621 Woodland Square Loop SE
Lacey, WA 98503
P.O. Box 47250
Olympia, WA 98504-7250
Phone: 360-664-1222
Email: transportation@utc.wa.gov

AUTO TRANSPORTATION – ATTACHMENT A

Auto transportation Certificate of Support Statement

Auto Transportation certificate applications must include more than one signed and sworn support statement from independent members of the public who need service, or a statement by a representative of a city, county or regional transportation planning organization.

Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Sayaka Hishinuma**

Address: **411 University Street, Seattle WA 98101**

Phone Number: **206-621-1700** Email: **sayaka.hishinuma@fairmont.com**

Fax Number: **206-682-9633**

Describe the need for the requested service:

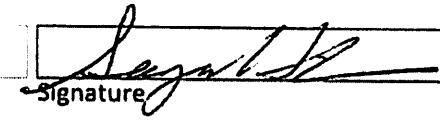
Seattle has lacked reliable airport shuttle services since Shuttle Express and Gray Line discontinued operations, leaving a gap in affordable, convenient transportation for locals and visitors alike. While Link Light Rail Line 1 exists, it often fails to meet the needs of travelers with heavy luggage or mobility challenges. A dedicated shuttle service would provide comfort, accessibility, and a crucial solution for those underserved by current options. Restoring this service isn't just convenient, it is essential for a more inclusive and seamless travel experience.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable): **n/a**

Explain why the current company is not providing adequate service:

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Sayaka Hishinuma — Print Name


Signature

05/14/2025 — Date

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Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Giovonni Love - W Seattle**

Address: **1112 4th Ave, Seattle, Wa, 98101**

Phone Number: **2062646000** Email: **Giovonni.Love@whotels.com**

Fax Number: **N/A**

Describe the need for the requested service:

Hotel guests need an affordable, reliable transportation service to and from the airport. With variable pricing through third party services this shuttle service would provide guests with consistent, dependable service to hotel guests.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable):

Explain why the current company is not providing adequate service:

no current shuttle service to the airport

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Giovonni Love		**05/14/2025**
Print Name	Signature	Date

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Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Alex Kazmierczak**

Address: **808 Howell St. Seattle, WA 98101**

Phone Number: **206-859-6767** Email: **alex.kazmierczak@hyatt.com**

Fax Number:

Describe the need for the requested service:

Since the Pandemic, there have not been enough shuttle companies providing transportation alternatives for travelers looking for a more economical and convenient way to get to and from the Airport.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable): **Capitol Airporter**

Explain why the current company is not providing adequate service:

Just like with any industry there needs to be multiple options for customers to foster better quality and diversity in the transportation market.

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Alex Kazmierczak		**05/19/2025**
Print Name	Signature	Date

UTC
Washington Utilities and Transportation Commission

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Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Thompson Seattle Hotel**

Address: **110 Stewart St. Seattle, WA 98101**

Phone Number: **2066234600** Email: **chuck.watts@thompsonhotels.com**

Fax Number: **N/A**

Describe the need for the requested service:

Ever since the Grayline of Seattle Downtown Airporter and the Shuttle Express Shared Van Service stopped operating their door to door service here in Seattle, budget conscious guests has had to walk with their luggage to the nearest Sound Transit Link Light Rail station. At $29 per person, Lakeside Transportation would be able to fill the need for affordable door to door scheduled service to SeaTac Airport.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable):

Explain why the current company is not providing adequate service:

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Chuck Watts	Chuck Watts	**05/14/2025**
Print Name	Signature	Date

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Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Ted Milanio, Westin Hotel Concierge**

Address: **1900 5th Avenue, Seattle, WA 98101**

Phone Number: **206-728-1000** Email: **ted.milanio@westin.com**

Fax Number:

Describe the need for the requested service:

For over 30 years at this hotel, it has been difficult getting reliable shuttle service to and from our Seatac Airport. I have used Lakeside Transportation for all of my transports and found them to be reliable, efficient, and very accommodating to all of my guest. I highly recommend Lakeside to operate shuttle service between the Westin and Seatac Airport.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable): **None**

Explain why the current company is not providing adequate service:

N/A

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Ted Milanio	Ted Milanio	**05/19/2025**
Print Name	Signature	Date

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Applicant Name: **Lakeside Transportation**

Customer Sworn Statement Relating to the Need for Service:

Customer Name: **Yasin Dilsebo**

Address: **6824 Lower Ridge. Road Everett, WA 98203**

Phone Number: **2064223822** Email: **yasindarmulo@gmail.com**

Fax Number:

Describe the need for the requested service:

The number of passengers in Seattle relying on public transport is ever increasing. The service to and from the SeaTac Airport will be an affordable and tailored service that puts passengers deman on top in addition to contributing to the well-being of environment in reducing carbon emissions.

If there is an existing company providing this service in the territory, please list the existing company's name (if applicable): **None**

Explain why the current company is not providing adequate service:

I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Yasmine Dilsebo		**05/15/2025**
Print Name	Signature	Date