

**WASHINGTON UTILITIES AND TRANSPORTATION
COMMISSION**

**POST-AUDIT REVIEW OF
THE BUSINESS PRACTICES OF**

**CAVLOGIX CORPORATION
D/B/A TEMPSTORE MOVING COMPANY**

**Prepared by:
Betty Young
Compliance Specialist
Business Practices Investigations Section
Safety & Consumer Protection Division
November 2005**

TABLE OF CONTENTS

Section	Page
Purpose, Scope, and Authority	3
Post-Audit Review Summary.....	4
Background.....	9
General Business Practices.....	10
Estimates	
Format.....	11
Completion.....	14
Bills of Lading	
Completion.....	17
Rates & Charges – Hourly-Rated Moves.....	20
Rates & Charges – Mileage-Rated Moves.....	26
Additional Technical Assistance – Bills of Lading.....	29
Summary of Possible Penalties	31
Appendices	33

PURPOSE, SCOPE, AND AUTHORITY

Purpose

The purpose of this post-audit review is to evaluate company records submitted to the Washington Utilities and Transportation Commission (Commission) by Cavlogix Corporation, d/b/a TempStore Moving Company (TempStore). Staff used this information to evaluate the company's business practices after the 2004 audit, to determine if previous areas of non-compliance have been corrected, and to ensure that current practices comply with Commission laws and rules relating to household goods carriers.

Scope

The scope of the post-audit review includes TempStore's business practices as reflected in records requested from the company and records on file with the Commission. Staff reviewed TempStore's records and evaluated the company's business practices for compliance with the household goods carrier rules.

Authority

Staff undertakes this investigation under the authority of the Revised Code of Washington (RCW) 80.01.040(3). In addition, RCW 80.04.070 makes it clear that the Commission is authorized to conduct such an investigation.¹

¹ See Appendix A for the text of all pertinent laws, rules, and the tariff.

POST-AUDIT REVIEW SUMMARY

In September 2004, Business Practices Investigations Staff began an audit of TempStore's business practices. After conducting the audit, Staff found TempStore did not comply with a number of state laws, Commission rules, or tariff requirements. Staff outlined each area of non-compliance in its investigation report.

At the time, Staff recommended the Commission take no formal action to sanction the company. Instead, Staff required TempStore to submit a compliance plan indicating how the company planned to change its practices to comply with applicable laws, rules and tariff requirements. Staff advised TempStore in the audit report that if, in the future, the company's efforts to failed to show ongoing compliance, Staff would likely come before the Commission and ask that it take enforcement action.

The post-audit review of TempStore's records indicates that the company is still not in compliance with the following Commission rules and tariff requirements.

- WAC 480-15-490(5), which requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff.
- WAC 480-15-650(2)(d), which requires that the complete physical address of the origin, destination, and any intermediate stops of the proposed shipment, be listed on the written estimate.
- WAC 480-15-650(2)(e), which requires that the total mileage between the origin and destination, including any intermediate stops, be listed on the written estimate.
- WAC 480-15-650(2)(i), which requires the estimated cubic footage for each article be included in the inventory for the written estimate.
- WAC 480-15-650(3), which requires that a customer sign the written estimate.
- WAC 480-15-730, which requires carriers to use the bill of lading format shown in the published tariff.
- WAC 480-15-740, which requires the company to fill out the bill of lading listing specific information necessary to bill the customer the correct rates and charges.
- WAC 480-15-740(3), which requires the exact address at which the shipment, or any part of that shipment, was loaded or unloaded be listed on the bill of lading.
- Tariff 15-A, Item 85(4), which requires written estimates to show each applicable rate and charge that will be used to determine the total transportation charge.
- Tariff 15-A, Item 85(7)(e)(x), which requires a remarks section on the written estimate to be used for special instructions or agreements between the carrier and the customer.

- Tariff 15-A, Item 95(1)(b), which requires that carriers use a bill of lading that contains all of the information required in Item 95.
- Tariff 15-A, Item 95(2)(c), which requires the exact name, address, and telephone number of the consignee (i.e., the person accepting the goods at the delivery).
- Tariff 15-A, Item 95(2)(d), which requires the exact location of the origin pickup point, any split pickups, stops to partially load or unload, and the final destination point of the shipment be listed on the bill of lading.
- Tariff 15-A, Item 95(2)(g), which requires a declaration of the type of estimate (binding or non-binding) under which the shipment is moving on the bill of lading.
- Tariff 15-A, Item 100, which requires the carrier to ensure, if the customer has requested storage in transit or permanent storage, that the customer specifically initials the type of storage on the bill of lading. The carrier and the warehouse are also required to maintain an inventory on any shipment placed in storage.
- Tariff 15-A, Item 100(1)(B), which lists charges for storage-in-transit.
- Tariff 15-A, Item 225, which lists fees to be added to the customer's total charge for new or used containers for hourly-rated moves.
- Tariff 15-A, Item 230(4), which requires that on hourly-rated moves, time must be recorded to the nearest increment of 15 minutes, requires the carrier's employees to record breaks and interruptions, and requires that the customer not be charged for those breaks and/or interruptions.

Staff is unable to determine compliance with the following laws, rules and tariff items, as Advance Relocation was unable to provide documentation to substantiate compliance.

- Tariff 15-A, Item 160, which lists additional charges to be added to all other applicable rates and charges on a bill of lading if goods must be carried more than 75 feet between the carrier's vehicle and the door of the individual living unit.
- Tariff 15-A, Item 175(a), which requires the carrier to pass through to the customer the actual cost of ferry fares. A copy of the fare receipt must be attached to the bill of lading provided to the customer and the carrier must retain a duplicate copy in its files.
- Tariff 15-A, Item 175(c), which requires the carrier to record on the bill of lading the exact time its vehicle and employees are aboard a commercial ferry or are waiting in line to board the ferry and requires the carrier to bill the customer appropriately for this time.

In addition, documents submitted for the post-audit review indicate that Advance Relocation is not complying with several other tariff requirements. Staff outlined these

items in this report and offered technical assistance to Advance Relocation on each of the following.

- Tariff 15-A, Item 90(5), which requires that a carrier not load the customer's goods until such time as the customer selects a valuation option and makes the appropriate notation on the bill of lading.
- WAC 480-15-740(8), which requires that on any shipments where the customer did not receive a written estimate, the carrier must make a notation on the bill of lading that the customer was given a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer." The customer must initial on or near the notation on the bill, acknowledging receipt of the information.
- Tariff 15-A, Item 95(2)(o), which requires a notation that the customer was provided a copy of the "Your Rights and Responsibilities as a Moving Company Customer" brochure or that the customer refused a copy when it was offered.
- Tariff 15-A, Item 95(2)(p), which requires that the method of payment be shown on the bill of lading. The customer must indicate his or her choice of payment type by initialing that choice on the bill of lading. This ensures that both the customer and the company understand how the customer intends to pay for the move prior to the beginning of a move.
- Item 200 states that mileage rates apply on shipments moving more than 35 miles and rates are based on loaded distance.

Staff's initial audit gave TempStore clear and comprehensive technical assistance to comply with state law and Commission rules. Staff recommends that where TempStore continues to violate the same rules identified in the audit, the Commission assess a penalty for each violation.

Staff finds that the following penalties could be assessed against TempStore for the following violations:

Estimates - Format

1. Staff finds one violation of Tariff 15-A, Item 85(7)(e)(x), for TempStore's failure to revise the non-binding estimate form to include the required section for remarks from January 31 through September 30, 2005, subject to a \$100.00 penalty.

Estimates - Completion

2. Staff finds two violations of WAC 480-15-650(2)(d), for TempStore's failure to list the complete physical address of the origin and the destination of the move on a written estimate between May 1 and August 20, 2005, subject to a \$200.00 penalty.

3. Staff finds one violation of WAC 480-15-650(2)(e), for TempStore's failure to include the total mileage on a written estimate between May 1 and August 20, 2005, subject to a \$100.00 penalty.
4. Staff finds one violation of WAC 480-15-650(2)(i), for TempStore's failure to list the estimated cubic footage of each article on an inventory between May 1 and August 20, 2005, subject to a \$100.00 penalty.
5. Staff finds one violation of WAC 480-15-650(3), for TempStore's failure to obtain the customer's signature on a written estimate between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Bills of Lading – Completion

6. Staff finds one violation of WAC 480-15-730 and Tariff Item 95(1)(b), for TempStore's driver's failure to sign the bill of lading indicating receipt of the customer's goods between May 1 and August 20, 2005, subject to a \$100.00 penalty.
7. Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(c), for TempStore's failure to list the consignee's name on three bills of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.
8. Staff finds four violations of WAC 480-15-490(5) and Tariff 15-A, Item 100, for TempStore's failure to include four required items on an SIT inventory between May 1 and August 20, 2005, subject to a \$400.00 penalty.

Bills of Lading – Rates & Charges – Hourly-Rated Moves

9. Staff finds three violations of WAC 480-15-740(3) and Tariff 15-A, Item 95(2)(d), for TempStore's failure to list the exact address at which the shipment, or any part of that shipment, was loaded or unloaded on three bills of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.
10. Staff finds eight violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(g), for TempStore's failure to ensure that the customer has properly initialed the type of estimate (binding or non-binding) under which the shipment is moving on eight bills of lading between May 1 and August 20, 2005, subject to an \$800.00 penalty.
11. Staff finds one violation of WAC 480-15-490(5) and Tariff 15-A, Item 100(1)(B), for TempStore's failure to charge correct tariff rates for SIT on one bill of lading between May 1 and August 20, 2005, subject to a \$100 penalty.
12. Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 225, for TempStore's failure to only charge fees for new or used containers as listed in the tariff on one bill of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.

13. Staff finds one violation of WAC 480-15-490(5) and Tariff Item 230(4), for TempStore charging a customer for a lunch break on one bill of lading between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Bills of Lading – Rates & Charges – Mileage-Rated Moves

14. Staff finds one violation of WAC 480-15-740, for TempStore's failure to list specific information necessary to bill the customer the correct rates and charges on a bill of lading between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Total possible penalties = \$3,100.00
--

BACKGROUND

Cavlogix Corporation, d/b/a TempStore Moving Company (TempStore), was granted temporary household goods carrier authority on June 5, 2002. The company was issued permanent authority on February 20, 2003. TempStore is headquartered in Seattle, Washington. For 2004, TempStore reported gross intrastate operating revenues of approximately \$123,000.

In September 2004, Business Practices Investigations Staff began an audit of TempStore's business practices. After conducting the audit, Staff found TempStore did not comply with a number of state laws, Commission rules, or tariff requirements. Staff outlined each area of non-compliance in its investigation report.

In January 2005, Staff provided TempStore with an audit report identifying specific areas of non-compliance with Commission rules, along with recommendations for coming into compliance in each area. In response, TempStore provided a compliance plan explaining what actions the company intended to take, including an estimated completion date, to come into compliance with each issue identified.²

In August 2005, the Commission began a post-audit review of TempStore's records to ensure that the company was following its compliance plan. The Commission sent a data request to the company on August 17, 2005, requesting records for all intra-state residential moves conducted during May 2005.³ TempStore responded on September 12, 2005, with the requested documents.⁴ Staff requested additional documents by e-mail on September 22, 2005. TempStore provided the documents on September 30, 2005.⁵

Staff reviewed TempStore's compliance plan, documents received from the company in response to Staff's data request, and documents on file with the Commission. The following results indicate TempStore's post-audit compliance status with Commission statutes and rules.

