



LOUISIANA PUBLIC SERVICE COMMISSION

PO Box 91154; Baton Rouge, LA 70821

(888) 342-5717 or (225) 342-4439

T-37069

WASTE BY MOTOR VEHICLE APPLICATION

Applicant desires to secure from the Louisiana Public Service Commission a Common Carrier Certificate authorizing applicant to operate as a **COMMON CARRIER OF WASTE BY MOTOR VEHICLE**.

BUSINESS ENTITY- APPLICANT INFORMATION

SECTION 1

RECEIVED

DEC 12 2023

Business Entity Name: WNW Transport LLC		
DBA: (Including any doing business as "dba" name)		LA. PUBLIC SERVICE COMMISSION TRANSPORTATION
Business Entity's Authorized Representative: Carlton Washington		
Business Address: 136 Major Lane		
City: Grand Cane	State: LA	ZIP Code: 71032
Mailing Address: 136 Major Lane		
City: Grand Cane	State: LA	ZIP Code: 71032
Telephone # (Include Area Code) 318-871-7990	Fax # (Include Area Code)	Cell # (Include Area Code)
Email Address: wnwtransport5@gmail.com		
FEIN #: 47-2063507	OR	SS#
COMPANY TAX REPORTING YEAR (Check ONLY one box)		
<input checked="" type="checkbox"/> Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.		
<input type="checkbox"/> Company's Tax reporting year is on a FISCAL basis reporting from _____ to _____ each year. Month/Day Month/Day		
COMPANY OWNERSHIP AND/OR INTEREST		
Check one box	Louisiana Domestic Corporation	Date of Incorporation _____
	<input checked="" type="checkbox"/> Louisiana Domestic Limited Liability Company (LLC)	Date of Formation 05/29/2015
	Louisiana Domestic Partnership	Date of Formation _____
	Louisiana Limited Liability Partnership	Date of Formation _____
	Foreign* Corporation in the State of _____	Date of Incorporation _____
	Foreign* Limited Liability Company (LLC) in the State of _____	Date of Formation _____
	Foreign* Partnership in the State of _____	Date of Formation _____
MUST attach copies of the company's Secretary of State Certificate & Articles of Incorporation or Formation from your state of origin or existence. *Foreign Entities must also register with the Louisiana Secretary of State's Office (La. SOS); submit copies of the paperwork filed with the La. SOS along with a copy of the Certificate of Good Standing issued by the La. SOS.		

BUSINESS ENTITY- APPLICANT INFORMATION**SECTION 1 (Continued)**

List Names of Officers and/or Members and percentage of ownership or number of shares below and check one box to indicate title.

Name	Title (Corporations list President, Vice President, Secretary, Treasurer and LLC companies list Members)	Ownership percentage of ownership or number of shares
Carlton Washington	Owner	100%

REPRESENTATION OF APPLICANT**SECTION 2**

If Applicant is represented by legal counsel or if this application is being filed by legal counsel please provide the following:

LEGAL COUNSEL'S NAME:		
FIRM NAME:		
Mailing Address:		
City:	State:	ZIP Code:
Telephone # (Include Area Code)	Fax # (Include Area Code)	Cell # (Include Area Code)
Email Address:		

AUTHORITY TYPE**SECTION 3**

(Please check all types of waste you desire to acquire in this application below)

<input checked="" type="checkbox"/> Non-hazardous oilfield wastes (i.e. Exploration & Production wastes as defined by RS 45:162)
<input checked="" type="checkbox"/> Non-hazardous industrial solid waste (as defined by RS 45:162)
<input type="checkbox"/> Hazardous waste (as defined by RS 45:162)

GEOGRAPHICAL LOCATION

SECTION 4

<input checked="" type="checkbox"/>	Mark this box if you are seeking authority STATEWIDE
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OR applicant desires to transport waste as outlined in Section 3 originating
in the following parishes:

	Acadia		Allen		Ascension		Assumption
	Avoyelles		Beauregard		Bienville		Bossier
	Caddo		Calcasieu		Caldwell		Cameron
	Catahoula		Claiborne		Concordia		DeSoto
	East Baton Rouge		East Carroll		East Feliciana		Evangeline
	Franklin		Grant		Iberia		Iberville
	Jackson		Jefferson		Jefferson Davis		Lafayette
	Lafourche		LaSalle		Lincoln		Livingston
	Madison		Morehouse		Natchitoches		Orleans
	Ouachita		Plaquemines		Pointe Coupee		Rapides
	Red River		Richland		Sabine		St. Bernard
	St. Charles		St. Helena		St. James		St. John the Baptist
	St. Landry		St. Martin		St. Mary		St. Tammany
	Tangipahoa		Tensas		Terrebonne		Union
	Vermilion		Vernon		Washington		Webster
	West Baton Rouge		West Carroll		West Feliciana		Winn

