APPLICANT STATEMENT  (To be completed by the individual requesting operating authority)	
Applicant Name:	Application Docket No.
Bounding Main LLC / Sean McNamara	TS-111927
THE APPLICATION What authority are you applying for? Include any amendments.	
Bellingham to Orcas Island with Flag Stops; Eliza, Sinclair, Cypress, Obstruction Pass,	
Olga, Lopez, and Blakely.	
SUPPORT STATEMENT  (To be completed by the individual or business/organization supporting the request for operating authority)	
THE TRANSPORTATION NEED Briefly describe the transportation service that you need and that the	
application could provide to you or your business/organization if this request for operating authority is granted.	
et a regranable cot	Jacob Garage
	/
Are your transportation needs being met now? Yes No If not, explain problems you	
have experienced.	Deruice since Doland
	a year ap, There is
a water taxi beginning hereince - "Leap Froc"- but to	
If the request is denied, would it have any affect on you or your business/organization;	
Yes No If yes, please explain.	leag, no
Difficulty cetting to va	cation ferrippy
Apperey (	() P +
	V
VERIFICATION  (To be completed by the individual or business/organization supporting the request for operating authority)	
Name and Title: Mary Ellen Shirlds	
Business/Organization:	
	. 71
Street/Mailing Address: 14 78 Kul	4 Ka
City, State, Zip Code: Dellucham	7 - 7
Telephone Number: 360 201 9067 Fax Number:	
I understand that this information is being given as the basis for a grant of operating authority by the Washington Utilities and Transportation Commission, an agency of the state of Washington. I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.	
Mary Ellen Shields )	SIGNATURE DATE  Exhibit No. 5CM 7

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