² See Appendix B.

³ See Appendix C.

⁴ See Appendix D.

⁵ See Appendix E.

GENERAL BUSINESS PRACTICES

Advertising and Correspondence

RCW 81.80.357 and WAC 480-15-610 require a carrier to list its permit number in every means of advertisement and correspondence showing the carrier's name or address.

2004 Audit Recommendation

TempStore must list its permit number in every means of advertisement and correspondence showing the carrier's name or address.

Compliance Plan

In its compliance plan, TempStore stated, "TempStore Moving is in the process of changing it's Letter Head, Business Card, and any other forms of advertisements the company may have, to include our Household Goods permit number HG 60620."⁶ (*sic*)

Post-Audit Review Findings

TempStore appears to be in compliance. Based on the information submitted by TempStore in September 2005, it appears that the company is listing its permit number in correspondence.

⁶ See Appendix B.

ESTIMATES - FORMAT

RCW 81.80.132 requires that when a carrier gives an estimate of charges for services in transporting household goods, the carrier will endeavor to accurately reflect the actual charges. WAC 480-15-650 defines when a carrier may provide an estimate, describes specific information required on a written estimate, and defines the retention period for estimates. Item 85 in Tariff 15-A describes additional information required in a written estimate.

Rates

WAC 480-15-650(2)(f) requires that the rates on which the estimated charges will be based be shown on the written estimate. Tariff 15-A, Item 85(4), requires that written estimates show each applicable rate and charge that will be used to determine the total charge.

2004 Audit Recommendation

TempStore must revise the written estimate form to include a space for the rates on which the estimated charges will be based.

Compliance Plan

In its compliance plan, TempStore stated, "We have revised our non-binding estimate form to include a space for the rates."⁷

Post-Audit Review Findings

TempStore appears to be in compliance. Based on the information submitted by TempStore in September 2005, it appears that the company revised its written estimate forms to include a space for the rates on which the estimated charges will be based.

Printed Statement

WAC 480-15-650(2)(1) requires a printed statement on the first page of a non-binding estimate as follows:

IMPORTANT NOTICE

This nonbinding estimate covers only the articles and services listed. It is not a warranty or representation that the actual charges will not exceed the amount of the estimate. If you request additional services to complete the move or add articles to the inventory attached to this estimate, the household goods mover must prepare a supplemental estimate which will change the amount of the original estimate and may change the rate on which these new charges are based.

⁷ See Appendix B.

Household goods carriers are required by law to collect transportation and other incidental charges computed on the basis of rates shown in their lawfully published tariffs, except as provided below:

- (1) A household goods carrier may not charge more than twenty-five percent more than its written nonbinding estimate for time charges for a local hourly rated move nor can the household goods carrier charge more than fifteen percent more than the written nonbinding estimate for accessorial and other services not related to time, unless the household goods carrier prepares and the shipper signs a supplemental estimate.
- (2) A household goods carrier may not charge more than fifteen percent above your written nonbinding estimate for a long-distance-rated move, unless the household goods carrier prepares and the customer signs a supplemental estimate.

2004 Audit Recommendation

TempStore must revise the written non-binding estimate form to include the required statement outlined in WAC 480-15-650(2)(1).

Compliance Plan

In its compliance plan, TempStore stated, "We have revised our non-binding estimate form to include the required statement outlined in WAC 480-15-650(2)(1)."⁸

Post-Audit Review Findings

TempStore appears to be in compliance. Based on the information submitted, it appears the company revised its non-binding estimate form to include the required statement outlined in WAC 480-15-650(2)(1).

Remarks Section

Item 85(7)(e)(x) requires a remarks section on the written estimate. Companies use this area for special instructions or agreements between the carrier and the customer.

2004 Audit Recommendation

TempStore must revise the written estimate form to include the required section for remarks.

Compliance Plan

In its compliance plan, TempStore stated, "We have revised our non-binding estimate form to include a space for remarks."⁹

Post-Audit Review Findings

TempStore is not in compliance. Based on the information submitted, it appears the company revised only its binding estimate form to include the

⁸ See Appendix B.

⁹ Ibid.

required section for remarks.¹⁰ TempStore must also revise the non-binding estimate form to include the required section.

Staff finds one violation of Tariff 15-A, Item 85(7)(e)(x), for TempStore's failure to revise the non-binding estimate form to include the required section for remarks, subject to a \$100 penalty. **Total Possible Penalty = \$100.00**

¹⁰ See Appendix F.

ESTIMATES - COMPLETION

RCW 81.80.132 requires that when a carrier gives an estimate of charges for services in carrying household goods, the carrier will endeavor to accurately reflect the actual charges. WAC 480-15-650 defines when a carrier may provide an estimate, describes specific information required on a written estimate, and defines the retention period for estimates. Tariff 15-A, Item 85, describes additional information required in a written estimate.

Origin/Destination Addresses

WAC 480-15-650(2)(d) requires that the complete physical address of the origin, destination, and any intermediate stops of the proposed shipment be listed on the written estimate.

2004 Audit Recommendation

TempStore, on the written estimate, must include the complete physical address of the origin, destination, and any intermediate stops of the proposed shipment.

Compliance Plan

In its compliance plan, TempStore stated, "We have revised our estimate form to include a section for a complete physical address of the origin, destination, and any intermediate stops."¹¹

Post-Audit Review Findings

TempStore is not in compliance. In its response to the data request, TempStore provided a copy of one written estimate. The estimate does not contain the complete physical address of the origin or the destination of the move.¹²

Staff finds two violations of WAC 480-15-650(2)(d), for TempStore's failure to list the complete physical address of the origin and the destination of the move on the written estimate, subject to a \$100 penalty per violation. **Total Possible Penalty = \$200.00**

Total Mileage

WAC 480-15-650(2)(e) requires that the total mileage between the origin and destination, including any intermediate stops, be listed on the written estimate.

¹¹ See Appendix B.

¹² See Appendix G.

2004 Audit Recommendation

TempStore, on the written estimate, must include the total mileage between the origin and destination, including any intermediate stops.

Compliance Plan

In its compliance plan, TempStore stated, "Training will be provided to the Estimator to ensure the mileage is shown on the written estimate of the point of origin and destination."¹³

Post-Audit Review Findings

TempStore is not in compliance. The estimate submitted does not contain the mileage of the move.¹⁴

Staff finds one violation of WAC 480-15-650(2)(e), for TempStore's failure to include the total mileage on the written estimate, subject to a \$100 penalty. **Total Possible Penalty = \$100.00**

Rates

WAC 480-15-650(2)(f) requires that the rates on which the estimated charges will be based be shown on the written estimate. Tariff 15-A, Item 85(4), requires that estimates show each applicable rate and charge that will be used to determine the total charge.

2004 Audit Recommendation

TempStore, on the written estimate, must show the rates on which the estimated charges will be based.

Compliance Plan

In its compliance plan, TempStore stated, "Training will be provided to the Estimator to ensure the tariff rates are shown on each written estimate."¹⁵

Post-Audit Review Findings

TempStore appears to be in compliance. The estimate submitted shows the rates on which the estimated charges were based.

Inventory

WAC 480-15-650(2)(h) requires that a list of articles upon which the estimate is based

¹³ See Appendix B.

¹⁴ See Appendix G.

¹⁵ See Appendix B.

(inventory) be included on a written estimate. WAC 480-15-650(2)(i) requires the estimated cubic footage for each article.

2004 Audit Recommendation

TempStore, on the written estimate, must include a list of articles upon which the estimate is based (inventory) with the estimated cubic footage for each article.

Compliance Plan

In its compliance plan, TempStore stated, "The Estimator will be instructed to complete a list articles or inventory on the estimate requested by the customer." (*sic*)¹⁶

Post-Audit Review Findings

TempStore is not in compliance. The estimate submitted included an inventory; however, the estimated cubic footage for each article is not listed.¹⁷

Staff finds one violation of WAC 480-15-650(2)(i), for TempStore's failure to list the estimated cubic footage of each article on the inventory, subject to a \$100 penalty. **Total Possible Penalty = \$100.00**

Customer Signature

WAC 480-15-650(3) requires that a customer sign the written estimate.

2004 Audit Recommendation

TempStore must require the customer to sign the written estimate.

Compliance Plan

In its compliance plan, TempStore stated, "The Estimator will be instructed to obtain a signature from the customer on the estimate form."¹⁸

Post-Audit Review Findings

TempStore is not in compliance. The estimate submitted did not include a customer signature.¹⁹

Staff finds one violation of WAC 480-15-650(3), for TempStore's failure to obtain the customer's signature on a written estimate, subject to a \$100 penalty. **Total Possible Penalty = \$100.00**

¹⁶ See Appendix B.

¹⁷ See Appendix G.

¹⁸ See Appendix B.

¹⁹ See Appendix G.

BILLS OF LADING - COMPLETION

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. WAC 480-15-720 requires carriers to issue a bill of lading for each shipment of household goods transported. WAC 480-15-730 requires carriers to use the bill of lading format shown in the published tariff. WAC 480-15-740 requires the company to fill out the bill of lading listing specific information necessary to bill the customer the correct rates and charges. Tariff 15-A, Item 95, requires the carrier to properly complete and issue a bill of lading for each shipment of household goods transported. Item 100 requires that a carrier ensure that customers specifically choose storage in transit or permanent storage service by signing or initialing on the bill of lading, and requires the carrier and the warehouse to maintain an inventory on any shipment placed in storage.

Bills of Lading for Each Shipment

WAC 480-15-720 and Item 95 require carriers to issue a bill of lading for each shipment of household goods transported.

2004 Audit Recommendation

TempStore must issue only one bill of lading for transportation of one shipment of household goods.

Compliance Plan

In its compliance plan, TempStore stated, "TempStore Moving will be paying closer attention to ensure that only one bill of lading is used during a two or three day move for the same customer."²⁰

Post-Audit Review Findings

TempStore appears to be in compliance. Based on the information submitted, it appears the company is using only one bill of lading during multiple-day moves.

Receipt for Goods

WAC 480-15-730 requires carriers to use the bill of lading format shown in the published tariff. Item 95(1)(b) requires that carriers use a bill of lading that contains all of the information required in Item 95. The bill of lading format shown in the tariff requires a space for the carrier's driver to sign indicating receipt of the customer's goods.

²⁰ See Appendix B.

2004 Audit Recommendation

TempStore must ensure that the company's driver signs the bill of lading indicating receipt of the goods from the customer.

Compliance Plan

In its compliance plan, TempStore stated, "Lead person and/or driver will be instructed to make sure they sign the bill of lading indicating receipt of the customer's goods."²¹

Post-Audit Review Findings

TempStore is not in compliance. On one of the 43 bills of lading submitted by TempStore, the company's driver did not sign the bill of lading indicating receipt of the customer's goods.²²

Staff finds one violation of WAC 480-15-730 and Tariff Item 95(1)(b), for TempStore's driver's failure to sign the bill of lading indicating receipt of the customer's goods, subject to a \$100 penalty. **Total Possible Penalty = \$100.00**

Name of Consignee

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 95(2)(c) requires the exact name, address, and telephone number of the consignee (i.e., the person accepting the goods at the delivery).

2004 Audit Recommendation

TempStore, on the bill of lading, must ensure that the name of the consignee is listed.