EQUIPMENT

SECTION 5

Applicant proposes to commence operations with the following equipment:

(If additional space is needed, attach a separate sheet listing each vehicle)

Year (Ex. 2016)	Make (Ex. Peterbuilt)	Model (Ex. Tractor or Trailer)	Type (Ex. Vacuum, dump, roll-off, flat bed etc...)
	EQUIPMENT LIST ATTACHED		
	AS SCHEDULE A.		

TERMINALS AND SERVICE OF PROCESS

SECTION 6

Please check one

- ☐ Applicant is located outside of Louisiana and understands if authority is granted a LOUISIANA TERMINAL in which operations shall commence, must be established prior to issuance of the certificate.
- ☒ Applicant proposes to commence operations from the following LOUISIANA TERMINAL/LOCATION(S) as listed below: (If applicant has additional Louisiana terminals or locations, attach a separate sheet listing each location)

LOUISIANA TERMINAL/LOCATION address: 136 Major Lane

City: Grand Cane

State: LA

ZIP Code: 71032

TERMINALS AND SERVICE OF PROCESS**SECTION 6 (Continued)**

OUT OF STATE CARRIERS MUST LIST AGENT FOR SERVICE OF PROCESS BELOW Any carrier domiciled outside of Louisiana and providing the intrastate transportation of waste for disposal in Louisiana shall register the company's name, address and telephone number with the Louisiana secretary of state and the Louisiana Public Service Commission. Service of process with respect to all civil, criminal, or administrative proceedings brought before any court or administrative agency located in the state may be served on the registered agent as filed with the Louisiana secretary of state by any means provided by the applicable rules or procedure for that court or agency providing service of process.

Agent For Service Of Process Name

W & W Transport LLC

Mailing Address:

136 Major LN

City:

Grand Cane

State:

LA.

ZIP Code:

71032

VERIFICATION**SECTION 7**STATE OF Louisiana PARISH/COUNTY OF DesotoBEFORE ME, the undersigned authority, Carlton Washington

(Applicant) who represents W & W Transport LLC (Business Entity) personally came and appeared, who, after being duly sworn, did depose and say that he/she is the APPLICANT in the above application; that he/she desires to secure from the Louisiana Public Service Commission a Common Carrier Certificate, authorizing the applicant to operate as a carrier of **Waste** as stated; and that he/she has read same and is familiar with the contents thereof and that facts as stated therein are true and correct, and to the best of his/her knowledge. FURTHERMORE, APPLICANT agrees to comply with all provisions of law and the rules and regulations of the Louisiana Public Service Commission respecting the operation of public service motor vehicles, and to file with the Commission a tariff which shows the services to be rendered and the basis for computation of rates, schedules and other required data; and to file such evidence of insurance or bonds as required by law and by the rules and regulations of the Louisiana Public Service Commission prior to commencement of operations. And understands that the information contained in this application may be shared with the Louisiana Department of Revenue for purposes of Inspection and Supervision Fees.

SWORN TO AND SUBSCRIBED before me this 17th day of December, 2023W & W Transport LLC
Carlton Washington

PRINTED NAME OF APPLICANT

Larry English

PRINTED NAME OF NOTARY PUBLIC

Carlton Washington

SIGNATURE OF APPLICANT

Larry English #22792
SIGNATURE OF NOTARY PUBLIC
(including Notary Seal & Number)**LPSC OFFICE USE ONLY**

Expires Life

Accepted by Staff

Sammy Buel

Date

12-14-23

DOCKET #

T-37069

PUBLISHED IN BULLETIN #

1313

ON

12-22-23

Date



R. Kyle Ardoin

SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

W N W TRANSPORT LLC

A limited liability company domiciled in MANSFIELD, LOUISIANA,

Filed charter and qualified to do business in this State on May 29, 2015,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

