

PUBLIC UTILITIES COMMISSION OF THE STATE OF CALIFORNIA APPLICATION FOR CHARTER-PARTY CARRIER AUTHORITY

TCP _____

FOR PUC
USE ONLY

IMPORTANT—A FILING FEE MUST ACCOMPANY THIS APPLICATION AND IS NOT REFUNDABLE. PAYMENT TO THE COMMISSION SHOULD BE MADE BY CHECK OR MONEY ORDER. Check below the type of certificate(s) or permit(s) for which you intend to apply and enclose the filing fee as required for each authority.

	NEW FILING FEE	REFILE FILING FEE	FOR PUC USE ONLY
CLASS "A" CERTIFICATE	<input type="checkbox"/> \$1500	<input type="checkbox"/> \$1500	(512)
CLASS "B" CERTIFICATE	<input type="checkbox"/> 500	<input type="checkbox"/> 500	(510)
CLASS "C" CERTIFICATE	<input type="checkbox"/> 500	<input type="checkbox"/> 500	(510)
CHARTER-PARTY PERMIT(S) CIRCLE TYPE: P S Z	<input type="checkbox"/> 500	<input type="checkbox"/> 500	(510)

PLEASE TYPE OR PRINT

PART I: STATEMENT OF OWNERSHIP

1. Applicant HAS HAS NOT been previously licensed by this Commission.
If so, PSC/TCP number is/was _____

2. Applicant is:

Individual: _____
First
Middle
Last Name

Partnership: _____

 (List all partners-use additional sheet if necessary. All partners must sign all forms.)

Corporation: _____
 (Show exact name as registered with the California Secretary of State)

Doing Business as (DBA): _____

Note: Any entity doing business under one or more fictitious names shall, with respect to each fictitious name comply with Sections 17900-17930 of the California Business and Professions Code entitled "Fictitious Business Names."

Terminal Address: _____
Street Address
City
County
State
Zip Code

Mailing Address if different from above: _____
Street Address
City
County
State
Zip Code

Phone: (____) _____
Area Code
Phone No.

IF A PARTNERSHIP, a copy of the partnership agreement shall be attached to this application. If a partnership agreement has already been filed, the application shall make specific reference thereto and the date the filing was made. If there is no written partnership agreement, complete Form TL706-B and attach to application.

PARTNERSHIP AGREEMENT: ENCLOSED NO AGREEMENT
 FORM TL706-B: ENCLOSED

PARTNERSHIP AGREEMENT PREVIOUSLY FILED: YES NO
 IF YES, DATE FILED: _____ TCP-NO.: _____

IF A CORPORATION, exact corporate name is: _____
 Date of Incorporation: _____ Incorporated in State of _____

NAME OF OFFICERS	TITLE	ADDRESS	NO. OF SHARES

Control of Corporation Held By: Officers Listed Other (Specify: _____).

If applicant is a California Corporation, a certified copy of its Articles of Incorporation shall be attached to the application. If already filed with the Public Utilities Commission, make specific reference to the prior proceeding and the date of filing. If corporation is more than one year old, provide a Certificate of Status.

If the Corporation was organized and exists under the laws of a state other than California, a Certificate of Qualification must be obtained from the Secretary of State, State of California and must be filed with the Articles of Incorporation when submitted.

ARTICLES OF INCORPORATION/CERTIFICATE OF QUALIFICATION/STATUS: ENCLOSED PREVIOUSLY FILED

IF PREVIOUSLY FILED: PROCEEDING NO.: _____ DATE FILED: _____

3. Applicant Business Affiliation:

(a) Applicant is associated or affiliated with the following business entities by reason of common ownership, control or management (Own part or all of the company, hold a responsible position in the company or guide the operations of the company, directly or indirectly.). (Please list and indicate if partnership, company or corporation.)

NAME	PARTNERSHIP, COMPANY OR CORPORATION

(b) No affiliation exists.

4. EXPERIENCE:

Applicant has had the following experience in the transportation of passengers by motor vehicle over the public highways:

PART II: SCOPE OF OPERATIONS PROPOSED

(All charters must be prearranged and per-person fares are not allowed, except for Charter Party-S Carriers and Charter-Party A Carriers in the conduct of sightseeing tour service.)

1. CERTIFICATES

- Class "A" Statewide authority and round-trip sightseeing service.
- Class "B" Pick-up area not more than 125 air miles from home terminal to any point in the state. Any size vehicle.
- Class "C" Service provided incidental to commercial balloon operations, commercial river rafting, or skiing where no additional compensation is provided for the transportation.

Applicant intends to provide the following services (describe the service and include a description of the way you will charge your customers; i.e., by the hour, by mileage, etc.); If you plan to be a sub-carrier, provide the TCP number and the name of the overlying carrier.

2. CHARTER-PARTY PERMITS (P=Permit S=Sightseeing Z=Specialized)

- "P" Carriers using only vehicles under 15-passenger seating capacity.
- "S" Round-trip sightseeing tour service. (The tour must be directed by the operator, not the customer.)
- "Z" Specialized carriers, who do not hold themselves out to serve the general public, but only provide services under contract with industrial and business firms, governmental agencies, and private schools or who only transport agricultural workers to and from farms for compensation or who only conduct transportation services, which are incidental to another business.