Compliance Plan

In its compliance plan, TempStore stated, "TempStore will ensure employee's list the name of the consignee on the bill of lading." (*sic*)²³

Post-Audit Review Findings

TempStore is not in compliance. On three of the 43 bills of lading submitted, the consignee's name is not listed.²⁴

²¹ See Appendix B.

²² See Appendix H.

²³ See Appendix B.

²⁴ See Appendix I.

Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(c), for TempStore's failure to list the consignee's name on the bill of lading, subject to a \$100 penalty per violation. **Total Possible Penalty = \$300.00**

Storage

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 100 defines storage-in-transit (SIT) and permanent storage, and requires the carrier to ensure, if the customer has requested storage, that the customer specifically initials the type of storage on the bill of lading. The carrier and the warehouse are also required to maintain an inventory on any shipment placed in storage.

2004 Audit Recommendations

TempStore, if the customer has requested storage, must ensure that the customer specifically initials SIT or permanent storage on the bill of lading.

TempStore must maintain an inventory on any shipment placed in storage.

Compliance Plan

In its compliance plan, TempStore stated, "Lead person/driver will be instructed to ensure the customer initials either the storage in transit or permanent storage section on the bill of lading. TempStore Moving will ensure that an inventory form is completed on any shipments placed in storage."²⁵

Post-Audit Review Findings

TempStore is not in compliance. On one of the 43 bills of lading submitted, the customer initialed that items were to be placed in SIT. TempStore provided a copy of an inventory for the SIT; however, the inventory does not include all of the information required by Item 100. Specifically, the missing inventory information is: 1) the number of the bill of lading under which the shipment is moving, 2) the condition of each article when it was forwarded from (left) the warehouse, 3) the dates when all charges, advances, or payments were made or received, and 4) the date the shipment was forwarded from the warehouse.²⁶

Staff finds four violations of WAC 480-15-490(5) and Tariff 15-A, Item 100, for TempStore's failure to include four required items on the SIT inventory, subject to a \$100 penalty per violation. **Total Possible Penalty = \$400.00**

²⁵ See Appendix B.

²⁶ See Appendix J.

BILLS OF LADING - RATES AND CHARGES HOURLY-RATED MOVES

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. WAC 480-15-740 requires the company to fill out the bill of lading listing specific information necessary to bill the customer the correct rates and charges. Tariff 15-A, Item 95(1), states that the carrier must issue a bill of lading for each shipment of household goods transported. Item 95(2)(k) requires the amount and type of any charges assessed be listed on the bill of lading, and requires that each charge be fully described. Item 95(2)(l) requires that each accessorial charge performed, and the charge for that service, must be shown as a separate line item on the bill of lading. Item 225 lists fees for containers. Item 230 defines rates to be charged for hourly-rated shipments moving less than 35 miles.

Rates and Charges

WAC 480-15-490(5) requires that household goods carriers charge the rates and charges contained in the tariff unless the Commission has approved deviations from the tariff. Item 95(2)(k) requires the amount and type of any charges assessed be listed on the bill of lading and requires that each charge be fully described. Item 95(2)(l) requires that each accessorial charge performed and the charge for that service be shown as a separate line item on the bill of lading.

2004 Audit Recommendations

TempStore, on the bill of lading, must charge the rates and charges contained in the tariff unless the Commission has approved deviations from the tariff.

TempStore, on the bill of lading, must list the amount and type of any charges assessed and must fully describe each charge.

TempStore, on the bill of lading, must show each accessorial charge performed as a separate line item and the charge for that service.

Compliance Plan

In its compliance plan, TempStore stated, "We will be reviewing our internal rate sheet to ensure the rates are in compliance with the rates contained in the Commission's Household Goods tariff. The lead person/driver has been instructed to note USED CONTAINERS on the bill of lading, when the customer purchase used containers. TempStore Moving will be providing it's employees with training to ensure they list the amount and type of any charges assessed and fully describe each charge on the bill of

lading. TempStore Moving will be training it's employees to list on the bill of lading any accessory charges performed on a separate line item."²⁷ (sic)

Post-Audit Review Findings

TempStore appears to be in compliance. Based on the information submitted, it appears that the company is charging the rates and charges contained in the tariff. TempStore is listing the amount and type of any charges assessed on the bill of lading and describing each charge. TempStore is also showing each accessorial charge performed as a separate line item and the charge for that service on the bill of lading.

Location

WAC 480-15-740(3) requires the exact address at which the shipment, or any part of that shipment, was loaded or unloaded. Item 95(2)(d) requires the exact location of the origin pickup point, any split pickups, stops to partially load or unload, and the final destination point of the shipment.

2004 Audit Recommendation

TempStore, on the bill of lading, must list the exact address at which the shipment, or any part of that shipment, was loaded or unloaded.

Compliance Plan

In its compliance plan, TempStore stated, "Training will be provided to staff to ensure they list the exact address of the shipment or any part of the shipment that was unloaded or loaded."²⁸

Post-Audit Review Findings

TempStore is not in compliance. On three of the 43 bills of lading submitted, the exact addresses at which the shipment, or any part of that shipment, was loaded or unloaded, including any split pickups, or stops to partially load or unload, are not listed.²⁹

Staff finds three violations of WAC 480-15-740(3) and Tariff 15-A, Item 95(2)(d), for TempStore's failure to list the exact address at which the shipment, or any part of that shipment, was loaded or unloaded on the bill of lading, subject to a \$100 penalty per violation. **Total Possible Penalty = \$300.00**

²⁷ See Appendix B.

²⁸ Ibid.

²⁹ See Appendix K.

Estimates

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 95(2)(g) requires a declaration of the type of estimate (binding or non-binding) under which the shipment is moving, including the customer's initials by the estimate option selected.

2004 Audit Recommendation

TempStore, if the customer has requested a written estimate, must ensure that the customer has properly initialed the type of estimate (binding or non-binding) under which the shipment is moving on the bill of lading.

Compliance Plan

In its compliance plan, TempStore stated, "Training will be provided to staff to ensure the customer initial (sic) the type of estimate (binding or non-binding) on the bill of lading, when a customer requests a written estimate."³⁰

Post-Audit Review Findings

TempStore is not in compliance. On eight of the 43 bills of lading submitted, the customer did not properly initial the type of estimate (binding or non-binding) under which the shipment was moving on the bill of lading. On two bills of lading, the customer did not initial at all. On two bills of lading, a company employee listed "PC" in the space. According to TempStore, "PC" stands for, "Passed by client or passed on by customer, meaning that...the customer opted not to sign."³¹ On four bills of lading, the customer initialed that an estimate was selected, but the company maintains that no estimate was done. In its September 30, 2005, letter, TempStore stated, "There are a few documents that have the estimate category incorrectly initialed as if there were an estimate given. No estimates were done on any jobs during that time period. This was simply the customer marking it incorrectly and the driver not paying attention to it at the time so that he/she could advise the customer properly."³²

Staff finds eight violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(g), for TempStore's failure to ensure that the customer has properly initialed the type of estimate (binding or non-binding) under which the shipment is moving on the bill of lading, subject to a \$100 penalty per violation. **Total Possible Penalty = \$800.00**

³⁰ See Appendix B.

³¹ See Appendix L.

³² See Appendix E.

Storage

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 100(1)(B) lists charges for storage-in-transit. Charges are determined in 30-day increments and are not pro-rated.

2004 Audit Recommendation

TempStore, on the bill of lading, must charge tariff rates for SIT in 30-day increments.

Compliance Plan

In its compliance plan, TempStore stated, "Management will pay closer attention to storage-in-transit to ensure proper tariff rates are charged in 30 day increments."³³

Post-Audit Review Findings

TempStore is not in compliance. On one of the 43 bills of lading, TempStore charged incorrect rates for SIT. The maximum tariff rate per 100 pounds for SIT is \$1.60; TempStore charged \$4.75 per 100 pounds.³⁴

Staff finds one violation of WAC 480-15-490(5) and Tariff 15-A, Item 100(1)(B), for TempStore's failure to charge tariff rates for SIT, subject to a \$100 penalty.

Total Possible Penalty = \$100.00

Container Charges

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 225 lists fees to be added to the customer's total charge for new or used containers for hourly-rated moves.

2004 Audit Recommendation

TempStore, on the bill of lading, must only charge fees for new or used containers as listed in the tariff.

Compliance Plan

In its compliance plan, TempStore stated, "Management will ensure appropriate tariff rates are charged for new or used containers."³⁵

³³ See Appendix B.

³⁴ See Appendix M. TempStore refunded the customer for the overcharge on 11/21/05.

³⁵ See Appendix B.

Post-Audit Review Findings

TempStore is not in compliance. On one of the 43 bills of lading, on the move for customer McKay, it appears TempStore charged the customer for the following three items not listed in the tariff: 1) masking tape, 2) white packing paper, and 3) mattress bags. TempStore must stop charging for all items not listed in the tariff for in-state moves, including: XXL boxes, bicycle boxes, misc. XXL furniture boxes, cardboard sheets, any type of tape, bubble wrap, any type of packing paper, newsprint, shrink wrap, mattress bags, pallets, and wood crates.³⁶

Also, the rates charged for dish packs, cartons less than three cubic feet, cartons at three cubic feet, double and queen mattress cartons, and mirror cartons were below tariff rates. TempStore did not indicate that the customer purchased used boxes at 50% of tariff rates. TempStore must review its list of packing materials to ensure that the prices listed reflect current tariff rates.

Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 225, for TempStore's failure to only charge fees for new or used containers as listed in the tariff, subject to a \$100 penalty per violation. **Total Possible Penalty = \$300.00**

Recording Time

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 230(4) requires that time be recorded to the nearest increment of 15 minutes. The carrier must require its employees to record breaks and interruptions, and customers must not be charged for those breaks and interruptions. Item 230(6) requires that when a single shipment is being transported, the carrier must bill the customer for the time beginning when the moving vehicle leaves the carrier's terminal until the time the vehicle returns to the carrier's terminal or is dispatched to another job.

2004 Audit Recommendations

TempStore, on the bill of lading, must require its employees to record breaks and interruptions, and customers must not be charged for those breaks and interruptions.

TempStore, when a single shipment is being transported, must bill the customer for the time beginning when the moving vehicle leaves the carrier's terminal until the time the vehicle returns to the carrier's terminal or is dispatched to another job on the bill of lading.

³⁶ See Appendix N

Compliance Plan

In its compliance plan, TempStore stated, “Employees have been instructed to record on the bill of lading all breaks and interruptions so the customer is not charged for this time. Employees have been instructed to record the time the vehicle leaves the terminal and the time the vehicle returns to the terminal or is dispatched to another job on the bill of lading.”³⁷

Post-Audit Review Findings

TempStore is not in compliance with Item 230(4). On one of the 43 bills of lading, the customer was charged for the company’s lunch break. The move began at 9:00 am and ended at 4:30 pm with ½ hour for lunch. The customer was charged for 7.5 hours instead of 7 hours.³⁸

Staff finds one violation of WAC 480-15-490(5) and Tariff Item 230(4), for TempStore charging a customer for a lunch break, subject to a \$100.00 penalty.

Total Possible Penalty = \$100.00

³⁷ See Appendix B.

³⁸ See Appendix O.