December 4, 2023



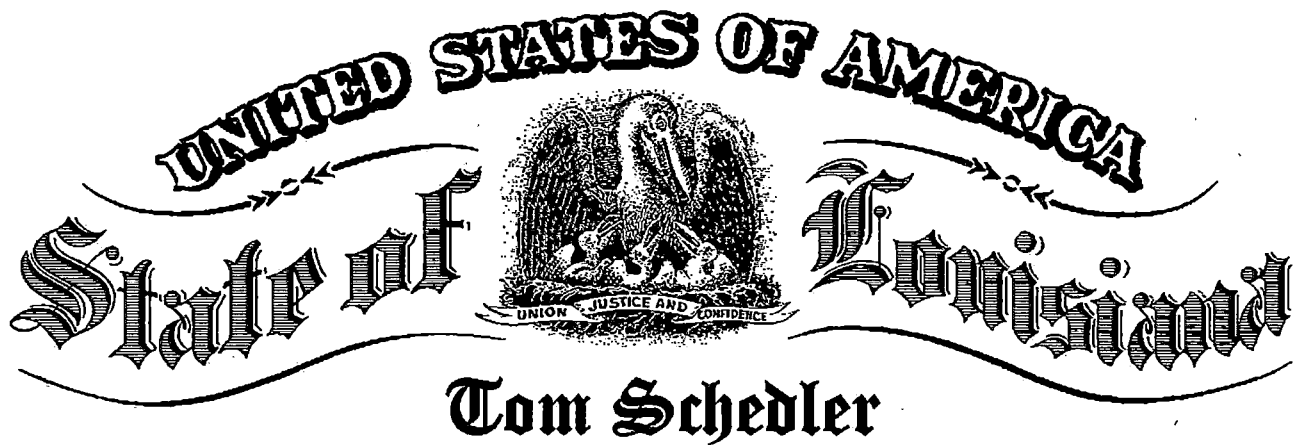
R. Kyle Ardoin

Secretary of State

Web 41903349K

Certificate ID: 11814082#YNJ62

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

a copy of the Articles of Organization and Initial Report of

W N W TRANSPORT LLC

Domiciled at MANSFIELD, LOUISIANA,

Was filed and recorded in this Office on May 29, 2015,

And all fees having been paid as required by law, the limited liability company is authorized to transact business in this State, subject to the restrictions imposed by law, including the provisions of R.S. Title 12, Chapter 22.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 29, 2015

Secretary of State

WEB 41903349K



Certificate ID: 10604639#VXM73

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov

**STATE OF LOUISIANA
ARTICLES OF ORGANIZATION
(R.S. 12:1301)**

1. The name of this limited liability company is: W N W TRANSPORT LLC

2. This company is formed for the purpose of: TRANSPORTING

3. The duration of this limited liability company is (may be perpetual):

4. Other Provisions:

By typing my name below, I hereby certify that I am the organizer. The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

Electronic Signature: CARLTON WASHINGTON (5/29/2015)

Title: OWNER

**LIMITED LIABILITY COMPANY INITIAL REPORT
(R.S. 12:1305 (E))**

1. The name of this limited liability company is: W N W TRANSPORT LLC

2. The location and municipal address, not a post office box only, of this limited liability company's registered office:

1000 JENKINS ST STE A
MANSFIELD, LA 71052

3. The full name and municipal address, not a post office box only, of each of this limited liability company's registered agent(s) is/are:

CARLTON WASHINGTON
1000 JENKINS ST STE A
MANSFIELD, LA 71052

4. The name and municipal address, not a post office box only, of the managers or members:

CARLTON WASHINGTON (Manager)
1000 JENKINS STE A
MANSFIELD, LA 71052

APRIL WARFIELD (Member)
1000 JENKINS ST STE A
MANSFIELD, LA 71052

By typing my name below, I hereby certify that I am the organizer. The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

Notice Of Change

Charter Number:

41903349K

Name:

W N W TRANSPORT
LLC

Mailing Address:

1000 JENKINS ST STE A
MANSFIELD, LA 71052

Registered Office Address in Louisiana:

1000 JENKINS ST STE A
MANSFIELD, LA 71052

Agents:

CARLTON WASHINGTON
1000 JENKINS ST STE A
MANSFIELD, LA 71052

Managers/Members:

CARLTON WASHINGTON (Manager)
1000 JENKINS STE A
MANSFIELD, LA 71052

To be electronically signed by a member or manager. The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

Electronic Signature:

CARLTON
WASHINGTON
(5/29/2015)

Title: OWNER

NOTICE OF CHANGE

Charter Number: 41903349K

Name: W N W TRANSPORT LLC

ADDRESSES:

The location and municipal address (not a P.O. Box only) of this limited liability company's registered office:

1313 POLK ST
MANSFIELD, LA, 71052

Mailing Address:

1313 POLK ST
MANSFIELD, LA, 71052

AGENTS:

Agent Name:

CARLTON WASHINGTON
1313 POLK ST
MANSFIELD, LA, 71052

MEMBERS/MANAGERS:

Member/Manager Name:

CARLTON WASHINGTON (MANAGER, MEMBER)
1313 POLK ST
MANSFIELD, LA, 71052

The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

TO BE ELECTRONICALLY SIGNED BY MEMBER OR MANAGER.

