



Mensing

Completed Activity Report Motor Carrier Safety

Upload? Yes No

1. Investigator(s): John Foster 2. Assignment No.: 111219

3. Current Date: October 27, 2011 4. Date of Activity: October 26, 2011

5. Carrier Name: Motivated Movers Inc.

6. Permit: THG64254 7. If new entrant, date of temporary authority April 21, 2011

8. MOTCAR No.: 5225 9. Carrier is: Intrastate Only

Interstate Only

10. Industry Code: 207 Both Intra and Interstate

11. DOT No.: 2142405 12. MC No.: _____

13. **Destination Check**
 Attached is a copy of the Destination Check Safety Plan.

- Number of buses inspected: # of 9-15 passenger _____ # of 16+ passenger _____
- Number of inspections: Level 1 _____ Level 2 _____ Level 3 _____ Level 5 _____ Level 7 _____
- Describe any special emphasis placed on the destination check and the results:

- What might we do differently to increase our success at the next destination check:

14. **Safety Complaint**
 Attach a copy of the Individual Safety Complaint Plan.

- What activity did staff complete for this safety complaint:
 - Compliance review
 - Technical assistance
 - Number of vehicle inspections: Level 1 _____ Level 2 _____ Level 5 _____ Level 7 _____
 - Unannounced terminal visit
 - Other (please explain): _____

15. **New Entrant – Charter, Auto Transportation**

- Is this carrier referred by FMCSA, operating intra and interstate: Yes No
- Is this carrier based in another state, requesting intrastate authority: Yes No
- Is this carrier based in Washington, requesting intrastate authority: Yes No
- Did staff complete the following:
 - ◆ Inspect all vehicles between three and nine months? Yes No
 - Number of vehicle inspections: Level 1 _____ Level 2 _____ Level 5 _____ Level 7 _____
 - ◆ Conduct a CR/SA between three and nine months? Yes No CR SA

16. **New Entrant– HHG**

- Is this carrier referred by FMCSA, operating intra and interstate: Yes No
- Is this carrier based in another state, requesting intrastate authority: Yes No
- Is this carrier based in Washington, requesting intrastate authority: Yes No
- Did staff complete the following:
 - ◆ Inspect all vehicles between three and eighteen months? Yes No
 - Number of vehicle inspections: Level 1 _____ Level 2 _____ Level 5 1 Level 7 _____
 - ◆ Conduct a CR/SA between three and eighteen months? Yes No CR SA
 - ◆ Conduct technical assistance within three months? Yes No

17. **Individual Safety Plan Only:**

Attach a copy of the Individual Carrier Safety Plan.

- What activity did staff complete for this safety complaint:
 - Compliance review
 - Technical assistance
 - Number of vehicle inspections: Level 1 _____ Level 2 _____ Level 5 _____ Level 7 _____
 - Unannounced terminal v.sit
 - Other (please explain): _____

18. **Compliance Review Data:**

- Safety Rating: Satisfactory Unsatisfactory Conditional
- Number of vehicles operated: 1
- Number of drivers operated: 1
- Total miles for prior year: 25,000
- Recordable accidents for prior year: 0
- Accident Ratio: 0%

19. Part B Violations:

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	
390		391		392	
395		396		397	

20. Vehicle Inspection Data:

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Inspections									1		
Defective Vehicles									0		
OOS Vehicles									0		
Location											
Level									5		

21. Vehicle Inspection Violations:

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Brakes											
Steering											
Lights											
Tires, wheels, rims											
Horn											
Windshield and Wipers											
Mirrors											
Emergency Equip, Exits											
Coupling Devices											
Frame											
Suspension											
Exhaust											
Other											

22. Driver Inspection Violations:

Medical Card	Medical Waiver	Hours of Service	Drivers License

23. Relevant carrier history, if any: This carrier has attended the new entrant training class and has also received extensive technical assistance.

24. Findings: Satisfactory rating. No defects noted. Forward to licensing for further action.

25. Recommended Action:

No further action.