BILLS OF LADING - RATES AND CHARGES MILEAGE-RATED MOVES

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. WAC 480-15-740 requires the company to fill out the bill of lading listing specific information necessary to bill the customer the correct rates and charges. Item 95(2)(k) requires the amount and type of any charges assessed be listed on the bill of lading, and requires that each charge be fully described. Item 155 requires customers be charged for every stop during a move. Item 160 lists additional charges to be added on a bill of lading if goods must be carried more than 75 feet between the carrier's vehicle and the door of the individual living unit. Item 175 addresses commercial ferry fares and charges.

Total Mileage

WAC 480-15-740 requires the company to fill out the bill of lading listing specific information necessary to bill the customer the correct rates and charges.

2004 Audit Recommendation

TempStore, on the bill of lading, must list specific information necessary to bill the customer the correct rates and charges, including total mileage.

Compliance Plan

In its compliance plan, TempStore stated, "Staff will be trained to ensure all necessary information is listed on the bills of lading."³⁹

Post-Audit Review Findings

TempStore is not in compliance. In response to the data request, TempStore provided a copy of one bill of lading that should have been rated as a mileage move. According to Rand McNally, the distance of the move was 52 miles; however, TempStore rated the move under hourly rates.⁴⁰ The total mileage is not listed on the bill of lading.

Staff finds one violation of WAC 480-15-740, for TempStore's failure to list specific information necessary to bill the customer the correct rates and charges on the bill of lading, subject to a \$100.00 penalty. **Total Possible Penalty = \$100.00**

³⁹ See Appendix B.

⁴⁰ See Appendix P.

Fuel Surcharge

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Carriers assess the fuel surcharge, up to the allowable percentage amount, based on operational needs. Item 95(2)(k) requires the amount and type of any charges assessed be listed on the bill of lading, and requires that each charge be fully described.

2004 Audit Recommendation

TempStore, on the bill of lading, must clearly list the amount of any fuel surcharge assessed, with a full description of the charge.

Compliance Plan

In its compliance plan, TempStore stated, "Management will be trained to ensure that fuel surcharges are assessed and a full description of charges is listed on the bill of lading."⁴¹

Post-Audit Review Findings

TempStore appears to be in compliance with this requirement.
--

Long Carry Charges

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 160 lists additional charges to be added to all other applicable rates and charges on a bill of lading if goods must be carried more than 75 feet between the carrier's vehicle and the door of the individual living unit.

2004 Audit Recommendation

TempStore must use tariff rates for long carry charges.

Compliance Plan

In its compliance plan, TempStore stated, "Management will be trained to ensure that appropriate tariff rates are accessed (sic) on any long carries and shown on the bill of lading."⁴²

⁴¹ See Appendix B.

⁴² Ibid.

Post-Audit Review Findings

Staff is unable to determine compliance. None of the bills of lading provided contains fees for long carry charges.

Commercial Ferry Fees

WAC 480-15-490(5) requires that all household goods carriers charge the rates and charges and comply with the rules contained in the tariff unless the Commission has approved, in writing, deviations from the tariff. Item 175(a) requires the carrier to pass through to the customer the actual cost of ferry fares. A copy of the fare receipt must be attached to the bill of lading provided to the customer and the carrier must retain a duplicate copy in its files. Item 175(c) requires the carrier to record on the bill of lading the exact time its vehicle and employees are aboard a commercial ferry or are waiting in line to board the ferry and requires the carrier to bill the customer appropriately for this time.

2004 Audit Recommendations

TempStore must maintain copies of original ferry fare receipts.

TempStore, on the bill of lading, must record the exact time its vehicle and employees are aboard a commercial ferry or are waiting in line to board the ferry, and bill the customer appropriately for this time.

Compliance Plan

In its compliance plan, TempStore stated, "Staff will start maintaining all copies of ferry fare receipts and all other supporting documents. Staff will ensure that all employees record the exact waiting time it's (sic) vehicles and employees are aboard a commercial ferry or waiting in line to board the ferry."⁴³

Post-Audit Review Findings

Staff is unable to determine compliance. None of the bills of lading provided contains fees for commercial ferries.

⁴³ See Appendix B.

Additional Technical Assistance – Bills of Lading

Staff did not address the following items in the initial audit because TempStore was not out of compliance at the time. However, in the documents provided for the post-audit review, the company was out of compliance. Staff offers the following as technical assistance to TempStore. Future violations of these requirements could lead to Staff recommending enforcement action against TempStore.

Valuation

Item 90(5) requires that a carrier not load the customer's goods until such time as the customer selects a valuation option and makes the appropriate notation on the bill of lading.

Findings

TempStore is not in compliance consistently. On four of the 42 bills of lading, customers either did not initial the type of valuation coverage selected, or a company employee listed "PC" in the space. According to TempStore, "PC" stands for, "Passed by client or passed on by customer, meaning that...the customer opted not to sign."⁴⁴ The type of valuation coverage must be selected and initialed by the customer prior to the customer's goods being loaded.

Recommendation

TempStore must ensure that the customer selects a valuation option and makes the appropriate notation on the bill of lading before the company loads the customer's goods.

Rights and Responsibilities Guide

WAC 480-15-740(8) requires that on any shipments where the customer did not receive a written estimate, the carrier must make a notation on the bill of lading that the customer was given a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer." The customer must initial on or near the notation on the bill, acknowledging receipt of the information. Item 95(2)(o) requires a notation that the customer was provided a copy of the brochure or that the customer refused a copy when it was offered.

Findings

TempStore is not in compliance consistently. On six of the 43 bills of lading, the customer did not receive a written estimate and also did not initial that TempStore gave, or that the customer declined, the Rights & Responsibilities Guide.

⁴⁴ See Appendix J.

Recommendation

TempStore, on the bill of lading, must ensure that a customer who has not received a written estimate has initialed indicating either that the customer received or declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Method of Payment

Item 95(2)(p) requires that the method of payment be shown on the bill of lading. The customer must indicate his or her choice of payment type by initialing that choice on the bill of lading. This ensures that both the customer and the company understand how the customer intends to pay for the move prior to the beginning of a move.

Findings

TempStore is not in compliance. On 34 of the 43 bills of lading, the customer did not initial the method of payment.

Recommendation

TempStore must ensure that the customer selects a method of payment and makes the appropriate notation on the bill of lading.

Mileage Rates

Item 200 states that mileage rates apply only on shipments moving more than 35 miles and rates are based on loaded distance. Loaded distance is the distance between the loading point (origin) of the shipment and the unloading point (destination), the distance the carrier's vehicle actually transports the customer's goods.

Findings

TempStore is not in compliance. On one of the 43 bills of lading, TempStore charged hourly rates for a move that was over 35 miles.

Recommendation

TempStore must apply mileage rates on shipments moving more than 35 miles.

SUMMARY OF POSSIBLE PENALTIES

Staff finds one violation of Tariff 15-A, Item 85(7)(e)(x), for TempStore's failure to revise the non-binding estimate form to include the required section for remarks from January 31 through September 30, 2005, subject to a \$100.00 penalty.

Staff finds two violations of WAC 480-15-650(2)(d), for TempStore's failure to list the complete physical address of the origin and the destination of the move on a written estimate between May 1 and August 20, 2005, subject to a \$200.00 penalty.

Staff finds one violation of WAC 480-15-650(2)(e), for TempStore's failure to include the total mileage on a written estimate between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Staff finds one violation of WAC 480-15-650(2)(i), for TempStore's failure to list the estimated cubic footage of each article on an inventory between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Staff finds one violation of WAC 480-15-650(3), for TempStore's failure to obtain the customer's signature on a written estimate between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Staff finds one violation of WAC 480-15-730 and Tariff Item 95(1)(b), for TempStore's driver's failure to sign the bill of lading indicating receipt of the customer's goods between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(c), for TempStore's failure to list the consignee's name on three bills of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.

Staff finds four violations of WAC 480-15-490(5) and Tariff 15-A, Item 100, for TempStore's failure to include four required items on an SIT inventory between May 1 and August 20, 2005, subject to a \$400.00 penalty.

Staff finds three violations of WAC 480-15-740(3) and Tariff 15-A, Item 95(2)(d), for TempStore's failure to list the exact address at which the shipment, or any part of that shipment, was loaded or unloaded on three bills of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.

Staff finds eight violations of WAC 480-15-490(5) and Tariff 15-A, Item 95(2)(g), for TempStore's failure to ensure that the customer has properly initialed the type of

estimate (binding or non-binding) under which the shipment is moving on eight bills of lading between May 1 and August 20, 2005, subject to an \$800.00 penalty.

Staff finds one violation of WAC 480-15-490(5) and Tariff 15-A, Item 100(1)(B), for TempStore's failure to charge tariff rates for SIT on one bill of lading between May 1 and August 20, 2005, subject to a \$100 penalty.

Staff finds three violations of WAC 480-15-490(5) and Tariff 15-A, Item 225, for TempStore's failure to only charge fees for new or used containers as listed in the tariff on one bill of lading between May 1 and August 20, 2005, subject to a \$300.00 penalty.

Staff finds one violation of WAC 480-15-490(5) and Tariff Item 230(4), for TempStore charging a customer for a lunch break on one bill of lading between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Staff finds one violation of WAC 480-15-740, for TempStore's failure to list specific information necessary to bill the customer the correct rates and charges on a bill of lading between May 1 and August 20, 2005, subject to a \$100.00 penalty.

Total possible penalties = \$3,100.00
--

APPENDIX A

RCW 80.01.040(3) General powers and duties of commission. The utilities and transportation commission shall:

(3) Regulate in the public interest, as provided by the public service laws, the rates, services, facilities, and practices of all persons engaging within this state in the business of supplying any utility service or commodity to the public for compensation, and related activities; including, but not limited to, electrical companies, gas companies, irrigation companies, telecommunications companies, and water companies.

[1985 c 450 § 10; 1961 c 14 § [80.01.040](#). Prior: (i) 1949 c 117 § 3; Rem. Supp. 1949 § 10964-115-3. (ii) 1945 c 267 § 5; Rem. Supp. 1945 § 10459-5. (iii) 1945 c 267 § 6; Rem. Supp. 1945 § 10459-6. Formerly RCW [43.53.050](#).]

RCW 80.04.070 - Inspection of books, papers, and documents. The commission and each commissioner, or any person employed by the commission, shall have the right, at any and all times, to inspect the accounts, books, papers and documents of any public service company, and the commission, or any commissioner, may examine under oath any officer, agent or employee of such public service company in relation thereto, and with reference to the affairs of such company: PROVIDED, That any person other than a commissioner who shall make any such demand shall produce his authority from the commission to make such inspection.

[1961 c 14 § [80.04.070](#). Prior: 1911 c 117 § 77; RRS § 10415.]

RCW 81.80.357 - Advertising -- Household goods -- Permit number required -- Penalty. - (1) No person in the business of transporting household goods as defined by the commission in intrastate commerce shall advertise without listing the carrier's Washington utilities and transportation commission permit number in the advertisement.

(2) As of June 9, 1994, all advertising, contracts, correspondence, cards, signs, posters, papers, and documents which show a household goods motor carrier name or address shall show the carrier's Washington utilities and transportation commission permit number. The alphabetized listing of household good[s] motor carriers appearing in the advertising sections of telephone books or other directories and all advertising that shows the carrier's name or address shall show the carrier's current Washington utilities and transportation commission permit number.

(3) Advertising by electronic transmission need not contain the carrier's Washington utilities and transportation commission permit number if the carrier provides it to the person selling the advertisement and it is recorded in the advertising contract.