ELECTRONIC SIGNATURE: CARLTON WASHINGTON (12/20/2022)

TITLE: OWNER

COMPANY'S OPERATING STRUCTURE

April Washington-bookkeeper

318-871-7734 aprilwarfieldinsur@yahoo.com

Shyra Gutierrez-payroll

575-631-1750 prsdispatch21@gmail.com

Carlton Wahington-dispatcher

318-871-7990 wnwtransport5@gmail.com

Eric Gutierrez-dispatcher

210-562-0636 wnw.ops@gmail.com

Kerry Hill- Attorney

318-995-1732 tkhilllawfrim@gmail.com

Rekeya Walker-Cpa

318-521-4732 relaxtaxservices.318@gmail.com

SCHEDULE A

WNW TRANSPORT LLC EQUIPMENT LIST

TRACTORS:

2003	MACK	1MIAA18Y03W150824
2010	MACK	1M1AW09Y5AN009857
2014	MACK	1M1AW07X0EM035944
2015	MACK	1M1AW21Y2FM051830
2018	PETERBILT	1XPBDP9XXJD363999
2015	MACK	1M1AW07Y1FM045173

DUMP TRUCKS:

2001 Mack Vin# 1M1AA08X11W024096

2004 Mack Vln # 1M1AE06Y34N020531

1999 Kenworth Construction Vin# 3WLDDU9XF821266

TRAILERS:

2011	DRUP	1UNST4223BL093912
2007	TROXEL	1T9TS40247R719687
2012	DRAGON	1UNST4220CL086854
2008	TRSP	5AGEV42238S485205
2004	DRAGON	1USNT42214I023957

Named insured

W N W transport llc
W N W transport
136 MAJOR LN
GRAND CANE, LA 71032

Policy number: 974145913

Underwritten by:
Blue Hill Specialty Ins Co
November 28, 2023
Policy Period: Oct 9, 2023 - Oct 9, 2024
Page 1 of 3

progressivecommercial.com

Online Service

Make payments, check billing activity, print
policy documents, update your policy or
check the status of a claim.

1-844-779-5952

**Progressive Commercial Advantage
Agency**

Contact your surplus lines broker for
personalized service.

1-800-274-4499

To report a claim.

Commercial Auto Insurance Coverage Summary

This is your Declarations Page

Your coverage has changed

Your coverage began the later of October 9, 2023 at 12:01 a.m. or the effective time shown on your application. This policy period ends on October 9, 2024 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852LA (02/19), MC1632 (06/04), 4852LA (02/19), 4881LA (02/19) and Z228 (01/11).

The named insured organization type is a corporation.
Blue Hill Specialty Ins Co is a stock company (NYSE:PGR).

Policy changes effective November 27, 2023

Changes processed on:	November 27, 2023 11:20 a.m.
Premium change:	\$35.00
Changes:	Filing information for this policy has changed.

The changes shown above will not be effective prior to the time the changes were requested.

NOTICE

This insurance policy is delivered as surplus lines coverage under the Louisiana Insurance Code.

In the event of insolvency of the company issuing this contract, the policyholder or claimant is not covered by the Louisiana Insurance Guaranty Association or the Louisiana Life and Health Insurance Guaranty Association, which guarantees only specific types of policies issued by insurance companies authorized to do business in Louisiana.

This surplus lines policy has been procured by the following licensed Louisiana surplus lines broker:



Signature of Licensed Louisiana Surplus Lines Broker or Authorized Representative

Mark Pesich

Printed Name of Licensed Louisiana Surplus Lines Broker

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$42,581
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured/Underinsured Motorist	\$1,000,000 combined single limit		3,786
Uninsured Motorist Property Damage	Rejected		—
Medical Payments	Rejected		—
Subtotal policy premium			\$46,367.00
State Filing Fee			70.00
PCAA Administration Fee			150.00
State Surplus Lines Tax			2,248.80
Total 12 month policy premium and fees			\$48,835.80

Rated drivers

1. Carlton Washington
2. WILLIE ATKINS

Auto coverage schedule

1. **2001 MACK 600**
VIN: **1M1AA08X11W024096** Garaging Zip Code: 71032 Radius: 100 miles
Personal use: N Body type: Dump Truck

