when they report for duty. Maintain complete start, stop and total on-duty times on these records. Logs must be prepared if a driver does not meet the 12 hour requirement.
- 4. Ensure that all drivers are fully and properly qualified before operating in interstate/intrastate commerce. Maintain a complete file as required for each driver, documenting the qualification process.
- 5. ENSURE THAT YOUR PERMIT NAME & NUMBER ARE PAINTED ON BOTH SIDES OF VEHICLE. IF YOU HAVE INTERSTATE AUTHORITY, INCLUDE YOUR PERMIT NAME AND DOT # ON BOTH SIDES OF VEHICLE.
- 6. Within 15 days, send a letter to the WUTC describing what actions you have taken in response to this review to ensure that you are complying with the Federal Motor Carrier Safety Regulations.

ADDRESS THE LETTER TO:

WUTC C/O TOM MCVAUGH PO BOX 47250 OLYMPIA, WA 98504-7250

- 7. ENSURE THAT DRIVERS DO NOT VIOLATE THEIR HOURS OF SERVICE LIMITS, INCLUDING THE 11-HOUR DRIVING RULE, 14-HOUR ON-DUTY RULE AND THE 60/70 HOUR RULE. THE DRIVERS MUST COMPLETE RECORDS OF DUTY STATUS FOR EACH DAY THEY OPERATE BEYOND THE 100 AIR-MILE RADIUS FROM THEIR NORMAL WORK REPORTING LOCATION.
- 8. ENSURE THAT AT LEAST ONCE A YEAR, A DRIVING RECORD CHECK (DMV CHECK) IS CONDUCTED ON DRIVERS OPERATING A COMMERCIAL MOTOR VEHICLE WITH A GVWR OF 10,001 POUNDS OR GREATER.
- 9. ENSURE THAT EVERY NON-CDL DRIVER IS ROAD TESTED AND A PROPER ROAD TEST CERTIFICATE IS ISSUED. MAINTAIN A COPY OF THE ROAD TEST AND ROAD TEST CERTIFICATE IN THE DRIVER'S QUALIFICATION FILE.
- 10. MAINTAIN AN ACCIDENT REGISTER THAT REFLECTS ONLY THOSE ACCIDENTS WHICH OCCURRED WHILE OPERATING UNDER YOUR COMPANY'S AUTHORITY.
- 11. ENSURE THAT EACH COMMERCIAL MOTOR VEHICLE IS PERIODICALLY INSPECTED ANNUALY AND A RECORD OF THE INSPECTION IN MAINTAINED ON THE VEHICLE AND IN THE CARRIER'S RECORDS. RETAIN THE PERIODIC INSPECTION REPORT FOR A PERIOD OF 14 MONTHS.





5 STAR MOVERS AND D VERY LLC

U.S. DOT #:

State #: THG62885

Review Date: 06/11/2009

Part C

Reason for Review: Other

PROVISIONAL HHG

Planned Action:

Compliance Monitoring

Safestat Category:

Parts Reviewed Certification:

180 382 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 325 383

✓

Prior Reviews

Prior Prosecutions

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Not Applicable

Corporate Contact: JANEA DELUZ

Special Study Information:

Corporate Contact Title: MANAGER

Remarks:

On June 11, 2008, I contacted Ms. Janea Deluz, Manager for 5 Star Movers and Delivery LLC (5 Star), at the carrier's main office and terminal located Sumner, WA. The purpose of my contact was to conduct a safety compliance review on this provisional household goods carrier. 5 Star was issued provisional authority on March 3, 2009 and attended the provisional household goods training class in November, 2008.

The carrier currently owns and operates four (4) straight trucks and employs three (3) full-time non-CDL drivers. The vehicles are grossed at 26,000 GVWR and are insured in the combined single limit of \$750,000 by the United Financial Casualty Company. I inspected two of the vehicles and issued valid CVSA decals. One of the vehicles displayed a valid CVSA decal issued by the WSP and the other vehicle was not available for inspection due to a prior hauling committment.

The carrier operates primarily within the 100 air-mile radius of Sumner and does not currently possess interstate authority. I advised Ms. Deluz of the requirement for obtaining and displaying an intrastate DOT number. Currently, 5 Star operates on a limited basis as an agent for National Van Lines, Inc. For this reason, this compliance review will not be uploaded to MCMIS.

This compliance review covered the previous twelve month period. This included the period when the carrier initially operated as Allstar Movers. On September 30, 2008, Allstar Movers was required to change their name to 5 Star as ordered by the commission in TV-071039.

The following safety violations were noted:

CFR PART 391 - DRIVER QUALIFICATIONS:

I reviewed the driver files for all three drivers and found the following items missing: no annual list of motor traffic violations, no record of road tests or road test certifications, no employment applications, no investigation into driver's employment background at time of hire, no inquiries into the driving record of the drivers each twelve months, and no annual review of the drivers each twelve month period. I explained these requirements to Ms. Deluz and the need for updated driver files. She stated that she would complete the files as soon as possible.

CFR PART 395 - HOURS OF SERVICE:

I noted that one driver, while operating within the 100 air-mile radius exemption, failed to complete a record of duty status



5 STAR MOVERS AND DL VERY LLC

U.S. DOT #:

State #: THG62885

Review Date 06/11/2009

Part C

(log book), after being on-duty in excess of twelve consecutive hours. I explained the exemption to Ms. Deluz and the procedures for completing log books when required.

CFR PART 393 - PARTS AND ACCESSORIES:

Unit #2 was inspected and found defective with an inoperative left headlamp. The defect was corrected on site and I issued a valid CVSA decal. Refer to the Driver/Vehicle Examination Report #WAU004000005, attached.