(4) No person shall falsify a Washington utilities and transportation commission permit number or use a false or inaccurate Washington utilities and transportation commission permit number in connection with any solicitation or identification as an authorized household goods motor carrier.

(5) If, upon investigation, the commission determines that a motor carrier or person acting in the capacity of a motor carrier has violated this section, the commission may issue a penalty not to exceed five hundred dollars for every violation.

[1994 c 168 § 1.]

WAC 480-15-490 Tariff and rates, general. (1) **What is a tariff?** A tariff is a publication containing the rates and charges that household goods carriers must assess on shipments of household goods, including rules that govern how rates and charges are assessed.

(2) **How are tariff rates and charges established?**

(a) Pursuant to RCW [81.80.130](#) and [81.80.150](#), the commission publishes tariffs to be used by all household goods carriers, or allows household goods carriers to file individual tariffs if the commission finds it is impractical to publish tariffs for certain commodities or services. The commission determines the rates and charges contained in the tariffs by commission order following notice and hearing. Under RCW [81.80.130](#), the commission must set fair, just, reasonable, and sufficient rates and charges. The commission will do this by setting minimum and maximum rates.

(b) Upon the effective date of these rules, and continuing until such time as the commission, after notice and hearing, determines a different rate level, household goods carriers must assess rates and charges within a band.

(i) The maximum rates and charges must be no more than twenty percent above the rates and charges as published by the commission in Tariff 15A in effect on February 1, 2000.

(ii) The maximum rates and charges established in (b)(i) of this subsection will be adjusted each June 1, through 2005, by an index calculated using the first-quarter implicit price deflator (IPD) of the gross domestic product as follows:

Index for Current Year = IPD for Previous Year First Quarter / IPD for Current Year First Quarter

Example: Using the following data:

IPD for Previous Year First Quarter	102.35
IPD for Current Year First Quarter	103.83

Index for Current Year is calculated as follows:

IPD for Current Year First Quarter	103.83
Divided by IPD for Previous Year First Quarter	102.35
Equals Index for Current Year	= 1.0145

Maximum Rate or Charge is calculated as follows:

Maximum Rate for Previous Year	\$ 100.00
Multiplied by Index for Current Year	x 1.0145
Equals the Maximum Rate for Current Year	= \$ 101.45

Round the maximum rate to the next \$.01, with \$.005 and greater rounded up and less than \$.005 rounded down.
Mileage rates are rounded to the next \$.0001.

(iii) The minimum rate or charge is fixed at no less than forty percent below the maximum rate or charge established in (b)(i) of this subsection.

(3) **Who must have tariffs?** Each person holding household goods permit authority must purchase and display at least one copy of the current tariff, and pay applicable tariff maintenance fees. Any interested person may purchase a copy by paying the applicable fees in advance.

(4) **Where must a household goods carrier display its tariffs?** A household goods carrier must display a current copy of the tariff in its main office and in each billing office.

(5) **Who must charge rates contained in the tariff?** All household goods carriers must charge the rates

and charges, and comply with the rules contained, in the tariff unless the commission has approved, in writing, deviations from the tariff.

(6) **Is the tariff the only publication a household goods carrier needs to use to determine rates?** The commission may adopt other publications that will be used to assess rates. If we do, we will notify tariff subscribers of the change.

(7) **Where may the public view tariffs?** Tariffs are public documents and you must make them available for the public by posting copies at your main office and any billing office. Tariffs are also available for review at our headquarters office.

(8) **How much does a tariff cost?** The cost of tariffs may change periodically depending on our costs for compiling, printing, distributing, and maintaining them. To find out the current cost, you may contact the commission as described in WAC [480-15-060](#).

(9) **Are copies of current or expired tariff pages available?** The commission will supply you with current or expired single tariff pages upon request. Copies of entire expired tariffs, or entire tariffs applicable on a specific date in the past, generally are not available.

[Statutory Authority: RCW [81.04.160](#), [81.04.250](#), [81.28.040](#), [81.80.090](#), [81.80.120](#), [81.80.130](#), [81.80.290](#), [81.80.211](#), and [80.01.040](#). 00-14-010 (General Order No. R-471, Docket No. TV-991559), § 480-15-490, filed 6/27/00, effective 7/28/00. Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-490, filed 12/15/98, effective 1/15/99.]

WAC 480-15-610 What are my responsibilities regarding advertising? (1) You must include your permit number in any advertising of your household goods moving services. Advertising includes, but is not limited to, reference to your services on your vehicles, equipment, and in telephone books, internet, contracts, correspondence, cards, signs, posters, newspapers, and documents which show your name and address.

(2) You may only advertise services authorized by your permit.

(3) You may advertise services you provide as an agent of, or connecting carrier to, another household goods carrier if you include the name and permit number of the other household goods carrier in your advertising.

(4) You must not advertise services or rates and charges that conflict with those in the tariff.

(5) If you violate these advertising rules we may assess a penalty of up to five hundred dollars for each violation, or initiate other administrative action. See WAC [480-15-130](#)(3).

[Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-610, filed 12/15/98, effective 1/15/99.]

WAC 480-15-650 Form of estimates. (1) **When must a household goods carrier provide a written estimate?** If a customer requests an estimate, you must provide a written estimate only after you, or your representative, have visually inspected the goods to be shipped.

(2) **What must a household goods carrier include on a written estimate?** Your written estimate must include the following information:

(a) The name, address and telephone number of the household goods carrier who will perform the service;

(b) The name, company affiliation, title and telephone number of the person preparing the estimate;

(c) The name of the customer and the receiver of the goods;

(d) The complete physical address of the origin, destination and any intermediate stops of the proposed movement;

(e) The total mileage between the origin and destination, including any intermediate stops;

(f) The rates on which the estimated charges will be based;

- (g) A list of the articles upon which the estimate is based (inventory);
- (h) The estimated cubic footage for each article;
- (i) The estimated total weight of the shipment, based upon a formula of not less than seven pounds per cubic foot (example: A box one foot by one foot by one foot = seven pounds);
- (j) An itemized statement of all known accessorial services to be performed, articles supplied, and their charges;
- (k) An estimate of the total charges, including transportation and accessorial charges;
- (l) A printed statement on the first page of a nonbinding estimate, in contrasting lettering, and not less than eight-point bold or full-faced type, as follows:

IMPORTANT NOTICE

This nonbinding estimate covers only the articles and services listed. It is not a warranty or representation that the actual charges will not exceed the amount of the estimate. If you request additional services to complete the move or add articles to the inventory attached to this estimate, the household goods mover must prepare a supplemental estimate which will change the amount of the original estimate and may change the rate on which these new charges are based.

Household goods carriers are required by law to collect transportation and other incidental charges computed on the basis of rates shown in their lawfully published tariffs, except as provided below:

- (1) A household goods carrier may not charge more than twenty-five percent more than its written nonbinding estimate for time charges for a local hourly rated move nor can the household goods carrier charge more than fifteen percent more than the written nonbinding estimate for accessorial and other services not related to time, unless the household goods carrier prepares and the shipper signs a supplemental estimate.
- (2) A household goods carrier may not charge more than fifteen percent above your written nonbinding estimate for a long-distance-rated move, unless the household goods carrier prepares and the customer signs a supplemental estimate.

(3) **Must the customer sign the estimate?** Yes, customers must sign the written estimate.

(4) **How long must a household goods carrier keep written estimates?** You must keep a written estimate in your files for at least two years after you conduct the move.

(5) **What if a household goods carrier is unable to provide a written estimate?** If a customer requests a written estimate and you refuse to provide one, you may not conduct that move by agreeing to meet or beat another company's estimate.

[Statutory Authority: RCW [81.04.160](#), [81.04.250](#), [81.28.040](#), [81.80.090](#), [81.80.120](#), [81.80.130](#), [81.80.290](#), [81.80.211](#), and [80.01.040](#). 00-14-010 (General Order No. R-471, Docket No. TV-991559), § 480-15-650, filed 6/27/00, effective 7/28/00. Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-650, filed 12/15/98, effective 1/15/99.]

WAC 480-15-720 Who must issue bills of lading? You must issue a bill of lading for each shipment of household goods you transport.

[Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-720, filed 12/15/98, effective 1/15/99.]

WAC 480-15-730 What is the format for bills of lading? You must use the bill of lading format shown in our published tariff.

[Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-730, filed 12/15/98, effective 1/15/99.]

WAC 480-15-740 Information required on a bill of lading. You must list on the bill of lading all information necessary to determine tariff rates and charges. Any element that you use in determining transportation charges must be clearly shown on the bill of lading. This information includes, but is not limited to:

- (1) The date the shipment was packed, loaded, transported, delivered, unloaded and unpacked;
- (2) The number and size of each type of carton, crate, or container used in packing the customer's goods;
- (3) The exact address at which the shipment, or any part of that shipment, was loaded or unloaded;
- (4) The nature of any special services performed on behalf of the customer;
- (5) The name, address, and total charges of any third party services incurred on behalf of the customer;
- (6) Any special circumstances that entered into the determination of transportation charges (for example: Detours or road conditions that required you to take a circuitous route, thus incurring additional mileage charges);
- (7) The start time, stop time, and any interruptions for each person involved in or on a shipment rated under hourly rates:
 - (a) In lieu of recording each person's start time, stop time, and interruptions on the bill of lading, a carrier may maintain a separate, but complete, record of each person's activities in sufficient detail to verify the proper rates and charges.
 - (b) A carrier must be able to identify, through payroll records, each person involved in a move and provide that information to commission staff on request.
 - (c) In all cases a carrier must record on the bill of lading the start time and stop time of any hourly rated move, and any interruptions in service;
- (8) On any shipments where the customer did not receive a written estimate, you must make a notation on the bill of lading that the customer was given a copy of the brochure "*Your Rights and Responsibilities as a Moving Company Customer*." The customer must initial on or near your notation on the bill of lading, acknowledging receipt of the information.

[Statutory Authority: RCW [81.04.160](#), [81.04.250](#), [81.28.040](#), [81.80.090](#), [81.80.120](#), [81.80.130](#), [81.80.290](#), [81.80.211](#), and [80.01.040](#). 00-14-010 (General Order No. R-471, Docket No. TV-991559), § 480-15-740, filed 6/27/00, effective 7/28/00. Statutory Authority: RCW [81.04.160](#) and [80.01.040](#). [99-01-077](#) (Order R-454, Docket No. TV-971477), § 480-15-740, filed 12/15/98, effective 1/15/99.]

Tariff 15-A

Item 85 – Estimates

1. All estimates must comply with the provisions of Chapter 480-15 WAC, Part 5.2.
2. Carriers may provide customers with two kinds of estimates:
 - Binding estimates; and
 - Non-binding estimates.
3. A supplemental estimate is to be used whenever there is any change to the move, by the customer, that results in an increase in cost. Supplemental estimates must be issued at the same level of rates as were contained in the original estimate.
4. Estimates must show each applicable rate and charge that will be used to determine the total transportation charge.
5. All estimates must be written. Verbal estimates are prohibited.
6. Whenever a written estimate is provided, all moving companies must give the potential customer a copy of the commission brochure "Your Rights and Responsibilities as a Moving Company Customer."
7. Carriers may design and use their own estimate and supplemental estimate forms. The Commission has not defined either a specific estimate form or a supplemental estimate form. The Commission instead establishes format criteria that must be used by all carriers in designing their own forms. Forms designed and used by carriers must:
 - a. Be printed on paper that is at least 8-1/2 inches by 11 inches in size.
 - b. Be printed in at least 8 point type.
 - c. Contain information that identifies the company name, address, phone number, telefacsimile number(if any), and e-mail address (if any) of the company making the estimate or supplemental estimate.
 - d. Contain information that clearly identifies whether the estimate or supplemental estimate is binding or non-binding.