Liability Premium	Liability Premium	UM/UIM Premium	Auto Total
	\$7708	\$1262	\$8,970

2. **2004 MACK 600**

VIN: **1M1AE06Y34N020531** Garaging Zip Code: 71032 Radius: 100 miles
Personal use: N Body type: Dump Truck

Liability Premium	Liability Premium	UM/UIM Premium	Auto Total
	\$18002	\$1262	\$19,264

3. **1999 KENWORTH CONSTRUCTION**

VIN: **3WKDDU9X7XF821266** Garaging Zip Code: 71032 Radius: 100 miles
Personal use: N Body type: Dump Truck

Liability Premium	Liability Premium	UM/UIM Premium	Auto Total
	\$16871	\$1262	\$18,133

Premium discount

Policy

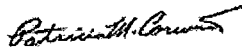
974145913

Electronic Funds Transfer

Financial Security Requirement

If you do not keep your liability insurance in force during the entire registration period, your registering privileges will be subject to revocation. By law your insurance carrier is required to report specific termination information to the Commissioner of the Department of Public Safety and Corrections.

Company officers



Secretary

WNW TRANSPORT LLC
8810 MAPLE RAPIDS LANE
HUMBLE, TX 77338

Underwritten by:
Progressive County Mutual Ins Co
November 29, 2023
Policy Period: Nov 29, 2023 - Nov 29, 2024
Page 1 of 4
Customer Phone number: 1- - -

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive County Mutual Ins Co, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through agent.progressive.com, your customized website. Claims service is available 24 hours a day, 7 days a week.

Policy information

Business: Bulk Water Hauler

Quote for 12 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$443,764.00
Paid in full discount	-66537.00
Policy premium if paid in full	\$377,227.00

Payment plans

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$5.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 20.0% Down	\$421,586.00	\$84,361.20	8 payments of \$37,474.43 and 1 of \$37,474.36
6 Pay, Seasonal, 20.0% Down	\$421,586.00	\$84,361.20	5 payments of \$67,449.96
10 Payments, 25.0% Down	\$421,586.00	\$105,437.75	8 payments of \$35,132.59 and 1 of \$35,132.53
4 Pay, Seasonal, 25.0% Down	\$421,586.00	\$105,437.75	3 payments of \$105,387.75
3 Payments, 40.0% Down	\$421,586.00	\$168,667.40	2 payments of \$126,464.30
2 Payments, 50.0% Down	\$421,586.00	\$210,820.50	1 payments of \$210,770.50

Make payments by mail or at agent.progressive.com. Each payment includes a \$12.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
1 Payment	\$355,049.00	\$355,049.00	None
11 Payments, 20.0% Down	\$443,764.00	\$88,796.80	10 payments of \$35,508.72
10 Payments, 20.0% Down	\$443,764.00	\$88,796.80	9 payments of \$39,452.80
6 Pay, Seasonal, 20.0% Down	\$443,764.00	\$88,796.80	5 payments of \$71,005.44
10 Payments, 25.0% Down	\$443,764.00	\$110,982.25	9 payments of \$36,987.75
4 Pay, Seasonal, 25.0% Down	\$443,764.00	\$110,982.25	3 payments of \$110,939.25
4 Pay, Quarterly, 25.0% Down	\$443,764.00	\$110,982.25	3 payments of \$110,939.25
3 Payments, 40.0% Down	\$443,764.00	\$177,538.60	2 payments of \$133,124.70
2 Payments, 50.0% Down	\$443,764.00	\$221,909.50	1 payment of \$221,866.50

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-318-629-1905**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Rated drivers

The insured declares that no persons other than those listed in this application are expected to operate, even occasionally, the vehicle(s) described in this application.

Name	Date of Birth	Points	Additional information
CARLTON WASHINGTON	02/24/1978	0	

Outline of coverage

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle.

Description	Limits	Deductible	Premium
Liability To Others			\$402,616
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured/Underinsured Motorist	Rejected		—
Medical Payments	Rejected		—
Personal Injury Protection	\$2,500 each person		557
Comprehensive			3,455
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			14,903
See Auto Coverage Schedule	Limit of liability less deductible		
Subtotal policy premium			\$421,531
Motor Vehicle Crime Prevention Authority Fee			55
Total 12 month policy premium and fees			\$421,586

Auto coverage schedule

1. **2003 MACK 600** Stated Amount: * \$25,000 (including Permanently Attached Equip)
VIN: **1M1AA18Y03W150824** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	PIP Premium			
	\$77328	\$93			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$5,000	\$543	\$5,000	\$2623	\$80,587