Notify the company in writing of the findings by providing a copy of the CR, vehicle inspection report, safety audit or other similar document.

Require the company to submit a compliance plan in response to the 15-day letter requirement.

Recheck – Compliance review (Date: _____)

Revisit to recheck a specific issue (Date: _____)

Describe: _____

Send the company a compliance letter. Require a response: Yes No

Issue administrative penalties in the amount of \$

Issue a complaint.

Stop company operations.

26. Is this carrier considered a high risk carrier as a result of this activity?

Carrier accident ratio is higher than aggregate ratio.

Carrier had an out-of-service ratio 25% or higher at the last vehicle inspection.

Carrier had a defect ratio 75% or higher at the last vehicle inspection.

Carrier received more than one conditional or unsatisfactory compliance review rating in more than one of the last four compliance reviews (or less than four if four are not completed).

Other (please explain): _____

27. Additional Comments:

Investigator's signature: John Teater October 27, 2011

Initial review by: [Signature] Date: 10-28-11

Reviewer's recommendation: I agree with recommendations -
upload. Recommend permit Authority - close & file -

Final review by: D Pratt Date: 11/1/11

Reviewer's recommendation: Agree with recommendations
* OK to issue perm authority/
close & file.

Date closed: 11/15/11 By: D Pratt
CAC
cc: John Foster

Company name Motivated Innovis Assignment # 111219

Staff Assigned John Foster

WASHINGTON UTILITIES & TRANSPORTATION COMMISSION



US DOT #
2142405

Legal: MOTIVATED MOVERS INC
Operating (DBA):

MC/MX #: **State #:** THG64254 **Federal Tax ID:** 537-08-9629 (SSN)

Review Type: Compliance Review (CR) - Receipt

Scope: Principal Office **Location of Review/Audit:** Company facility in the U. S. **Territory:**

Operation Types **Interstate** **Intrastate**

Carrier: N/A Non-HM
Shipper: N/A N/A
Cargo Tank: N/A

Business: Corporation
Gross Revenue: \$72,000.00 **for year ending:** 12/31/2010

Company Physical Address:

2215 N 145th Street
Seattle, WA 98133

Contact Name: Daniel Puetz

Phone numbers: (1) 206-799-0358 (2) **Fax**

E-Mail Address:

Company Mailing Address:

2215 N 145th Street
Seattle, WA 98133

Report Summary

Report	# of Pages
Part A - General	2
Part B - Violations	1
Part B - Recommendations	1
Review/Audit Receipt Page	1
Total Pages	5

Disclaimer: By signing below, I acknowledge that I have received a copy of this review/audit and agree with the total number of pages indicated (above) for each document. My signature does not imply agreement with the findings of the review/audit, however they have been discussed in detail with me.

QUESTIONS regarding this report or the Federal Motor Carrier Safety rules may be addressed to: WUTC

ATTN: John Foster, PO Box 47250,
Olympia, WA 98504-7250
Ph. (360) 664-1238, Fax #360) 586-1150, email: jfoster@wutc.wa.gov

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Daniel Puetz **Title:** President
Name: **Title:**

Reported By: **Title:** **Code:** WA0518 **Date:** 10/26/2011

Received By: *[Signature]* **Title:** *[Signature]*



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2215 N 145th Street
Seattle, WA 98133

Contact Name: Daniel Puetz
Phone numbers: (1) 206-799-0358 (2) **Fax**
E-Mail Address:

Company Mailing Address:

2215 N 145th Street
Seattle, WA 98133

Carrier Classification

Other: Intrastate

Cargo Classification

Household Goods

Does carrier transport placardable quantities of HM? No
Is an HM Permit required? N/A

Driver Information

	Inter	Intra	Average trip leased drivers/month: 0
< 100 Miles:		1	Total Drivers: 1
>= 100 Miles:			CDL Drivers: 0