Contain clearly captioned sections that provide adequate information to the customer so that the customer may make informed choices regarding transportation needs. At a minimum the form must contain the following sections:

 - i. Identification of customer – name, phone number, address of shipper, origin of shipment, destination of shipment, shipper's contact person (if other than customer).
 - ii. For hourly-rated shipments, the number of carrier personnel and carrier vans (or trucks) that will be used, and the number of hours each will be involved in the move.
 - iii. For mileage-rated shipments, the mileage between origin and destination, the estimated weight of the shipment, and the total transportation cost. Note: If the customer requests additional stops be made, mileage must be figured through those stopping points.
 - iv. Overtime.
 - v. Services to be provided (stairs, long carry, third party, etc.)
 - vi. Valuation charges.

- vii. Storage. (Storage-in-transit, storage-in-vehicle, permanent storage, etc.)
- viii. Packing, unpacking, and containers.
- ix. A summary of charges. The summary must be printed in the right lower quadrant of the form and must be set off by being placed in a box as shown in the following sample:

Summary of Charges	
Moving	\$ _____
Storage.....	\$ _____
Packing/ Unpacking..	\$ _____
Containers....	\$ _____
Services.....	\$ _____
Valuation.....	\$ _____
Other.....	\$ _____

- x. "Remarks" section. This area to be used for special instructions or agreements between carrier and customer.
- xi. Signatures. This section must be in the lower, right-hand portion of the form and must contain the signature of the estimator, the estimator's title, customer's signature, and the date signed. See example:

Estimator's Signature _____

Estimator's Title _____

Shipper's Signature _____

Date Signed _____

ITEM 90 -- CARRIER LIABILITY FOR HOUSEHOLD GOODS AND CUSTOMER VALUATION OPTIONS

1. Household goods carriers must assume liability for the value of the goods they transport. The amount of liability a carrier must assume depends on the level of valuation protection selected by the customer. The customer makes this selection by initialing the appropriate line on the bill of lading issued by the carrier. (See Item 95 for rules relating to bills of lading.)
2. The carrier's liability responsibility for loss and damage is to the customer regardless of any cargo insurance policies it may have.
3. The customer-declared value determines what the carrier's legal liability will be in case of loss or damage. In lieu of declared value, the value of a household goods shipment will be based on the weight or constructive weight of the shipment. Before providing service, carriers must require customers to state in writing on the bill of lading either the declared value of the shipment in cents per pound or a lump sum value for the entire shipment.
4. For the purposes of valuation, the phrases "weight" and "constructive weight" are used interchangeably.
 - * For distance moves the "weight" of the shipment is determined by recording the actual weight.
 - * For hourly rated moves the "weight" of the shipment is determined by recording the constructive weight. "Constructive weight" is calculated by multiplying 7 pounds times each cubic foot of space used in the moving vehicle.

5. There are four valuation options from which the customer may choose to determine the liability the carrier must assume for loss and/or damage. Each option has a different cost to the customer and represents a different level of carrier responsibility.

The customer has the following valuation protection options, and must, on the face of the bill of lading contract select one of the options. The carrier must not load the customer's goods until such time as the customer selects an option and makes the appropriate notation on the bill of lading contract.

ITEM 95 -- BILLS OF LADING

1. In compliance with RCW 81.29.020 and WAC 480-15-720 carriers must issue a bill of lading on each shipment of household goods transported.
 - (a) A sample bill of lading form follows the text of this item. Carriers are invited to have this sample bill of lading reproduced, in triplicate, for use on Washington intrastate household goods moves.
 - (b) Carriers are not required to use the sample form, it is provided as a guideline only. Carriers may elect to publish their own forms, provided the information shown in this tariff item is contained on the bill of lading.
 - (c) The information shown below, and on the sample bill of lading, is not required to be shown on a single document. Carriers may elect to divide the material between two or more documents. Carriers electing to do so, however, are required to cross reference the records to one another and must file all documents together to facilitate inspection of bills by Commission regulatory staff to determine that all information required by this tariff item have been included on the documents.

2. **Information That Must Be Included on Uniform Household Goods Bills of Lading:**
 - a. The name, permit number, address, telephone number, and fax number (if any) of the household goods carrier;
 - b. The name, address, and telephone number of the customer;
 - c. The name, address, and telephone number of the consignee;
 - d. The exact location of the origin pickup point, any split pickups, stops to partially load or unload, and the final destination point of the shipment;
 - e. The actual pickup date; and
 - f. A declaration of the length of time the shipper wishes property to be stored (permanent storage or storage in transit). The declaration must state as follows:

STORAGE: If shipment will be placed into storage, the customer must initial option selected.

_____ This shipment is to be placed in storage for a period of less than 90 days (storage in transit). ☉I understand that on the 91st day of storage the shipment becomes permanent storage.

_____ This shipment is to be placed in storage for more than 90 days (permanent storage).

- g. A declaration of the type of estimate (binding or non-binding) under which the shipment is moving. If the household goods carrier does not offer binding estimates, the language shown below relating to binding estimates may be omitted. The declaration must state:

ESTIMATES: The customer must initial option selected:

- _____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
- _____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
- _____ I understand this shipment is moving under a non-binding estimate. NOTE: If the charges shown on this bill exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110 percent of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115 percent of the estimate (plus any supplements) for mileage-rated shipments, nor more than 125 percent of the estimate plus supplements for hourly-rated shipments.

- h. A section where the customer must select the type of valuation coverage under which the shipment is moving. This section must read as follows:

VALUATION: The customer must initial option selected:

- _____ **Basic value protection.** I release this shipment to a value of 60 cents per pound per article, with no cost to me for the protection; or
- _____ **Depreciated value protection.** I release this shipment to a value of \$2.00 per pound times the weight of the total shipment; or
- _____ I declare a lump sum total dollar valuation on this entire shipment of:
\$ _____ and select the following option:
- _____ **Replacement Cost Coverage with a \$300 Deductible.**
Declared value must be at least \$3.50 times the weight of this Shipment.
- _____ **Replacement Cost Coverage with no deductible.** Declared
value must be at least \$3.50 times the weight of this s

- i. **If the shipment will be rated under mileage rates:** The tare, gross, and net weights of the shipment.
- j. **If the shipment will be rated under hourly rates:**
- (a) The time the vehicle left the carrier's terminal and the time it returned to the terminal or was released to go to another customer; and
- (b) The start time, stop time, and any interruption for each person involved in or on the shipment.
- k. The amount and type of any charges assessed. Each charge must be fully described. Example: the number of each type of packing cartons used, the charge per carton, and total charge for each type of carton must be shown.

- l. Each accessorial service performed, and the charge for that service, must be shown as a separate line item on the bill of lading.
- m. Each advance or third party billing charge must be shown on the bill of lading as a separate line item.
- n. Any item, reason, or circumstance that entered into the determination of the final charges must be shown as a separate line item. Example: If the carrier was required to travel via other than the regular route between origin and destination due to road closure, this information must be shown on the bill of lading.
- o. A notation that the customer was provided a copy of the brochure "Your Rights and Responsibilities as a Moving Company Customer" or that the customer refused a copy when it was offered.

p. The method of payment of total tariff charges. This section of the bill must state:

PAYMENT: The customer agrees to pay charges, at time of delivery, by:

cash money order certified check credit card
 personal check business check debit card

If credit arrangements are made, bill to:

Name: _____

Address: _____

ⓄNote: If carrier will never accept personal checks or debit cards, those options may be omitted from the section, or replaced with the term "other." (TV-001242)

ITEM 100 -- STORAGE

"Storage-in-transit" (SIT) - is temporary warehouse storage of a shipment for 90 days or less pending further transportation. Property may be placed into SIT one or more times but may not exceed a total of 90 days. This temporary storage may be in either a warehouse owned by the carrier, or in a warehouse the carrier has chosen as its agent. Liability for the shipment while in storage-in-transit is the responsibility of the carrier. For information related to temporary storage-in-vehicle refer to Item 101.

"Permanent storage" is warehouse storage of a shipment for longer than 90 days. The warehouse is considered the destination of a shipment delivered to permanent storage. The carrier's liability for the shipment ceases upon delivery to the warehouse. Liability for the shipment while in permanent storage is the responsibility of the warehouse.

Customer choice of storage. The carrier must ensure that the customer specifically choose SIT or Permanent Storage service by signing or initialing on the bill of lading. The customer is responsible for the added charges for storage service, warehouse handling and final delivery of the shipment.

Inventory required. Both the carrier and warehouse must maintain an inventory on any shipment placed in storage. The records must show:

- (a) An itemized list of the items in the shipment and the number of the bill of lading under which the shipment is moving;

- (b) The origin and destination points of the shipment;
- (c) The condition of each article when it was received at, and forwarded from, the SIT warehouse;
- (d) The dates when all charges, advances, or payments were made or received; and
- (e) The dates the shipment was delivered into, and forwarded from, the warehouse.

A. Charges due when a shipment is placed into SIT: On the date a shipment is placed into SIT the carrier may bill the customer:

- (a) The charges for transporting the shipment from the origin to the warehouse. Charges for transportation are determined by using Item 200 (mileage rates) for shipments moving more than 35 miles, Item 230 (hourly rates) if the shipment is 35 miles or less;
- (b) The storage charges for the first 30-day period;
- (c) Charges for any additional services such as packing materials, overtime incurred, third party billings, etc.;
- (d) Warehouse handling in charges; and
- (e) Valuation charges B see item 90.

B. Charges for Storage-In-Transit

Service	Rate to be charged per 100 pounds stored		Minimum charge	
	Minimum	Maximum	Minimum	Maximum
For each 30-day period goods remain in storage	▲ \$0.96	▲ \$1.60	▲ \$4.82	▲ \$8.03
Warehouse handling in	▲ \$0.87	▲ \$1.45	▲ \$4.35	▲ \$7.25
Warehouse handling out	▲ \$0.87	▲ \$1.45	▲ \$4.35	▲ \$7.25

(TV-040977)

C. Adding to, or removing a portion of, property from SIT: A customer may add to, or remove a portion of, the property in SIT. SIT charges for the balance of the SIT period will be based on the weight of goods remaining in storage. Charges for transportation furnished, if any, for the delivery of the remainder of the shipment will be based on the weight remaining in SIT.

- (1) **Removing a portion of the property from SIT:** A customer may remove a portion of the property from SIT if all charges for the shipment have been paid in full or the customer and carrier have negotiated for payment arrangements. If the customer requests the carrier to deliver the portion of the property removed from SIT, the carrier will charge for delivery as if it were a separate shipment with the origin being the SIT warehouse.

No property may be removed from the carrier's or agent's warehouse until all lawful charges are paid or satisfactory payment arrangements are negotiated.