2. **2010 MACK 600** Stated Amount: * \$5,000 (including Permanently Attached Equip)
VIN: **1M1AW09Y5AN009857** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	PIP Premium			
	\$77926	\$103			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$2,500	\$214	\$2,500	\$938	\$79,181


Continued

3. **2014 Mack tbd** Stated Amount: * \$25,000 (including Permanently Attached Equip)
VIN: **Not Provided** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	PIP Premium			
	\$78523	\$117			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$5,000	\$620	\$5,000	\$2798	\$82,058

4. **2015 MACK 600** Stated Amount: * \$25,000 (including Permanently Attached Equip)
VIN: **1M1AW21Y2FM051830** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	PIP Premium			
	\$78523	\$119			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$1,000	\$819	\$1,000	\$3385	\$82,846

5. **2018 Peterbilt 3999** Stated Amount: * \$60,000 (including Permanently Attached Equip)
VIN: **Not Provided** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	PIP Premium			
	\$77926	\$125			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$1,000	\$1259	\$1,000	\$5159	\$84,469

6. **2011 drup Trailer**
VIN: **1UNST4223BL093912** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium				
	\$2453				
					Auto Total
					\$2,453

7. **2007 trox Trailer**
VIN: **1T9TS40247R719687** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium				
	\$2453				
					Auto Total
					\$2,453

8. **2012 Sagev42238s485205 Trailer**
VIN: **1UNST4220CL086854** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium				
	\$2453				
					Auto Total
					\$2,453

9. **2008 trsp Trailer**
VIN: **5AGEV42238S485205** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium	Auto Total
	\$2453	\$2,453

10. **2004 dragon Trailer**
VIN: **1USNT42214L023957** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium	Auto Total
	\$125	\$125

11. **2007 vacu Trailer**
VIN: **Not Provided** Garaging Zip Code: 77338 Radius: 300 miles
Personal use: N Body type: Tank Trailer

Liability Premium	Liability Premium	Auto Total
	\$2453	\$2,453

*A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.

Premium discount

Policy

Electronic Funds Transfer

Form QUOTE (03/17)



QUOTE

6130 Line Ave
Shreveport, LA 71106
318-629-1905 Main / 1-800-804-9807 Fax
Brittany@SemonInsurance.com

INVOICE NO.
DATE
CUSTOMER ID

524115
11/29/2023
3202811

TO
WNW TRANSPORT, LLC

FOR: GENERAL LIABILITY AND UMBRELLA	PAYMENT TERMS
	DUE UPON ACCEPTANCE

DESCRIPTION	Column1	AMOUNT	TOTAL
GENERAL LIABILITY			\$2,770.67

Agency Fee

Limits

General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	Included
Personal and Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You Limit	\$100,000
Medical Expense Limit	\$5,000
Limited Sudden and Accidental Pollution Coverage Limit	\$1,000,000
Limited Sudden and Accidental Pollution Deductible	\$5,000

UMBRELLA / EXCESS	\$4,000,000	\$	2,770.67
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FINANCING OPTION \$1748.28 DOWN AND 10 INSTALLMENTS OF \$412.67

Electronic Invoice Payment Available via E-Check and Credit Card. **\$5,541.34**

*25% Minimum Earned Premium for early cancellations.

* Each policy has a fully earned non-refundable agency fee included in pricing.

WNW TRANSPORT LLC

Standard safe operating practices for truck drivers

1. Personal Protective Equipment:

- Hard hat and FRC clothing to be worn whenever driver is on dispatch.
- Safety boots in good condition, properly laced, must always be worn. Worn- out soles and heels could lead to slip and falls.
- Eye protection will be worn where there is danger of falling or flying debris from equipment or loads, especially in windy conditions.
- Hand protection will be worn when handling hoses or any other material where there is danger of cuts or puncture injury.
- Hearing protection will be worn when exposed to noise levels exceeding 85dBA.

2. Mounting and Dismounting:

- Three-point contact will be used to mount and dismount equipment.

3. Inspecting and repairs:

- Trucks will be inspected when repairs are documented to ensure that the unit is ready to be dispatched.
- When working under or around trucks for inspections or repairs, the truck must be locked and immobilized to make sure the truck is secured against movement.

4. Housekeeping:

- Cabs, sleepers, windows, windshields, and mirrors must always be kept clean.
- All debris must be removed from trucks and trailers.

5. Parking:

- When the truck is not on dispatch driver will be responsible for making sure truck is parked at designated staging area and will be properly locked.