Equipment

Owned **Term Leased** **Trip Leased**

Owned **Term Leased** **Trip Leased**

Truck 1 0 0

Power units used in the U.S.: 1

Percentage of time used in the U.S.: 100





MOTIVATED MOVERS INC
U.S. DOT #: 2142405

State #: THG64254

Review Date:
10/26/2011

Part A

QUESTIONS regarding this report or the Federal Motor Carrier Safety rules may be addressed to: WUTC

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Olympia, WA 98504-7250
Ph. (360) 664-1238, Fax #360) 586-1150, email: jfoster@wutc.wa.gov

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Daniel Puetz

Title: President

Name:

Title:





MOTIVATED MOVERS INC
U.S. DOT #: 2142405

State #: THG64254

Review Date:
10/26/2011

Part B Requirements and/or Recommendations

1. To receive a copy of your intrastate safety profile, contact Carolyn Caruso at 360-664-1244

2. Maintain complete driver qualification files. File must contain the drivers employment application, inquiry into driving record obtained within 30 days of employment, employment history investigation, certification of annual review of driving record, annual copy of driving record, drivers annual list of traffic convictions, certificate of road test or equivalent and current medical certificate

3. Under the Administrative Procedure Act (RCW 34.05) (Laws of 2009, ch. 358), the commission will waive any fines, civil penalties, or administrative sanctions for first-time paperwork violations by a small business, with certain exceptions. One of those exceptions provides that any violation of a substantially similar paperwork requirement (as described in Part B on this form) may result in the imposition of a fine, civil penalty or other administrative sanction. The company will not be entitled to a second waiver of penalties for first-time paperwork violations.





MOTIVATED MOVERS INC
 U.S. DOT #: 2142405

State #: THG64254

Review Date:
 10/26/2011

Part B Violations

Safety Fitness Rating Information:

Total Miles Operated 25,000
 Recordable Accidents 0
 Recordable Accidents/Million Miles 0.00

OOS Vehicle (CR): 0
 Number of Vehicle Inspected (CR): 1
 OOS Vehicle (MCMIS): 0
 Number of Vehicles Inspected (MCMIS): 0

Your proposed safety rating is :

SATISFACTORY

Rating Factors		Acute	Critical
Factor 1:	S	0	0
Factor 2:	S	0	0
Factor 3:	S	0	0
Factor 4:	S	0	0
Factor 5:	N	0	0
Factor 6:	S	-	-





MOTIVATED MOVERS INC
U.S. DOT #: 2142405

State #: THG64254

Review Date:
10/26/2011

Part C

Reason for Review: Compliance Review
Planned Action: Compliance Monitoring

Parts Reviewed Certification:

325	382	383	387	390	391	392	393	395	396	397	398	399	171	172	173	177	178	180
			✓	✓	✓	✓	✓	✓	✓									

Prior Reviews

Prior Prosecutions

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Not Applicable

Corporate Contact: Daniel Puetz
Corporate Contact Title: President

Special Study Information:

Remarks:

Mr. Daniel Puetz, President, was contacted at the carrier's terminal / residence located at 2215 N. 145th St. Seattle, WA 98133 on October 26, 2011 for the purpose of conducting this review.

INVESTIGATIVE REPORT RECEIVED BY:

Daniel Puetz
President
Motivated Movers Inc.
October 26, 2011

REASON FOR INVESTIGATION:

Washington intrastate household goods new entrant.

SCOPE OF INVESTIGATION:

Complete intrastate review

CARRIER OPERATION DESCRIPTION:

This carrier is an intrastate household goods carrier and currently operates one straight truck and employs one non- CDL driver.

Mr. Puetz stated gross operating revenue of \$72,000.00 for the last fiscal year ending on 12/31/2010. UTC records indicate that Mr. Puetz owns 100% of this company. Mr. Puetz is responsible for all safety management

PRE-INVESTIGATION:

Mr. Puetz attended the UTC Household Goods New Entrant training class on July 12, 2011 and received extensive technical assistance on September 14, 2011.

