

**2023 APPLICATION FOR OF
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY**

Please complete the following form and provide the documentation requested on the attached checklist to the City Clerk' Office in a single packet.

Date: 4/4/24/2023

Legal Name of and Address of Applicant Company:

ROBE RIVER LLC dba Valdez Trolley and Tours

VALDEZ, AK 99686

Name and Address of Owner, Partners or Corporate Officers:

MAGDALENA MCCAY / JAMES MCCAY

VALDEZ, AK 99686

Insurance Carrier and Policy No.

CPPI

CPPI

UMIALIK INSURANCE COMPANY

Location of Dispatch Office or Terminal:

455 9th St. VALDEZ, Alaska 99686

Telephone No:

Number of Vehicles by Virtue of this Certificate:

4 (2 PENDING)

Are there any changes to your current routes from the previous year?

Yes No X NEW APPLICATION

If you answered yes, please describe changes:

Are there any changes to your Rate/Fare from the previous year?

Yes _____ No N/A

Number of Drivers by Virtue of this Certificate: 2 currently / ADDITIONAL PENDING

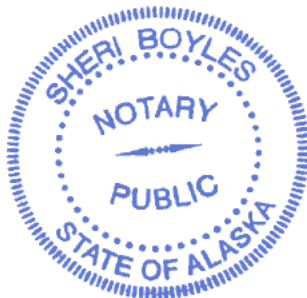
All employees operating vehicles for hire within the City of Valdez must possess a valid Chauffer's license issued by the City. ✓

Renewal Application Fee: \$100. Please visit the City Hall front office or call (907) 835-4313 to pay your fee for the current permit year. You may also submit a check payable to the City of Valdez with this application.

I, MAGDALENA MCCAY owner/agent for ROBE River LLC Tours hereby agree to maintain a written record of all dispatches of vehicles operated under the above company license; including names of all chauffeurs of such vehicles and dates and hours of their employment on each vehicle operated under such license. All such records shall be preserved by the above firm for not less than two years and shall be made available to the City of Valdez upon request. I further agree to comply with all regulations and requirements in Chapter 5.16 of the Valdez Municipal Code.

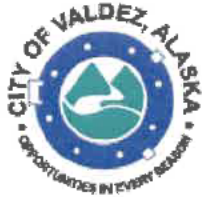

Signature of Owner/Agent

Subscribed and sworn to before me this 25 day of April, 23.



Sheri Boyles
Notary Public in and for the State of Alaska

My Commission Expires: 6/27/26



City of Valdez
212 Chenega Ave | PO Box 307
Valdez, AK 99686
(907) 835-4313
www.valdezak.gov

XBP Confirmation Number: 143262610

Transaction detail for payment to City of Valdez.				Date: 04/25/2023 - 6:48:48 PM MT	
Transaction Number: 196911378 Mastercard — XXXX-XXXX-XXXX-0247 Status: Successful					
Account #	Item	Receipt Number	Void Receipt Number	Quantity	Item Amount
001000032200	XBP Misc Payments Clearing			1	\$100.00
Notes: certificate of public convenience and necessity valdez trolley tours-magdalena mccay					

TOTAL: **\$100.00**

Billing Information
magdalena mccay
, 99686

Transaction taken by: Admin sboyles

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing
PO Box 110806, Juneau, AK 99811-0806

This is to certify that

Valdez Trolley Tours

Valdez, AK 99686

owned by

Robe River, LLC

is licensed by the department to conduct business for the period

November 2, 2022 to December 31, 2024
for the following line(s) of business:

48 - Transportation and Warehousing



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location.
It is not transferable or assignable.

Julie Sande
Commissioner



CITY OF VALDEZ 2023 BUSINESS REGISTRATION

Valdez Trolley Tours

Physical Address: 455 9th Street

Mailing Address: [REDACTED]

City: Valdez

State / Province: AK

Postal / Zip Code: 99686

Owner: Robe River LLC, Magdalena McCay

Phone: [REDACTED]

BUSINESS DESCRIPTION: Bus tours
BUSINESS TYPE:

Approval Status:

Approved

APPROVED BY:

Kate Hulen

VALID FROM: Tuesday, February 7, 2023

EXPIRES: 12/31/2023

COV Business ID: 2023-389

This license is non-transferable and is issued in compliance with the City of Valdez, AK per Valdez Municipal Code 5.04.