- (2) **Adding property to a SIT shipment:** During the SIT period, the customer may add property to that already in SIT. The following charges and rules will apply:

- (a) If the carrier transports the additional property to SIT, charges will be calculated from origin to the warehouse by using the rates shown in Item 200 (mileage rates) or Item 230 (hourly rates);

- (b) Warehouse handling in charges as shown in the table below; and
 - (c) All subsequent charges, including SIT fees, will be based on the total weight of the combined shipment.
- (3) The customer must pay warehouse handling charges if the warehouse is required to unstack or restack the shipment, or a portion of the shipment, to facilitate the customer's selection of property. See table of charges below.

Service	Rate to be charged per 100 pounds stored		Minimum charge per occurrence	
	Minimum	Maximum	Minimum	Maximum
Warehouse handling, stacking or restacking to withdraw property from SIT	▲ \$1.74	▲ \$2.89	▲ \$8.68	▲ \$14.46
Warehouse handling in	▲ \$0.87	▲ \$1.45	▲ \$4.35	▲ \$7.25
Warehouse handling out	▲ \$0.87	▲ \$1.45	▲ \$4.35	▲ \$7.25

(TV-040977)

- D. **If the customer does not remove the shipment from SIT within 90 days:**
- (a) The carrier's liability terminates at midnight on the 90th day;
 - (b) The warehouse is considered the destination of the shipment;
 - (c) The warehouse is considered to be the agent of the customer and the property becomes subject to the rules, regulations and charges of the warehouse; and
 - (d) The carrier must bill the customer for all charges accrued to date.
- E. **Delivery from SIT requested, but not provided:** If a customer notifies the carrier, at least 15 days before the end of a 30-day SIT period, that it wants its property delivered, but the carrier does not make the delivery by the end of that period, the carrier cannot charge any additional SIT or storage charges. All other SIT provisions will apply until the carrier can deliver the property.
- F. **Change in destination from that shown on the original bill of lading:** The owner of the property in SIT may change the destination originally shown on the bill of lading by notifying the carrier in writing. When the carrier receives the notice, the carrier will make a notation on the bill of lading indicating that the customer requested the change.
- G. **Delivery attempted but cannot be accomplished:** If delivery cannot be made at the address specified on the bill of lading because of circumstances listed in Item 15, (Refusal to Pickup or Deliver Shipment), and the customer has not given another address where delivery can be made, the carrier will hold the shipment under the SIT provisions of this item.
- H. **Rates and charges to be assessed if there is a rate increase while property is in SIT:** Rates that were in effect on the date the shipment was loaded at the point of origin will remain in effect until delivery of the shipment at the point of destination.

2. Permanent Storage

Transferring property from SIT into permanent storage:

- (a) The customer may at any time decide to transfer property from SIT to permanent storage by providing written notice to the carrier and the warehouse.
- (b) Once property is transferred to permanent storage, the warehouse is considered the destination of the shipment.
- (c) Within seven days of receiving notice that the customer wants its property moved into permanent storage, the carrier must provide a final bill for all SIT charges due.
- (d) The carrier's liability for the property ceases when the property is transferred into permanent storage. Liability for the property while in permanent storage is the responsibility of the warehouse. Valuation coverage for the property must be purchased from the warehouse.

ITEM 160 -- LONG CARRY CHARGES

If goods must be carried more than 75 feet between the carrier's vehicle and the door of the individual living unit, the following will be charged to the customer in addition to all other applicable rates and charges:

For each 50 feet (or fraction of 50 feet) beyond the first 75 feet:	
Minimum Per 100 pounds carried	Maximum Per 100 pounds carried
▲\$0.68	▲\$1.14

(TV-040977)

ITEM 175 -- CHARGES FOR USING COMMERCIAL FERRIES AND TOLL BRIDGES

If the carrier must use a commercial ferry or toll bridge, the following charges will apply In addition to all other applicable rates and charges:

- (c) The carrier must record on the bill of lading the exact time its vehicle and employee(s) are on board a commercial ferry or are waiting in line to board the ferry. The carrier will bill the customer for the time its vehicle and employee(s) are detained waiting in line and the time on board the ferry at the rates shown in Items 230 (Hourly rates) and 235 (Labor charges).

ITEM NO. 200 -- MILEAGE RATES

Mileage rates apply only on shipments moving more than 35 miles. For rates on shipments moving less than 35 miles, see Items 230 (Hourly Rates) and 235 (Labor Charges).

Rates are stated in cents to be charged per pound shipped. To determine actual transportation charges, multiply the weight of the shipment in pounds times the rate and then round the answer to the nearest cent.

Example ©A shipment of 8,101 pounds being transported 51 miles results in a transportation charge of between \$861.95 and \$1,436.31, depending on the rate negotiated between customer and carrier.

$$8,101 \text{ pounds} \times .1773 \text{ (maximum rates allowed per pound)} = \$1,436.31 \text{ and}$$

$$8,101 \text{ pounds} \times .1064 \text{ (minimum rate allowed per pound)} = \$861.95$$

3. Rates are based on loaded distance. Loaded distance is the distance between the loading point (origin) of the shipment and the unloading point (destination), the distance the carrier's vehicle actually transports the customer's goods.

Refer to following pages for tables of mileage rates

(TV-030620)

ITEM 225 - CONTAINER PRICES

1. Prices are for containers (packing materials) only.
2. If the customer requests delivery or pickup of containers, Item 230 (Hourly Rates) and Item 235 (Labor Charges) will apply.
3. When available, the customer may purchase used containers at 50% of the prices shown below.

Type of Container	Price Per Container	
	Minimum	Maximum
DRUM, DISH-PACK (drum, dish-pack, barrel or other specially designed containers, not less than 5 cu. ft. capacity, used for packing glassware, chinaware, table lamps or similar fragile articles, with inserts or dividers).	▲\$9.80	▲\$16.33
WASHER SERVICE KIT	▲\$3.22	▲\$5.37
CARTONS:		
Less than 3 cubic ft (not less than 200 lb. test)	▲\$2.03	▲\$3.39
3 cubic ft (not less than 200 lb. test).....	▲\$3.02	▲\$5.03
4-1/2 cubic ft (not less than 200 lb. test)	▲\$3.62	▲\$6.03
6 cubic ft (not less than 200 lb. test)	▲\$4.26	▲\$7.10
WARDROBE CARTON (less than 10 cubic ft.)	▲\$7.69	▲\$12.81
MATTRESS CARTONS:		
Crib Mattress Carton	▲\$3.48	▲\$5.81
Twin Mattress Carton	▲\$6.29	▲\$10.48
Double Mattress Carton	▲\$7.83	▲\$13.05
Queen Mattress Carton	▲\$8.86	▲\$14.76
King Mattress Carton	▲\$12.69	▲\$21.15
King Box Spring Carton	▲\$14.60	▲\$24.33
MIRROR CARTON (corrugated)	▲\$7.82	▲\$13.03
CRATES AND CONTAINERS , other than described above (designed for mirrors, paintings, glass or marble tops, and similar fragile articles):		
Price per cubic foot or fraction (gross measurement of container)	▲\$1.81	▲\$3.02
Minimum charge.....	▲\$6.18	▲\$10.30

(TV-040977)

ITEM NO. 230 - HOURLY RATES

1. Hourly rates apply:
 - (a) On shipments where the loaded distance is 35 miles or less; or
 - (b) When referred to by another item of the tariff.

Note: For moves longer than 35 miles, see Item 200 (Mileage Rates).
2. Rates shown in this item apply for the vehicle and driver. See Item 235 (Labor Charges) if additional carrier personnel are involved in the move. Charges for the driver are computed at the same charges as those in Item 235 (Labor Charges), with the balance being the charge for use of the vehicle.
3. Hourly rates apply during regular hours only. For other than regular hours, overtime charges will apply in addition to these hourly rates. See Item 220 for overtime rates.
4. Time must be recorded to the nearest increment of 15 minutes. The carrier must require its employees to record breaks and interruptions. The customer must not be charged for those breaks and/or interruptions.
5. The minimum charge for a shipment moving under hourly rates is one hour.
6. When a single shipment is being transported, the carrier will bill the customer for the time beginning when the moving vehicle leaves the carrier's terminal, or other location of the vehicle, whichever is closest to the origin of the shipment, until the time the vehicle returns to the carrier's terminal or is dispatched to another job.
7. When two or more shipments are being transported on a single vehicle, the time charged to each customer must be:
 - (a) The actual time spent conducting packing, loading, unloading and unpacking; plus
 - (b) An equitable division of the total travel time.

APPENDIX B

January 31, 2005

Ms. Betty Young
Washington Utilities & Transportation Commission
1300 S. Evergreen Park Dr. S.W.
P. O. Box 47250
Olympia, WA 98504-7250
Ph: 360-664-1202

RECEIVED

FEB 02 2005

WASH. UT. & TP. COMM

Re: Compliance Review

Dear: Ms. Carole Washburn:

In response to the January 06, 2005 letter from the Washington Utilities and Transportation Commission requesting information on this company's compliance plan in regards to the 28 listed violations of Commission rules and regulation regarding household good carries.

This response is not to dispute the violations, but a response to each of the violations and our plan to correct each of the violations and provide training to staff in order to correct the problem.

Response to Recommendations:

1. TempStore must list its permit number in every means of advertisement and correspondence showing the carrier's name and address.
 - a. TempStore Moving is in the process of changing it's Letter Head, Business Card, and any other forms of advertisements the company may have, to include our Household Goods permit number HG 60620.
2. TempStore, must revise the written estimate form to include a space for the rates on which the estimate charges will be based.
 - a. We have revised our non-binding estimate forms to include a space for the rates.
3. TempStore, must revise the written non-binding estimate form to include the required statement outlined in WAC 480-15-650(2)(1).
 - a. We have revised our non-binding estimate form to include the Important Notice statement outline in WAC 480-15-650(2)(1).
4. TempStore, must revise the written estimate form to include the required section for remarks.
 - a. We have revised our non-binding estimate form to include a space for remarks.
5. TempStore, on the written estimate, must include the complete physical address of the origin, destination, and intermediate stops of the proposed shipment.
 - a. We have revised our estimate form to include a section for a complete physical address of the origin, destination, and any intermediate stops.

6. TempStore, on the written estimate, must include the total mileage between the origin and destination, including any intermediate stops.
 - a. Training will be provided to the Estimator to ensure the mileage is shown on the written estimate of the point of origin and destination.
7. TempStore, on the written estimate, must show the rates on which the estimated charges will be based.
 - a. Training will be provided to the Estimator to ensure the tariff rates are shown on each written estimate.
8. TempStore, on the written estimate, must include a list of articles upon which the estimate is based (inventory) with the estimated cubic footage of each article.
 - a. The Estimator will be instructed to complete a list articles or inventory on the estimate requested by the customer.
9. TempStore, must require the customer to sign the written estimate.
 - a. The Estimator will be instructed to obtain a signature from the customer on the estimate form.
10. TempStore must issue only one bill of lading for transportation of a shipment of household goods.
 - a. TempStore Moving will be paying closer attention to ensure that only one bill of lading is used during a two or three day move for the same customer.
11. TempStore must ensure that the company's driver signs the bill of lading indicating receipt of the goods from the customer.
 - a. Lead person and/or driver will be instructed to make sure they sign the bill of lading indicating receipt of the customer's goods.
12. TempStore, on the bill of lading, must ensure that the name of the consignee is listed.
 - a. TempStore will ensure employee's list the name of the consignee on the bill of lading.
13. TempStore, if the customer has requested storage, must ensure that the customer specifically initials storage-in-transit or permanent storage on the bill of lading.
 - a. Lead person/driver will be instructed to ensure the customer initials either the storage in transit or permanent storage section on the bill of lading.
14. TempStore must maintain an inventory on any shipment placed in storage.
 - a. TempStore Moving will ensure that an inventory form is completed on any shipments placed in storage.
15. TempStore, on the bill of lading, must charge the rates and charges contained in the tariff unless the Commission has approved deviations from the tariff.
 - a. We will be reviewing our internal rate sheet to ensure the rates are in compliance with the rates contained in the Commission's Household Goods

tariff. The lead person/driver has been instructed to note USED CONTAINERS on the bill of lading, when the customer purchase used containers.