The carrier was requested to produce the following information at least 48 hours before this compliance review was scheduled:

- * Financial responsibility
- * Crash information





MOTIVATED MOVERS INC
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Review Date:
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Part C

- * Driver qualification files
- * Hours of service records
- * Inspection, repair and maintenance records including annual (periodic) inspections
- * Controlled substance and alcohol testing records, if applicable
- * Commercial driver's license information, if applicable

CDLIS (DRIVER LICENSE) CHECK:
Washington State Dept. of Licensing used to verify driver's license.

INVESTIGATION:
The company maintains supporting documents consisting of bills of lading, daily trip records, roadside inspection reports, and other data. Mr. Puetz is responsible for all documents and records. All documents are located at the carrier's principal place of business. Files are maintained by driver, trip or date depending upon the type of record.

In conducting this compliance review I examined records pertaining to CFR 49, Parts 387, 390, 391, 392, 393, 395, and 396 as adopted by the UTC in WAC 480-30-999.

This review found the carrier to be in compliance with all UTC safety regulations at this time. Safety rating is satisfactory.

The carrier is insured with American Progressive Insurance Co. for \$1,000,000.00 under policy 07892305-0.

Upload Authorized:	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Authorized by:	<i>[Signature]</i>	Date: 10/27/11
Uploaded:	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Verified by:		Failure Code:
		Date:



DRIVER/VEHICLE EXAMINATION REPORT

Aspen 2.13.2.4

Washington State Patrol
P.O. Box 42614
Olympia, WA 98504-2614
Phone (360) 596-3819
Fax (360) 596-3828

Report Number: WAU003000202
Inspection Date: 10/26/2011
Start: 8:48:00 AM PT End: 9:00:00 AM PT
Inspection Level: V - Terminal
HM Inspection Type: None

MOTIVATED MOVERS
2215 N 145TH ST
SEATTLE, WA 98133
USDOT#: 02142405
MC/MX#:
State#:

Phone#: (206)799-0358
Fax#:

Driver: _____ State: _____
License#: _____
Date of Birth: _____
CoDriver: _____
License#: _____ State: _____
Date of Birth: _____

Location: SEATTLE
Highway: N 145 STREET
County: KING, WA

MilePost: _____ Shipper: _____
Origin: SEATTLE, WA Bill of Lading: _____
Destination: SEATTLE, WA Cargo: _____

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	CVSA #	CVSA Issued #	OOS Sticker
1	TR	FORD	1994	WA	B96420C		1FDKE37M9RHA41693	14,000		15852226	

BRAKE ADJUSTMENTS

Axle #	1	2
Right	N/A	N/A
Left	N/A	N/A
Chamber	HYDR	HYDR

VIOLATIONS: No Violations Were Discovered.

HazMat: No HM Transported.

Placard: No **Cargo Tank:**

Special Checks: No Data for Special Checks.

Report Prepared By:
FOSTER, J

Badge #:
J518

Copy Received By:

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X John Foster

X Carol [Signature]



02142405 WA WAU003000202

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2215 N 145TH ST
SEATTLE, WA 98133

USDOT#: 02142405

MC/MX#:

State#:

Location: SEATTLE

Highway: N 145 STREET

County: KING, WA

Phone#: (206)799-C358

Fax#:

MilePost:

Origin: SEATTLE, WA

Destination: SEATTLE, WA

Driver:

License#:

Date of Birth:

CoDriver:

License#:

Date of Birth:

Shipper:

Bill of Lading:

Cargo:

State:

State:

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate #	Equipment ID	VIN	GVWR	CVSA #	CVSA Issued #	OOS Sticker
1	TR	FORD	1994	WA	B96420C		1FDKE37M9RHA41693	14,000		15852226	

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Badge #:
J518

Copy Received By:

Page 1 of 1

X John Foster

X [Signature]



02142405 WA WAU003000202