6. Traveling:

- Proper gear selection must be used to maintain control. Drive according to terrain conditions. Drivers are responsible for load security.

7. Danger Zone:

- Danger zone is defined as the area around operating machines or working personnel, in which there is potential for being struck by moving equipment or objects. The danger zone may vary according to the machine or work being performed. Operators must make sure that all persons, vehicles, and equipment are clear of the danger zone before the vehicle, or its components are moved.

8. Lockout:

- Lockout procedures must be followed during mechanical service, repairs and inspections for the protection of employees and equipment.

9. Communication while assisting in mechanical repairs:

- When operators are assisting mechanics to repair the units, clear communication must be established prior to starting the tasks. The operator and the mechanic must let each other know who will be responsible for:
 - a. Starting or moving the unit
 - b. Ensuring that anyone involved is in a clear and safe position.
 - c. Directing the movement of the unit.
 - d. Ensuring that it is safe to resume working and that all guards are in place.
- The operator must have a clear understanding of what is to be done and follow the specific lockout procedures and instructions given by the mechanic responsible for performing the job.

10. Fueling:

- Shut off the engine while fueling.
- No smoking
- Be aware of any slip and fall hazards.

11. Hooking up to tractor:

- Inspect - do you have all the correct parts and are they in good condition?
- Attach - drop the coupler onto the ball mount and keep your hand on the hand wheel. Tighten the hand wheel immediately.
- Adjust - pull on the coupler to test it and push on the trailer.

12. Radio Procedures:

- Radio will not be used on location.

13. Working on top of trailers:

- Wear appropriate fall protection equipment when working on top of trailers.

14. Staging pad and well sites:

- All drivers must place an orange cone and 20lb fire extinguisher in front of their trucks and have 2-wheel cocks on drive axel.



100 Air Mile Policy

It shall be the responsibility of _____ to keep a current 30 day time sheet record of driving and on duty time. It is your responsibility to keep accurate records and submit within 13 days time sheets and log books as required by the Federal Motor Carrier Safety Administration. You as a driver must comply with the regulations as follows:

1. Operates within 100 air-mile radius of headquarters.
2. Returns to headquarters and is released from work within 12 consecutive hours.
3. At least 8 consecutive hours of duty separate each 12 hours of duty.

All time sheet entries will be checked for accuracy and false entries.

Disciplinary action if rules are not followed:

1st offense: Verbal warning

2nd offense: Written warning

3rd offense: Written warning and must attend a time sheet/log book training course

4th offense: Termination

If you as a driver do not understand or have questions about the above mentioned information, please take the necessary action and ask for clarification.

Print Name: _____ Signature: _____ Date: _____



DISTRACTED DRIVING POLICY

WNW Transport LLC

has a vital interest in maintaining a safe, healthy and efficient working environment for its employees. This includes a safe and appropriate environment while traveling on company business. Distracted driving is a serious safety risk, not only to the driver, but also to other occupants in the vehicle, other vehicles on the road and pedestrians.

In order to reduce the risks associated with distracted driving, certain conduct is prohibited while driving a company-owned motor vehicle or while driving a personal vehicle while on company business, including:

- Using cell phones (including hands-free)
- Operating laptops, tablets, portable media devices, and GPS devices
- Reading maps or any type of document, printed or electronic

Drivers must pull over safely to the side of the road or another safe location before checking messages, returning calls, text messaging, emailing, reading maps for directions, or programming/resetting GPS devices.

A violation of this policy will subject the employee to disciplinary action up to and including termination.

I acknowledge that I have received a written copy of the Distracted Driving Policy, that I fully understand the terms of this policy, that I agree to abide by these terms, and that I am willing to accept the consequences of failing to follow the policy.

Employee Signature

Date

Employee Name (printed)

WNW TRANSPORT LLC

Things to communicate.

- When you are available to start your shift.
- Arrival or Departure from jobsite and or staging pad.
- When you get loaded or unloaded.
- Load information – (BOL number, Net weight, and Ticket #)
- Breakdowns
- Accidents or incidents
- Any delays that may change delivery or pick up.
- Off time- (We must have at least a weeks' notice for requested days off.)

Maintenance

All equipment must be properly maintained according to the FMCSA/ DOT regulations.

Equipment must be kept clean and neat.

DVIR's will need to be turned in before each shift for driver to be dispatched.

Make sure all maintenance reports are turned in monthly.

Documentation

All paperwork must be filled out completely and turned in on time for billing to make sure invoicing is processed on time.