ISSUED BY

City of Valdez
Planning Department
212 Chenega Ave

PO Box 307
Valdez, AK 99686

planningdept@valdezak.gov
Phone: 907-834-3401



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/24/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certification does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Silva Insurance Services LLC 234 W Evergreen Ave Palmer AK 99645	CONTACT NAME: Shelby Roberts PHONE (A/C, No, Ext): (907) 746-2990 FAX (A/C, No): (907) 746-2890 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Umialik Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 40126
INSURED Robe River LLC Valdez AK 99686		

COVERAGES **CERTIFICATE NUMBER:** CL2332407692 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			05/08/2022	05/08/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			02/13/2023	05/08/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ 10,000			03/24/2023	05/08/2023	COMBINED SINGLE LIMIT EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A					E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

City of Valdez PO Box 307 Valdez AK 99686	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Shelby Roberts</i>
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Requested new form
via email

Driver #51

Name: JAMES GLENN MCCAY

DOB: [REDACTED]

Driver's License No.: [REDACTED]

Expiration Date of Chauffeur's License: [REDACTED]

Copy of Chauffeur's License Attached: YES/NO

Driver #62

Name: ALVIN MURRAY

DOB: [REDACTED]

Driver's License No.: [REDACTED]

Expiration Date of Chauffeur's License: [REDACTED]

Copy of Chauffeur's License Attached: YES/NO

Driver #73

Name: _____

DOB: _____

Driver's License No.: _____

Expiration Date of Chauffeur's License: _____

Copy of Chauffeur's License Attached: YES/NO

Driver #84

Name: _____

DOB: _____

Driver's License No.: _____

Expiration Date of Chauffeur's License: _____

Copy of Chauffeur's License Attached: YES/NO



City of
Valdez

Chauffeurs



12/31/2024 12:00:00 AM

JAMES MCCAY



City of
Valdez

Chauffeurs



12/31/2024 12:00:00 AM

ALVIN MURRAY

City of Valdez, Alaska
2023 FOR HIRE VEHICLE PERMIT

Registered Owner of Vehicle

Name: Robe River LLC dba Valdez Trolley Tours
Address: P.O. Box [REDACTED] VALDEZ, AK 99686
455 9th Street Valdez AK 99686

Owner of Certificate of Public Convenience:

Name: Robe River LLC dba Valdez Trolley Tours
Address: [REDACTED] Valdez, AK 99686

Vehicle License No: LBP 483

VIN#: [REDACTED]

Make: TRUMPETER SUAN

Model: INTERNATIONAL

Color: WHITE

Insurance Company: UMIAK INSURANCE COMP

Policy# [REDACTED]

Vehicle Inspected by: Officer Goudek # 242

Date of Inspection: 4/6/2023

Signature of Registered Owner: Chagdalee Chley, MEMBER

Signature of Holder of Certificate of Public Convenience: Chagdalee Chley

Permit issued on 4/25/2023

Authorized By: [Signature]

Bart Hinkle, Chief of Police

City of Valdez

2023 FOR HIRE VEHICLE INSPECTION

Robe River LLC dba
COMPANY: VALDEZ TROUBLE T FOR HIRE VEHICLE ID#

ADDRESS: [REDACTED] VALDEZ, TELEPHONE# [REDACTED]
AK 99686

REGISTERED OWNER OF VEHICLE: Robe River LLC dba VALDEZ TROUBLE T

VEHICLE MAKE INTERNATIONAL MODEL TRUMPETER YEAR 1998

VEHICLE LICENSE# LGP 783 VIN# [REDACTED]

INSPECTING OFFICER: 242 DATE OF INSPECTION: 4-6-23

ITEM	GOOD	FAIR	NEEDS REPAIR	REMARKS OR INSTRUCTIONS
Head Lights	✓			
Tail Lights	✓			
Brake Lights	✓			
Emergency Flashers	✓			
Back Up Lights	✓			
Turn Signals	✓			
Top "Taxi" Light	N/A			
Interior Light	✓			
Horn	✓			
Windshield Wipers	✓			
Exhaust System	✓			
Tires	✓			
Vehicle Marked	✓			
Proper Lettering	N/A			
License Plate Light	✓			
Steering	✓			
Brakes	✓			
Interior Conditions	✓			

City of Valdez, Alaska
2023 FOR HIRE VEHICLE PERMIT

Registered Owner of Vehicle

Name: Robe River LLC aka Valdez Trolley Tours
Address: PO. Box 1293 VALDEZ, AK 99686
455 9th Street VALDEZ, AK 99686

Owner of Certificate of Public Convenience:

Name: Robe River LLC aka Valdez Trolley Tours
Address: [REDACTED] VALDEZ AK 99686

Vehicle License No: KKB 153

VIN#: [REDACTED]

Make: MERCEDES

Model: SPRINTER

Color: WHITE

Insurance Company: UNIALLIK INSURANCE CORP.