Applicant intends to provide the following services (describe the service and include a description of the way you will charge your customers; i.e., by the hour, by mileage, etc.); If you plan to be a sub-carrier, provide the TCP number and the name of the overlying carrier.

3. TERMINAL INSPECTION FEE STATEMENT: Complete Form PL739-B and attach to application.

PART III: SAFETY OF OPERATION

1. CALIFORNIA HIGHWAY PATROL REGULATIONS

If you intend to operate vehicles with a seating capacity of more than 10 persons including the driver, you must pass a Highway Patrol inspection (California Vehicle Section 34505.1) before your operating authority can be granted by PUC. *PUC WILL REQUEST THIS INSPECTION FOR YOU SOON AFTER YOU FILE THIS APPLICATION.* Carriers are subject to additional safety inspections at any time. All applicants must complete the following forms:

- (a) **EQUIPMENT STATEMENT OF APPLICANT:** Complete Form PL664 and attach to application.
- (b) **CHP CARRIER PROFILE INFORMATION:** Complete CHP Form 362 and attach to application.

2. DEPARTMENT OF MOTOR VEHICLES DRIVER REGULATIONS

All applicants, including owner-operators and employers, are required to participate in DMV's Pull Notice Program. Applicant agrees to hire and utilize only drivers who are licensed (and certificated, if appropriate) for the type of vehicles they will be driving. Applicant agrees to check its drivers' records with DMV for all drivers prior to their hiring and agrees to comply with applicable laws and regulations pertaining to the employment of drivers.

Every carrier shall enroll in the "Pull Notice Program" of the Department of Motor Vehicles as defined in Vehicle Code Section 1808.1. A charter-party vehicle shall not be operated by any driver who is presumed to be a negligent operator under Vehicle Code Section 12810.5. You will receive a requester code number from DMV when you are enrolled in the Pull Notice Program.

3. MAINTENANCE CAPABILITIES

By signing this application, applicant certifies that applicant is willing and able to maintain its vehicles in safe operating condition and in compliance with the California Vehicle Code and with regulations contained in Title 13 of the California Code of Regulations relative to motor carrier safety. Every carrier must inspect all vehicles and maintain proper documentation of such inspections.

4. WORKERS' COMPENSATION DECLARATION FORM: Complete Form TL706-K and attach to application.

5. SUBCARRIER AGREEMENTS: Applicant agrees to hire and utilize subcarriers in compliance with General Order 157 Series.

6. HIGHWAY SAFETY REQUIREMENTS: Class A, B and C certificated carriers only. Complete Form PL706-I and attach to application.

7. CONTROLLED SUBSTANCE AND ALCOHOL TESTING CERTIFICATION REQUIREMENTS: Applicants must provide for a drug testing program which includes educational materials for their drivers, training for supervisors and specified testing of drivers for use of controlled substances and alcohol. Complete Form PL706-J and attach to application. If all of the vehicles that you propose to operate have a seating capacity of 16 persons or more, including the driver, you do not have to complete form PL706-J. If you will not operate vehicles under this authority that have a seating capacity of 15 persons or less, including the driver, certify to this effect on Form PL706-J, Part I.

PART IV: FINANCIAL RESPONSIBILITY AND INSURANCE REQUIREMENTS

1. Complete Form TL706-F3 (Projected Profit and Loss Statement) and attach to the application. The financial information you submit may be verified by the Commission staff.
2. Applicant shall deposit evidence of adequate bodily injury and property damage insurance required by General Order 115 Series. Certificate/permit will not be issued without insurance being on file with the Commission. The required minimum public liability and property damage insurance coverage increases depending on the seating capacity of the vehicle(s) to be operated. Your insurance company must file a Form PL914 insurance certificate with the Commission before any charter-party carrier operating authority can be issued.

Name(s) appearing on all certificates of insurance must be exactly the same as the applicant's name(s) as listed in Part 1, No. 2 of this application

1. Name and address of insurance broker or agent is: _____

Insurance Broker/Agent

Street Address

City

State

Zip Code

Area Code/Telephone No.

PART V: NOTICE REQUIREMENTS

The Commission's Rules of Practice and Procedure require that Charter-Party Carrier of Passengers Certificate Applications be noticed in the Daily Calendar for a thirty day period and states that applicants shall furnish or mail a copy of the application to any person making a request therefor, or to any other persons as the Commission may direct. By signing this application, applicant agrees to comply with such requirements.

CERTIFICATION

I (we) certify (or declare), under penalty of perjury, that the representations appearing in said application and in any PUC forms attached thereto (including any accompanying financial schedules, statements or projections) are, to the best of my (our) knowledge and belief, true, correct and complete, based on all the information required to be included therein, of which I (we) have any knowledge, and these representations are made in good faith. Where the CPUC operating authority is held by a corporation, I further certify that I am an officer of the corporation and am authorized to make this certification on its behalf. I (we) further certify (or declare), under penalty of perjury, that a final judgement has not been entered against the applicant(s) pursuant to Section 3716.2 of the Labor Code (workers' compensation violations) and that I (we) am (are) in compliance with the Americans with Disabilities Act of 1990 as required by D. 92-12-065.

Date: _____

Signature of Applicant(s)

If applicant is a corporation:

Signature of Corporate Officer

Title of Corporate Officer

NOTICE

The filing of this application does not in itself constitute authority to engage in for-hire operations. Any for-hire operations conducted prior to Commission authorization are unlawful and may subject applicant to fine and imprisonment.