Please make sure all documentation is scanned in as PDF and emailed into dispatch.

Payroll forms will need to be filled out and turned in on time in order for payroll to be processed on time.



DRIVERS CERTIFICATION OF VIOLATIONS ANNUAL REVIEW OF DRIVING RECORD

DRIVER Requirements: Each driver shall furnish the list as required by the Motor Carrier. If the driver has not been convicted of, or forfeited bond or collateral on account of any violation which must be listed, he/she shall so certify under 49 CFR 391.27 of the Federal Motor Carrier Safety Regulations.

DRIVER CERTIFICATION of VIOLATIONS

Name of Driver:	Social Security Number:	Date of Employment:
Home Terminal (city and state)	License Number and State:	Expiration Date:

I certify that the following is a true complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months.

Date of Conviction	Offense	Location	Type of Motor Vehicle Operated

If no violations are listed above, I certify that I have not been convicted of or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Date of Certification: _____ **Driver's Signature:** _____

ANNUAL REVIEW OF DRIVING RECORD by the MOTOR CARRIER

As required by the FMCSA, 49 CFR 391.25, I have reviewed the driving record and reviewed the Certification of Violations of the above named driver and find that he/she (check one box below):

- ☐ Meets minimum requirements for safe driving
☐ Is disqualified to drive a commercial motor vehicle pursuant to 391.25

Reviewed By: _____
Name (printed) Date

Name (signature) Title

Motor Carrier: WNW Transport, LLC 136 Major Lane Grand Cane, LA 71032



Alcohol and Drug Employee's Certified Receipt

Employee Name: _____

This is to certify that I have been provided educational materials required by 382.601 and my employer's policies and procedures with respect to meeting the Part 382 requirements. The materials include detailed discussion of the following checked (X) items.

- ___ 1. The designated person to answer questions about the materials.
- ___ 2. The categories of drivers subject to Part 382.
- ___ 3. Sufficient information about the safety-sensitive functions and periods of the workday that compliance is required.
- ___ 4. Specific information concerning prohibited driver conduct.
- ___ 5. Circumstances under which a driver will be tested
- ___ 6. Test procedures, driver protections and integrity of the testing processes, and safeguarding the validity of the test.
- ___ 7. The requirement that tests are administered in accordance with Part 382.
- ___ 8. The consequences for Part 382 Subpart B violations including removal from safety-sensitive functions and Part 40, Subpart O procedures.
- ___ 9. An explanation of what will be considered a refusal to submit to a test and the consequences.
- ___ 10. The consequences for drivers found to have an alcohol concentration of 0.02 or greater but less than 0.04.
- ___ 11. Information on the affects of alcohol and controlled substances use on:
 - An individual's health
 - Work
 - Personal life
 - Signs and symptoms of a problem
 - Available methods of intervening when a problem is suspected
- ___ 12. Optional information

(Employee's Signature)

(Date)

(Authorized Representative)

(Date)



Employee Alcohol and Drug Statement

Sec. 40.25(j) As the employer, you must also ask the employee whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years. If the employee admits that he or she had a positive test or a refusal to test, you must not use the employee to perform safety-sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process. (see Sec. 40.25(b) (5) and (e)).

WNW Transport
LLC
136 Major Lane
Grand Cane, LA
71032

Employee Name: _____ Driver's License: _____

SS#: _____

The employee is required by Sec. 4025 to respond to the following question:

1. Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?

Check one: ☐ Yes ☐ No

2. If you answered yes, can you provide/obtain proof that you have successfully completed the DOT return-to duty requirements?

Check one: ☐ Yes ☐ No

I certify that the information provided on this document is true and correct.

Employee's Signature: _____ Date: _____

Witnessed By: _____ Date: _____
(Signature)



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE
February 06, 2015

PERMIT
MC-899584-P

U.S. DOT No. 2573175
W N W TRANSPORT LIMITED LIABILITY COMPANY
MANSFIELD, LA

This Permit is evidence of the carrier's authority to engage in transportation as a **contract carrier of property (except household goods)** by motor vehicle in interstate or foreign commerce.

This authority will be effective as long as the carrier maintains compliance with the requirements pertaining to insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Service must be performed under a continuing agreement with one or more persons.

Jeffrey L. Secrist, Chief
Information Technology Operations Division

NOTE: Willful and persistent noncompliance with applicable safety fitness regulations as evidenced by a DOT safety fitness rating of "Unsatisfactory" or by other indicators, could result in a proceeding requiring the holder of this certificate or permit to show cause why this authority should not be suspended or revoked.

PMO