WA State Department of Utilities & Transportation Commission 10-15-2014 C/O Gregory J Kopta
Administrative Law Judge
PO Box 47250
Olympia, Wa 98504-7250

Re: Cite # TV-143300

Mr. Kopta,

I have received your demand notice from service on 10-5-2014. And addressed to me and my small owner operated hauling business working under trade names of Johnson's Hauling LLC DBA Johnson's Hauling & Moving, Spokane Transport, Spokane Mover, and Spokane Delivery. UBI # 603-091-319. I have attached my business license as well as my insurance which allows me to do hauling and transporting amongst other operations. I have ceased all operations in moving household goods, and paid my fee to become a licensed house hold goods mover. That # TV 143663 which I submitted on October 9 2014 which is over 8 days ago. Granted I thought it would have been done by now, but apparently this week is training for a lot of your department so my application is put on hold till the following week.

Please be advised I have no means to travel 350 miles across the State of Washington and would prefer or demand a court hearing in my community of Spokane WA., and as I believe is my right. Clearly you know I operate as a Sole operator and can occasionally if absolutely needed engage someone to assist in hauling items for customers and would be compensated under \$400.00 in any given year or would engage an employee that you will see I do not have. I am planning on transporting items within my community as directed and at that do no make enough to consider even a viable business at this point and have not made any money yet to survive. Further have asked for assistance from your officers and outside of these unreasonable accusations clearly made have received none.

In talking to Megan Banks in the compliance department, I was informed of certain things I could say in my ad which meant not moving house hold goods in my own truck, but could provide labor to move house hold goods from the customer's house to the vehicle they wanted loaded. I should be able to work through State regulation to create a small business capable of providing and income but it appears instead of assisting, your personnel would rather financially and punitively tax and fine my business out of existence. My business consists of older good vehicles that I am capable of maintaining in good operation and clearly have attempted to license appropriately for the general small debris hauling jobs and such as transporting resident customer items around the community by myself.

Please note I do not make even the money needed for a trip across the State of WA and perhaps you offer a call in option or could meet me here in Spokane. I believe your department is employing unreasonable fear tactics that are literally accomplishing under pressure upon me and regarding the welfare of my family and considering your implied

threats without offering the means to accomplish and apparently not representatively clear to my real situation as here expressed.

I respectfully request and or demand you drop this matter and or require your department personnel to properly appraise my operations for any such hearing. Further more I cannot hire any representative, so I demand this situation be relayed to the WA State Attorney General representing your offices in this matter and that I need assistance in all aspects. I look forward to your positive response to my requests or demands.

Sincerely

Cary Johnson 10-15-2014

Johnson's Hauling LLC UBI # 603 091 319

PO Box 1525

Mead, WA 99021

509-487-6683

Email: Johnson.c75@gmail.com

JOHNSON'S HAULING LLC JOHNSON'S HAULING & MOVING PO BOX 1525 HEAD WA 99021-1525

DETACH BEFORE POSTING

004065



BUSINESS LICENSE

Domestic Limited Liability Company

JOHNSON'S HAULING LLC JOHNSON'S HAULING & MOVING 3216 E EUCLID AVE SPOKANE WA 99217 6935

TAX REGISTRATION

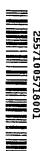
Unified Business ID #: 603 091 319

Business ID #: 1

Location: 3

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



JOHNSON'S HAULING LLC PO BOX 1525 MEAD WA 99021-1525

DETACH BEFORE POSTING

005855



BUSINESS LICENSE

Unified Business ID #: 603 091 319 Business ID #: 1

JOHNSON'S HAULING LLC PO BOX 1525 MEAD WA 99021 1525

REGISTERED TRADE NAMES: SPOKANE DELIVERY SPOKANE MOVER SPOKANE TRANSPORT

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

CRh-

Director, Department of Revenue

MESA UNDERWRITERS SPECIALTY INSURANCE COMPANY

COMMERCIAL GENERAL LIABILITY Coverage Part Declarations

This Coverage Part consists of this Declarations Form, the Common Policy Conditions, the Commercial General Liability Conditions, the Coverage Form(s), and the Coverage Endorsement(s) indicated as applicable.

	CARY JOHNSON DBA:					
Named Insured						
Policy Number	MP0046003002357			<u> </u>		
Effective Date:	05/19/2014					
LIMITO OF INCI	IDANCE		□ "X" If S	upplemental [Declarations is	attached.
LIMITS OF INSI	JKANCE Limit (Other Than Products / Completed	Oti			000,000	
	Operations)		Ψ	000,000		
Products / Completed Operations Aggregate Limit				Ψ	000,000	
Personal and Advertising Injury Limit				· · ·	000,000	
Each Occurrence Limit				\$ \$	50,000	
Damage to Premises Rented to You Limit (Any 1 Premises)				\$ \$	5,000	
Medical Expense Limit (Any 1 Person)				Ψ		
Form of Business	nt Venture □ Partnership □ Limited Liabilit	y Company □ Org	ganization (other)			
	Premises you Own, Rent or Occupy: DEGER RD, ELK, WA 99009					
'/						
3)						
•	ON & PREMIUM PROVIDED					
CLASSIFICATI	<u> </u>		Rat			Premium
Code No.	Classification Description	Premium Basis / Exposure*	Premises / Operations	Products / Comp Ops	Premises / Operations	Products / Comp Ops
	Excluding Auto Liability	p \$17,800	FLAT	INCL	750MP	INCL
	completed Operations are subject to some subject to some some subject to some some some some some some some som	the General Ag			es (per \$1,000 	Gross Sales)
*Premium Basis Type	a - Area (per 1,000 Square feet of area) t - Total (per each)	m - Admissions (per 1,000 Admis	sions) u - Un	its (per Unit)	
	. 100. (20. 00. 0		_Total A	nnual Pren	nium: \$	750 MF

Forms/Endorsements Applicable

See Schedule of Forms and Endorsements