Policy# [REDACTED]

Vehicle Inspected by: officer Schumate

Date of Inspection: 4/13/2023

Signature of Registered Owner: [Signature]

Signature of Holder of Certificate of Public Convenience: [Signature]

Permit issued on 4/25/2023

Authorized By: [Signature]

Bart Hinkle, Chief of Police

City of Valdez

2023 FOR HIRE VEHICLE INSPECTION

COMPANY: Robe River LLC FOR HIRE VEHICLE ID# _____
 ADDRESS: Trolley TOURS ALDEZ AK TELEPHONE# [REDACTED]
 REGISTERED OWNER OF VEHICLE: Robe River LLC dba Valdez Trolley Tours
 VEHICLE MAKE Mercedes MODEL SPRINTER YEAR 2017
 VEHICLE LICENSE# KKB 153 VIN# [REDACTED]
 INSPECTING OFFICER: Shumate DATE OF INSPECTION: 4/13/23

ITEM	GOOD	FAIR	NEEDS REPAIR	REMARKS OR INSTRUCTIONS
Head Lights	✓			
Tail Lights	✓			
Brake Lights	✓			
Emergency Flashers	✓			
Back Up Lights	✓			
Turn Signals	✓			
Top "Taxi" Light	N/A			
Interior Light	✓			
Horn	✓			
Windshield Wipers	✓			
Exhaust System	✓			
Tires	✓			
Vehicle Marked	N/A			
Proper Lettering	N/A			
License Plate Light	✓			
Steering	✓			
Brakes	✓			
Interior Conditions	✓			

AK

(STATE)

INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

COMPANY



COMMERCIAL



PERSONAL

Umialik Insurance Company

POLICY NUMBER

EFFECTIVE DATE

EXPIRATION DATE

3/24/2023

5/8/2023

YEAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

2000

Golden Eagle International

AGENCY/COMPANY ISSUING CARD

Umialik Insurance Company

725 E. Fireweed Lane STE 500

Anchorage

AB 99503

INSURED

Robe River LLC

VALDEZ

AK 99686

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

INSURANCE IDENTIFICATION CARD

AK
(STATE)

COMPANY NUMBER

COMPANY



COMMERCIAL



PERSONAL

Umialik Insurance Company

POLICY NUMBER

EFFECTIVE DATE

EXPIRATION DATE

3/24/2023

5/8/2023

YEAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

1998

Trumpeter Swar International

AGENCY/COMPANY ISSUING CARD

Umialik Insurance Company

725 E. Fireweed Lane STE 500

Anchorage

AB 99503

INSURED

Robe River LLC

VALDEZ

AK 99686

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

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1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

AK
(STATE)

INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

COMPANY



COMMERCIAL



PERSONAL

Umialik Insurance Company

POLICY NUMBER

EFFECTIVE DATE

3/24/2023

EXPIRATION DATE

5/8/2023

YEAR

1996

MAKE/MODEL

Trolley

F53

VEHICLE IDENTIFICATION NUMBER

AGENCY/COMPANY ISSUING CARD

Umialik Insurance Company

725 E. Fireweed Lane STE 500

Anchorage

AB 99503

INSURED

Robe River LLC

VALDEZ

AK 99686

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

AK
(STATE)

INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

COMPANY



COMMERCIAL



PERSONAL

Umialik Insurance Company

POLICY NUMBER

EFFECTIVE DATE

EXPIRATION DATE

3/24/2023

5/8/2023

YEAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

2017

MERCEDES

3500 PSGR VAN V

AGENCY/COMPANY ISSUING CARD

Umialik Insurance Company

725 E. Fireweed Lane STE 500

Anchorage

AK 99503

INSURED

Robe River LLC

Valdez

AK 99686

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.