CFR PART 396 - INSPECTION, REPAIR & MAINTENANCE REQUIREMENTS:

I reviewed the maintenance records for all four vehicles and discovered that the carrier did not conduct the periodic inspections as required by CFR Part 396.17. All major maintenance is contracted out to private vendors. Ms. Deluz stated that she would ensure the required inspections were conducted in the future.

CONCLUSION:

5 Star received a Satisfactory safety rating upon completion of the compliance review. I am requiring the carrier to complete and submit a 15-day compliance letter to the commission, outlining their efforts to correct the aforementioned violations. Although none of these violations were critical or acute in nature, this company is in provisional status and needs to display a more positive posture towards safety compliance.

Upon receipt of this 15-day compliance letter, I recommend permanent household goods authority be issued.

This assignment is submitted for closing.

Upload Authorized:		Yes		No
Authorized by:				Date:
Uploaded:	Yes	· , I	No	Failure Code:
Verified by:				Date:

TILITIES & TRANSPORTATION COMM! W/ US DOT# Legal: 5 STAR MOVERS AND DELIVERY LLC Operating (DBA): Federal Tax ID: 20-8106355 (EIN) State #: THG62885 Review Type: Compliance Review (CR) - Receipt **Territory:** Location of Review/Audit: Company facility in the U.S. Scope: **Principal Office** Interstate Intrastate Operation Types Non-HM Business: Corporation N/A Carrier: for year ending: 6/11/2009 Gross Revenue: \$465.157.00 N/A N/A Shipper: Cargo Tank: N/A **Company Physical Address:** 3410 - 160TH AVENUE EAST **SUMNER, WA 98391 Contact Name:** Phone numbers: (1) 253-255-1216 Fax (2) E-Mail Address: Company Mailing Address: PO BOX 1033 **SUMNER, WA 98390 Report Summary** Report # of Pages 2 Part A - General 2 Part B - Violations Part B - Recommendations 1 Review/Audit Receipt Page 6 **Total Pages** Disclaimer: By signing below, I acknowledge that I have received a copy of this review/audit and agree with the total number of pages indicated (above) for each document. My signature does not imply agreement with the findings of the review/audit, however they have been discussed in detail with me. QUESTIONS regarding this report or the Federal Motor Carrier Safety or Hazardous Materials rules may be addressed to the WUTC at: ATTN: TOM McVAUGH 360-664-1237 PO BOX 47250 OLYMPIA, WA 98504-7250 This report will be used to assess your safety compliance. Person(s) Interviewed

Name: JANEA DELUZ

Title: MANAGER

Name: Reported By: Title:

Title: TVans

Code: WA0531 Date: 6/11/2009

Received By:

Title:



ORT

Report Number: WAU004000005 Inspection Date: 06/11/2009

Start Time: 08:55 AM End Time: 09:10 AM

Inspection Level: V - Terminal HM Inspection Type: None

5 STAR MOVERS & DELIVERY LLC

3410 - 160TH AVENUE EAST

Location: SUMNER TERMINAL

SUMNER, WA 98390

USDOT#:

Highway:

Phone#: (253)255-2116

MC/MX#:

State#: THG62885

County: PIERCE, WA

Fax#:

MilePost:

Origin:

Destination:

Driver:

License#:

Date of Birth:

CoDriver: License#:

Date of Birth:

Shipper:

Bill of Lading:

Cargo: EMPTY

VEHICLE IDENTIFICATION

Unit Type Make Year State

TR INTL 2004 WA

Plate # B08395E Company #

2

VIN

GVWR

CVSA # CVSA Issued # OOS Sticker

State:

State:

10538894 26,000

BRAKE ADJUSTMENTS

Axle #

1 2 N/A N/A

Right Left

N/A

N/A

HYDR HYDR Chamber

VIOLATIONS

Violations Discovered Section Code Type Unit OOS Citation # Verify Crash

Inoperable required lamp (LEFT HEADLAMP) 393.9(a)

HazMat: No HM Transported.

Placard: No

Cargo Tank:

Special Checks: No Data for Special Checks.

Report Prepared By:

Badge #: WA0531

Copy Received By:



Report Number: WAU004000006

Inspection Date: 06/11/2009

Start Time: 09:10 AM End Time: 09:30 AM

Inspection Level: V - Terminal HM Inspection Type: None

5 STAR MOVERS & DELIVERY LLC

3410 - 160TH AVENUE EAST

SUMNER, WA 98390

USDOT#:

MC/MX#:

State#: THG62885

Location: SUMNER TERMINAL

Highway:

County: PIERCE, WA

Phone#: (253)255-2116 Fax#:

MilePost:

Origin:

Destination:

Driver:

License#:

Date of Birth:

CoDriver: License#:

Date of Birth:

Shipper:

Bill of Lading: Cargo: EMPTY

VEHICLE IDENTIFICATION

Unit Type Make Year State INTL 1992 WA

Plate # A24899P Company # 4

VIN

GVWR

26.000

CVSA # CVSA Issued # OOS Sticker

State:

State:

10538895

BRAKE ADJUSTMENTS

Axle # Right

1 2 1 1/4 1 1/4

1 1/4 Left Chamber

C-24

VIOLATIONS: No Violations Were Discovered.

1 1/2

C-30

HazMat: No HM Transported.

Placard: No

Cargo Tank:

Special Checks: No Data for Special Checks.

Report Prepared By:

Badge #: WA0531

Copy Received By:

