621 Woodland Square Loop SE
Lacey, WA 98503
P.O. Box 47250
Olympia, WA 98504-7250
Phone: 360-664-1222
Email: transportation@utc.wa.gov

AUTO TRANSPORTATION (BUS) COMPANY

Auto Transportation Company means every person owning, controlling, operating, or managing any motor propelled vehicle used in the business of transporting person over any public highway in this state between fixed termini or over a regular route (example: transporting passengers and their baggage to the airport), and not operating exclusively within the incorporated limits of any city or town. You may not operate as an auto transportation company until you have been approved and receive a certificate from the Utilities and Transportation Commission. Auto transportation company applications are subject to public notice, objection and may be set for hearing.

If you provide regular route intrastate service under a federal grant of authority under the provisions of 49 U.S.C§13902, the commission will grant you an auto transportation certificate consistent with the federal grant of authority and limited to intrastate operations that are conducted together with regularly scheduled interstate operations on the same route. You must provide a copy of your federal order granting authority and verify that you have paid Unified Carrier Registration fees.

This application packet contains the following information:

- Application form
- Checklist for a completed application
- Sample Standard Tariff and Time Schedule Format and Fare Flexibility Tariff
- **WAC 480-30** – Rules Relating to Passenger Transportation Companies
- **"Your Guide to Achieving a Satisfactory Safety Rating"**

Insurance Requirements

You must file and maintain bodily injury and property damage insurance **(Form E)** covering each motor vehicle you operate in Washington. The commission must be shown as the certificate holder. Insurance minimum limits are:

Have a passenger seating capacity of 15 or less (including the driver)	Must have bodily injury and property damage insurance or surety bond with a minimum limit of $1,500,000 combined single limit.
Have a passenger seating capacity of 16 or more (including the driver)	Must have bodily injury and property damage insurance or surety bond with a minimum limit of $5,000,000 combined single limit.

FILING YOUR APPLICATION

The commission has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1243 or The Washington Relay Service at 7-1-1 or 1-800-833-8384.
Select **one** of the following:

- Scan/PDF your application to **efileapp.utc.wa.gov** and pay online at **payments.utc.wa.gov**
- Mail your application **with** your check or money order to the following address:

UTC, PO Box 47250, Olympia, WA 98504-7250

ACH online (no service fee) or credit card on-line at **payments.utc.wa.gov** (2.5% or minimum of $3.95 is charged by Official Payments for credit card processing).

DO NOT EMAIL YOUR CREDIT CARD INFORMATION

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CHECKLIST

- ☐ Type of authority requested – check one.
- ☐ If you also plan to operate as a charter/excursion service, complete Attachment F.
- ☐ Correct fees (including $25 for each vehicle to be used if also applying for charter/excursion).
- ☐ Complete Type of Payment sheet.

Section 1 – Business Information

- ☐ Legal and Trade Name – as registered with **Business Licensing Services**.
- ☐ If corporation or LLC, name must match registration with **Secretary of State's office**.
- ☐ Phone, fax, and email address.
- ☐ Physical address – and mailing address, if different from physical address.
- ☐ **USDOT number** – All carriers must have one. The legal name on the MCS-150 must match your application name.
- ☐ UBI number – as registered with **Business Licensing Services.**
- ☐ Business Structure – If partnership, corporation, or other, list members of partnership, corporation, or LLC and percentages.

Section 2 – Proposed Service Information

- ☐ Type of service to be provided (door-to-door services and/or scheduled service).
- ☐ Map of the proposed line, route, or service territory that meets standards described in WAC **480-30-051**.
- ☐ Statement of conditions that justify the proposed service (use *Attachment A*).
- ☐ Complete description of the proposed service, including the line, route, or service territory described in terms such as streets, avenues, roads, highways, townships, ranges, cities, towns, counties, or other geographic descriptions.
- ☐ Statement of applicant's prior experience and familiarity with the statutes and rules that govern the operation it proposes.

Section 3 – Tarif and Time Schedule

- ☐ Proposed tariff and time schedule – according to the samples provided for filing tariff and time schedule.
- ☐ If you are applying for flexibility rates, you must also complete *Attachment H* to show your proposed base rate and maximum rate.

Section 4 – Financial Statement

- ☐ Financial statement of assets and liabilities. Attach a balance sheet in lieu of using the form if desired.
- ☐ Ridership and revenue forecasts for the first 12 months of operation.
- ☐ Pro forma balance sheet and income statement for first 12 months of operation.

Section 5 – Hearing Information

- ☐ List applicable information in case your application is scheduled for or you anticipate a formal hearing.

Section 6 – Equipment List

- ☐ List of equipment to be used in providing the proposed service. Attach additional sheets if necessary.

Sections 7 and 8 – Operations and Safety

- ☐ Operational responsibilities – completed with person(s) and position(s) who will be responsible for understanding and complying with the requirements.
- ☐ Safety & Operations – completed with the person(s) and position(s) who will be responsible for understanding and complying with the requirements.

Section 9 – Declaration of Application

- ☐ Declaration of Application – sign and date application.

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AUTO TRANSPORTATION AUTHORITY APPLICATION

FOR OFFICAL USE ONLY			
DATE FILED:	Company:		Docket #:
111-0268	Receipt ID:	Payment ID:	Amount Paid:
111-0268-232-01	111-0268-232-02	111-0268-230-01	111-0268-230-02

Type of Passenger Transportation Authority Requested (check one box)	Fee Required
☐ **New Certificate** (auto transportation company certificates include statewide charter and excursion carrier service if marked below). Complete Sections 1-8 and *Attachment A*. Submit a proposed tariff and time schedule. Do you plan on providing charter/excursion service? ☐ Yes ☐ No If yes, complete A*ttachment F.*	**$200.00**
☐ **Extension of Existing Auto Transportation Certificate** C- ____ Complete Sections 1-8. Submit a proposed tariff and time schedule.	**$150.00**
☐ **Transfer or Lease Auto Transportation Authority** – Complete Sections 1-8 and *Attachments C & G*. Transferring all of Certificate C- ____ Transferring a portion of Certificate C- ____	**$200.00**
☐ **Temporary Auto Transportation Authority** - New temporary authority or temporary to operate pending a commission decision on a parallel filed permanent application. Complete Sections 1-8 and *Attachment B*.	**$150.00**
☐ **Mortgage of Certificate** – Complete Section 1 and *Attachment E*.	**$35.00**
☐ **Name Change** – Change in corporate name, change in trade name; adding or deleting a trade name; or changing the surname of an individual owner or partner. Complete Section 1 and *Attachment D*.	**$35.00**
☐ **Reinstatement of Canceled Certificate** – Complete Sections 1, 2 and 8.	**$200.00**

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Section 1 - Business Information

Legal Name:

Trade Name, if applicable:

Physical Address:

Mailing Address:

Telephone Number: Email:

Fax Number:

Contact Name:

USDOT#: If you do not have a USDOT number, go to the **FMCSA website** to apply or call 360-596-3812 for assistance.

Is your business registered with the **Department of Revenue**? ☐ No ☐ Yes

Business License/UBI#:

Type of Business

☐ Individual ☐ Partnership ☐ Corporation ☐ Other (LP, LLP, LLC) State of Incorporation

List the name, title, and percentage of all partner's share or stock distribution for major stockholders:

Name Title Stock Distribution/% of Shares

Section 2 – Proposed Service Information

1) What type of service do you plan on providing: door-to-door services and/or scheduled service?

☐ **Door-to-door service** - Service provided between locations identified by the passengers and points specifically named by the company in its filed tariff and time schedule. Door-to-door service requires a time schedule in compliance with WAC **480-30-281(2)(c)** and may be restricted to "by reservation only"; and/or,

☐ **Scheduled service** - Service provided between locations specifically named by the company (for example, the X Hotel at 4th and Main) and points specifically named by the company in its filed tariff and time schedule. Scheduled service requires the company to file a time schedule in compliance with WAC **480-30-281 (2)(b)** and may be restricted to "by reservation only."

2) Provide the following documents with your application:

☐ A map of the proposed line, route, or service territory that meets the standards described in **WAC 480-30-051.**

☐ Support statements for proposed service authority.

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3) Describe the proposed type of service (see **WAC 480-30-096**) including the line, route, or service territory described in terms such as streets, avenues, roads, highways, townships, ranges, cities, towns, counties or other geographic description:

4) State the conditions that demonstrate this proposed service is for the public convenience and necessity:

5) State the applicant's prior experience and familiarity with the statutes and rules that govern operations they proposes:

6) Do other auto transportation companies currently provide service between any of the points or along any portion of the route you propose to serve? ☐ No ☐ Yes If yes, list the names and addresses of companies:

7) Do you currently hold, or have you ever held, an auto transportation certificate? ☐ No ☐ Yes
If yes, please indicate your certificate number C-

8) Have you ever applied for and been denied an auto transportation certificate? ☐ No ☐ Yes
If yes, please explain:

9) Have you or your company ever been cited for a business-related violation of state laws or commission rules by the UTC or any other federal or state agency? ☐ No ☐ Yes If yes, please explain:

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Section 3 – Tariff and Time Schedule

10) Is this application for temporary authority, a new certificate, or extension of existing certificated authority?
☐ No ☐ Yes **If yes, you must include a proposed tariff and time schedule that is in compliance with WAC 480-30-256 through WAC 480-30-436**.

11) Are you applying for fare flexibility as described in **WAC 480-30-420**? ☐ Yes ☐ No
If yes, complete *Attachment H* to show your proposed base rate and maximum rate.

