CALIFORNIA PUBLIC UTILITIES COMMISSION

REQUEST FOR VOLUNTARY SUSPENSION OF CHARTER-PARTY AUTHORITIES

RETURN COMPLETED FORM TO: California Public Utilities Commission License Section PSG NUMBER: ____ 505 Van Ness Avenue San Francisco, CA 94102 or licensing@cpuc.ca.gov **CARRIER NAME:** The individual, corporation, LLC, LP, partnership, or other LEGAL ENTITY to which CPUC authority was issued. DO NOT show any fictitious business name (DBA) in this space. THE UNDERSIGNED REQUESTS THE SUSPENSION OF THE OPERATING AUTHORITIES CHECKED BELOW: ☐ CHARTER PARTY CLASS "A" CERTIFICATE ☐ CHARTER PARTY CLASS "P" PERMIT ☐ CHARTER PARTY CLASS "S" PERMIT ☐ CHARTER PARTY CLASS "B" CERTIFICATE ☐ CHARTER PARTY CLASS "C" CERTIFICATE ☐ CHARTER PARTY CLASS "Z" PERMIT If you have more than one operating authority, please check EVERY operating authority you want to be suspended. IMPORTANT INFORMATION ABOUT VOLUNTARY SUSPENSION FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN INVOLUNTARY REVOCATION The operating authority(ies) will be suspended from the date of receipt of this request through the expiration date of authority, or until you request reinstatement, as detailed below. During the period of suspension, it is unlawful to conduct any for-hire operations requiring operating authority. The carrier must continue to file quarterly/annual PUCTRA reports and remit the minimum quarterly/annual PUCTRA fees and respond to Commission information requests. TNCs must also continue filing quarterly reports and fees for the "TNC Access for All" program pursuant to Commission Decision 19-06-033 and respond to Commission information requests. A Change of Information Form (available at www.cpuc.ca.gov) should be filed with the Commission if your address is changed while involuntary suspension. Any suspended authority may be reinstated at any time prior to the expiration of the suspension period, provided that you: 1. File a written request for reinstatement (TL528) and equipment list (PL664); 2. File the required evidence of liability insurance coverage; 3. Are not delinquent in the payment of quarterly/annual fees. The person signing below must be the individual permit/certificate holder, or an officer, managing member, or partner of the legal entity to which the authority was issued. (Signature) (Title)

(Print Name)

(Date)