

# Washington Metropolitan Area Transit Commission

## 2012 Carrier Annual Report Form

### NEW THIS YEAR:

- Annual reports can now be filed online at [www.wmatc.gov](http://www.wmatc.gov). Annual fees can also be paid online using a credit or debit card. Your username and password is required to access e-filing.
- Carriers holding U.S. Department of Transportation authority must now indicate their USDOT number. Also, carriers must indicate whether each vehicle in their fleet is equipped with a wheelchair lift or ramp.

### FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2012, must file a complete 2012 annual report and pay a \$150 annual fee on or before **January 31, 2012**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on this date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **late fee** pursuant to Regulation No. 67-03. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2012.
- Filing an annual report containing false information, or omitting information, may result in a civil forfeiture.

### 1. CARRIER:

213 | 110308 | Gunther Charters, Inc.

\*WMATC No. USDOT No. (if applicable) \*Name of Carrier (as shown on certificate of authority)

7474 Shipley Avenue | Los C | Hanover | MD | 21076-3162

\*Street Address of Principal Place of Business Apt./Suite City State Zip

P.O. Box 348 | | Hanover | MD | 21076-0348

Mailing Address (if different from street address) Apt./Suite City State Zip

(410) 761-3757 | | (410) 766-5477 | laurie.gunther@yahoo.com

\*Telephone Other Telephone Fax E-mail

### 2. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Mr. Martin E. Gunther | President

\*Name \*Title

(410) 761-3757 | | (410) 766-5477 | SAME AS ABOVE

\*Telephone Other Telephone Fax E-mail

### 3. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

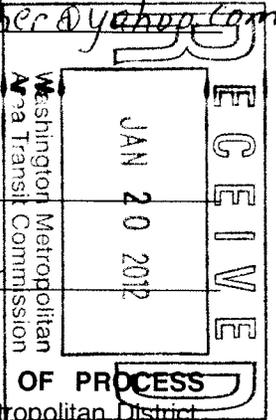
\*Complete section 3 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria, Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see [www.wmatc.gov](http://www.wmatc.gov).

Jeremy Kahn, Esquire | (202) 887-0037

Name of Registered Agent for Service of Process Telephone E-mail

1726 M Street, N.W., #702 | | Washington | DC | 20036-4502

Agent Address (must be inside Metropolitan District) Apt./Suite City State Zip



4. **\*CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

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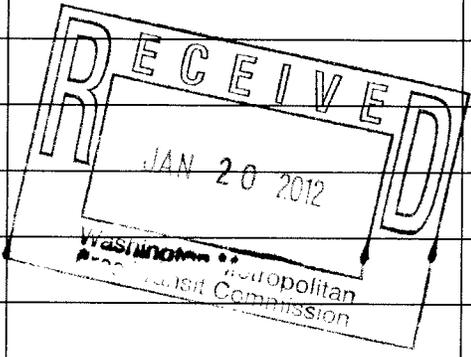
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5. **\*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** Choose one, and **only one**, of the following three options: (1) list your vehicles below; (2) make any necessary corrections on the enclosed vehicle list, check the box indicating all information is accurate, and return the list with both pages of this form; or (3) attach your own vehicle list to both pages of this form. Include all required information.

Fleet No. If applicable	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity	*Wheelchair Lift or Ramp Yes/No
			SEE LIST ATTACHED				



6. **\*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

LAURIE GUNTER  
\*Name (Type or Print)

Laurie Gunter  
\*Signature

OWNER / VICE PRESIDENT  
\*Title

1/19/12  
\*Date

# Washington Metropolitan Area Transit Commission

## 2012 Annual Report: Revenue Vehicle List

Name: Gunther Charters, Inc.

Trade Name:

This list is provided for your convenience and may be used instead of creating your own vehicle list. If you use this list, make any necessary corrections, check the box indicating all information is accurate, and return this list with both pages of your annual report form. Do not forget to indicate whether each vehicle is equipped with a wheelchair lift or ramp. Be sure to sign page 2 of your annual report.

Check this box if all information on this list, including any corrections, is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity	*Wheelchair Lift or Ramp Y/N
2	2009	Van Hool	YE2TC28B392044684	007P09	MD	57	YES
551	2008	Van Hool	YE2TC18B482044671	002P37	MD	57	
552	2008	Van Hool	YE2TC18B682044672	004P87	MD	57	
553	2008	Van Hool	YE2TC18B282044348	007P07	MD	57	
554	2008	Van Hool	YE2TC18B882044673	007P06	MD	57	
555	2008	Van Hool	YE2TC18BX82044674	007P13	MD	57	
556	2009	Van Hool	YE2TC18BX92044675	006P62	MD	57	
557	2009	Van Hool	YE2TC18B192044676	006P63	MD	57	
558	2009	Van Hool	YE2TC19B392044677	007P10	MD	57	
559	2009	Van Hool	YE2TC18B592044678	007P11	MD	57	
560	2009	Van Hool	YE2TC18B792044679	007P12	MD	57	
561	2009	Van Hool	YE2TC18B392044680	007P08	MD	57	
562	2009	Van Hool	YE2TC18B592044681	005P87	MD	57	
566	2000	Van Hool	YE2TC13B0Y2043461	015P39	MD	57	
567	2000	Van Hool	YE2TC13B5Y2043438	015P40	MD	57	
568	2000	Van Hool	YE2TC13B2Y2043462	015P41	MD	57	