12) If this application is a transfer or a lease of authority from an existing certificated company, you must either file a new tariff and time schedule at the same rate levels as on file, or, you must adopt the current certificate holder's tariff and time schedule. To file a new tariff, use the standard tariff format attached to this application or an approved alternate format. Indicate which option you will use: ☐ Adopt ☐ File new tariff

Section 4 - Financial Statement

Complete the following or attach a balance sheet, profit and loss statement, or business plan.

Assets		**Liabilities**	
Cash in Bank		Salaries/Wages Payable	
Notes Received		Accounts Payable	
Investments		Notes Payable	
Other Current Assets		Mortgages Payable	
Prepaid Expenses		**Total Liabilities**	**$ 0**
Land and Buildings		Net Worth	**$ 0**
Trucks and Trailers		Preferred Stock	
Office Furniture		Common Stock	
Other Equipment		Retained Earnings	
Other Assets		Capital	
TOTAL ASSETS	**$ 0**	**TOTAL LIABILITIES AND NET WORTH**	**$ 0**

In addition, the application must include the following (see WAC 480-30-096)

- Ridership and Revenue forecasts for the first twelve months of operation.
- A pro forma balance sheet and income statement for the first twelve months of operation.

Section 5 – Hearing Information

If the commission assigns this application for a formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.

Number of witnesses:	Amount of time:

Will an attorney be representing you? ☐ No ☐ Yes If Yes, complete the following:

Attorney's Name: Attorney's Phone Number:

Attorney's Firm: Fax Number:

Street:

City, State, Zip: Email:

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Section 6 - Equipment List

Describe the equipment that will be used (attach additional sheet if necessary). All vehicles must pass a Commercial Vehicle Safety Alliance inspection before an application is granted. All fields are required. Per **WAC 480-30-036 (2)**, **"Party bus"** means any motor vehicle whose interior enables passengers to stand and circulate throughout the vehicle because seating is placed around the perimeter of the bus or is nonexistent and in which food, beverages, or entertainment may be provided. A motor vehicle configured in the traditional manner of forward-facing seating with a center aisle is not a party bus.

Year	Make	License Number	Vehicle ID (VIN)	Seating Capacity	Party Bus?

*attach additional pages if necessary

13) Will you be employing CDL drivers? ☐ Yes ☐ No

Section 7 - Operational Responsibilities

Identify the person and position responsible for understanding and complying with the requirements of each category shown below:

Tariffs, Time Schedules, Rates and Rate Filings (**WAC 480-30-251** through **WAC 480-30-436**) Companies must file a tariff showing all rates it will impose on its customers, together with rules that govern how rates will be assessed. Companies must also file a time schedule. Charter and excursion only carriers are not required to file tariffs and time schedules per **WAC 480-30-251**.

Name:	Position:

Annual Reports and Regulatory Fees (**WAC 480-30-066** through **WAC 480-30-081**) Auto transportation companies must file an annual report of its financial and operational activity and pay regulatory fees by May 1 of each year. Charter and excursion carriers must file an annual safety report by May 1; and pay regulatory fees by Dec. 31 of each year.

Name:	Position:

Customer Service Person responsible for customer service complaints, and customer notice requirements.

Name:	Position:

State of Washington General Laws, Rules and Regulations Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Revenue and Internal Revenue Service (business licensing, taxes); and Employment Security.

Name:	Position:

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Section 8 – Safety

In each of the categories shown below, list the person and position responsible for understanding and complying with the **Federal Motor Carrier Safety Regulations (FMCSR)** and Washington State laws and rules. Please refer to the WAC rules, fact sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements.

Controlled Substance Abuse and Alcohol Use and Testing (**Title 49, Code of Federal Regulations Part 382 and Part 40**). If you operate commercial motor vehicles, your drivers must be in a Controlled Substance and Alcohol Use and Testing program. You must have an alcohol and controlled substances testing program. **Please attach evidence of your enrollment in a drug and alcohol testing program if your company has commercial vehicles and employs CDL drivers**.

Name:	Position:

Driver Qualification Requirements (Title 49, Code of Federal Regulations Part 391) Drivers must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name:	Position:

Driver Hours of Service (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name:	Position:

Inspection, Repair and Maintenance (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.

Name:	Position:

Safety Regulations, General (Title 49, Code of Federal Regulations Part 390)

Name:	Position:

Driving of Commercial Motor Vehicles (Title 49, Code of Federal Regulations Part 392)

Name:	Position:

Parts and Accessories Necessary for Safe Operation (Title 49, Code of Federal Regulations Part 393)

Name:	Position:

Section 9 - Declaration of Applicant

INITIAL

I understand that filing this application **does not** authorize me to start operations requested or in the territory described until the commission grants the application and issues a certificate.

I understand the responsibilities of a passenger transportation company, and I am in compliance with all local, state, and federal regulations governing business in the state of Washington.

I certify under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

I certify that I am the applicant, or I am authorized to execute and file this document on behalf of the applicant.

Name:	Date: