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

Addendum to Application

Docket Company

This is to document completion of missing or incomplete items in the initial application.



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Section 2 - APPLICATION QUESTIONNAIRE

	Section 2 - All Electron Questionnaine
1.	Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:
2.	Briefly describe your experience in the transportation/household goods moving industry:
3.	Do you currently hold, or have you ever held, a Household Goods permit in Washington? No Yes If yes, please indicate your permit number:
4.	Have you ever applied for and been denied a Household Goods permit in Washington? No Yes If yes, please explain:
5.	Do you currently operate interstate? No Yes If yes, please indicate your MC#:
6.	If you have interstate authority, have you registered for Unified Carrier Registration? No Yes
7.	Do you operate interstate as an agent of another company? No Yes If yes, what is the name of the company?
8.	Have you completed commission-sponsored training? No Yes If "yes" date:
9.	Will you be employing CDL drivers? No Yes If "yes", you must attach evidence of enrollment in a drug and alcohol testing program.
	lease answer the following questions completely. If there are multiple persons listed in this application rith legal proceedings or criminal convictions to declare, provide documentation on a separate attachment.
10. Does any person named in this application have, or has ever had a business-related legal proceeding against you in Washington state, or in any other state? No Yes If "yes" please list below*:	
	Type of Legal Proceeding Date State
*at	tach additional pages if necessary

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