16. TempStore, on the bill of lading, must list the amount and type of any charges assessed and must fully describe each charge.
 - a. TempStore Moving will be providing it's employees with training to ensure they list the amount and type of any charges assessed and fully describe each charge on the bill of lading.
17. TempStore, on the bill of lading, must show each accessory charge performed as a separate line item and the charge for that service.
 - a. TempStore Moving will be training it's employees to list on the bill of lading any accessory charges performed on a separate line item.
18. TempStore, on the bill of lading, must list the exact address at which the shipment, or any part of that shipment, was loaded or unloaded.
 - a. Training will be provided to staff to ensure they list the exact address of the shipment or any part of the shipment that was unloaded or loaded.
19. TempStore, if the customer has requested a written estimate, must ensure that the customer has properly initialed the type of estimate (binding or non-binding) under which the shipment is moving on the bill of lading.
 - a. Training will be provided to staff to ensure the customer initial the type of estimate (binding or non-binding) on the bill of lading, when a customer requests a written estimate.
20. TempStore, on the bill of lading, must charge tariff rates for storage in transit in 30 day increments.
 - a. Management will pay closer attention to storage-in-transit to ensure proper tariff rates are charged in 30 day increments.
21. TempStore must only charge fees for new or used containers as listed in the tariff.
 - a. Management will ensure appropriate tariff rates are charged for new or used containers.
22. TempStore must require its employees to record breaks and interruptions, and customers must not be charged for those breaks and interruptions.
 - a. Employees have been instructed to record on the bill of lading all breaks and interruptions so the customer is not charged for this time.
23. TempStore, when a single shipment is being transported, must bill the customer for the time beginning when the moving vehicle leaves the carrier's terminal until the time the vehicle returns to the carrier's terminal or is dispatched to another job on the bill of lading.
 - a. Employees have been instructed to record the time the vehicle leaves the terminal and the time the vehicle returns to the terminal or is dispatched to another job on the bill of lading.

24. TempStore, on the bill of lading, must list specific information necessary to bill the customer the correct rates and charges, including total mileage.
 - a. Staff will be trained to ensure all necessary information is listed on the bills of lading.
25. TempStore, on the bill of lading, must clearly list the amount of any fuel surcharge assessed, with a full description of the charge.
 - a. Management will be trained to ensure that fuel surcharges are assessed and a full description of charges is listed on the bill of lading.
26. TempStore, on the bill of lading, must use tariff rates for long carry charges.
 - a. Management will be trained to ensure that appropriate tariff rates are accessed on any long carries and shown on the bill of lading.
27. TempStore must maintain copies of ferry fare receipts.
 - a. Staff will start maintaining all copies of ferry fare receipts and all other supporting documents.
28. TempStore, on the bill of lading, must record the exact time its vehicle and employees are aboard a commercial ferry or are waiting in line to board the ferry, and bill the customer appropriately for the time.
 - a. Staff will ensure that all employees record the exact time it's vehicles and employees are aboard a commercial ferry or waiting in line to board the ferry.

TRAINING:

Our plan is to come into compliance with the training of all employees and staff on the proper way to complete a bill of lading. This training should include completing a bill of lading with all the necessary information to determine the legal rate and charges; i.e., complete name and address of the shipper, consignee, and intermediate stops, job time start, job time stop, and break times. All these items need to be recorded on the bill of lading as well as ensuring both customers and employees initial or sign at the proper locations on both bills of lading and estimate form, etc.

The estimators will also be trained to ensure that estimate forms (binding and non-binding), and inventory forms are completed as required by the commission's rules and regulations.

FORMS:

Advertisement: We are in the process of adding our HG permit number on the letter heads, business cards, and all other forms of advertisements.

Estimate Forms: We are in the process of revising both estimate forms (binding and non-binding) to meet the commission's rules and regulations. We are also in the process of obtaining inventory forms to use when a written estimate is requested and a walk-through is conducted.

Bills of Lading: We have advised the Commission of our problem in obtaining bills of lading to meet the Commission's rules and regulations.

In the past we have purchased our bills of lading from the Washington Movers Conference without being a member of the Mover's Conference. The Mover's Conference has stopped selling their forms to non-members. We've made application to become a member of the Mover's

Conference sometime in September of 2004 and to this date we haven't been notified one-way or another if our application has been granted or denied.

We have also checked with printer companies as to the cost of printing bills of lading that meet the Commission's requirements. At the moment the expense to have a printing shop print the bills of lading for us is too high. We are still searching for a printing company that can print bills of lading at a reasonable price.

Foster Hernandez will be providing training of all staff members and employees on the proper way bills of lading, binding or non-binding estimate forms and inventory will begin completed. Training will also be provided to staff members on the proper use of Tariff 15-A to ensure appropriate rates are charged.

Training will start in February of this year when Foster Hernandez makes his next visit.

In Closing:

I'm also in the process of hiring a part-time office helper to assist with the filing and reviewing of bills of lading and written estimates for proper completion.

Sincerely,



Michael Meyer
TempStore Moving Co.
Toll-Free: 800-936-5674
Fax: 206-764-7834
Mobile: 206-755-0101
<http://www.tempstore.net>
e-mail: info@tempstore.net

cc: Foster Hernandez, Compliance

ADDITIONAL INFORMATION:

=====

TempStore Moving Company provides moving, storage, and shipping solutions both intrastate and across the nation. The main office address is located in Seattle, WA. The Company is registered with numerous State and Interstate Regulatory Authorities associated with the moving business including the United Department Transportation # (DOT): 970528, the Interstate Commerce Commission # (ICC): MC429226 and the Washington State Utilities Commission # (WUTC): HG60620. Further information on the company may be found online at: www.tempstore.net.

TEMPSTORE MOVING COMPANY
HG 60620 MC 429226 DOT 970528
P. O. Box 81064
Seattle, WA. 98108
1 800 936 5674
Fax: 206 764 7834

February 28, 2005

Betty Young
Washington Utilities & Transportation Commission
P.O. Box 47250
Olympia, WA 98504-7250

RECEIVED

MAR 02 2005

WASH. UT. & TP. COMM

Dear: Ms. Young

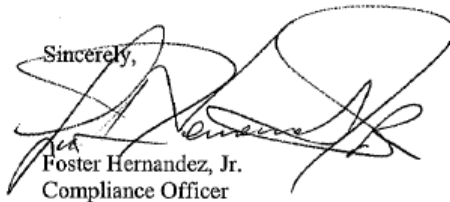
In reply to your e-mail sent on February 22, 2005 you requested additional information on estimated time for completion of training of staff and employees and the correction of the Interstate bill of lading for intrastate shipments.

At this time we are looking of completing the training of employees and staff by March 23, 2005. As stated in our March 31, 2005 reply training will consist of the proper way to complete the bill of lading, binding and non-binding estimate form, inventory forms and the proper use of Tariff 15-A.

We have started using Uniform Household Bill of Lading that you have e-mailed us for the intrastate household goods shipments. Thank you for your assistance with obtaining a bill of lading. For your information, again to this date we have not heard from the Washington Movers Conference on our application to join the Movers Conference.

We've also started adding our HG permit number to all our advertisements and plan to have this completed by March 28, 2005.

Sincerely,



Foster Hernandez, Jr.
Compliance Officer

APPENDIX C



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250
(360) 664-1160 • TTY (360) 586-8203

August 17, 2005

Michael Meyer
Cavlogix Corporation, d/b/a TempStore Moving Company
PO Box 81064
Seattle, WA 98108

Dear Mr. Meyer:

In September 2004, Business Practices Investigations Staff began an audit of Cavlogix Corporation, d/b/a TempStore Moving Company (TempStore). The purpose of the audit was to review company records, policies, and processes of TempStore. Staff used this information to evaluate the company's business practices and to determine how those practices complied with Commission laws and rules relating to household goods carriers.

In December 2004, Staff provided TempStore with an audit report that identified specific areas of non-compliance with Commission rules, along with recommendations for coming into compliance in each area. In response, TempStore provided a compliance plan that explained what actions the company intended to take, including an estimated completion date, to come into compliance with each issue identified.

The Commission is conducting a post-audit review of TempStore's records to ensure that the company is following its compliance plan. Accordingly, please provide the following information and/or documents:

- A copy of TempStore's letterhead and any advertisements.
- A copy of TempStore's bill of lading.
- A copy of TempStore's non-binding and binding estimate forms.



Cavlogix Corporation, d/b/a TempStore Moving Company
August 17, 2005
Page 2

- For every in-state residential move performed from May 1 through May 31, 2005, please provide all supporting documents related to each customer's move, including, but not limited to: the bill of lading, estimate, supplemental estimate, certified scale weight slips, any record that documents the constructive weight of the shipment, inventory records, commercial ferry receipts, all documents related to the storage of goods in transit, etc.

Please respond with the requested documents, papers, and information no later than September 16, 2005. The information should be sent to Betty Young, Compliance Specialist, Business Practices Investigations Section. Ms. Young can be reached at 360-664-1202, or by e-mail at byoung@wutc.wa.gov.

Sincerely,



Carole J. Washburn
Executive Secretary

APPENDIX D



P.O. Box 81064
Seattle, WA 98108
(800) 936-5674
W.U.T.C. HG60620
www.tempstore.net

September 12, 2005

Carole Washburn
Washington Utilities and Transportation Commission
P.O. Box 47250
Olympia, WA 98504-7250

Dear Ms. Washburn:

Please find enclosed the copies that were requested by the commission in the follow-up to our original audit from December 2004. I have included the following pertinent documents:

- TempStore's letterhead
- TempStore's Bill Of Lading
- TempStore's estimate forms for binding and non-binding types
- Actual Bills of Lading and supporting documents for every move through the period from May 1, 2005 through May 31, 2005.

I would also like to take a moment to introduce myself to yourself and the commission, as I am the new operations manager that Michael Meyer hired in late July. I have a background in compliance management most recently working with the mobile fleet fueling division of PetroCard Fuel Systems of Kent, Washington. I am excited about the opportunity to maintain a safe and compliant operation at TempStore Moving Company and look forward to positive relations with the commission and our customers.

Michael has relocated to Augusta, Georgia for a period of up to one year to pursue other interests. Therefore, I will be your point of contact for any future correspondence and I will be happy to make myself available to answer any questions you may have. I have included my direct number below as well as my email address.

Best regards,

A handwritten signature in cursive script that reads 'Chris Jennings'.

Chris Jennings
Operations Manager
TempStore Moving Company, Inc.
Direct: (206) 437-1193
Email: cjennings@tempstore.net

Enclosures

cc: Foster Hernandez
Michael Meyer
File

RECEIVED
RECORDS MANAGEMENT
05 SEP 14 AM 7:42
STATE OF WASH.
UTIL. AND TRANSP.
COMMISSION

APPENDIX E



P.O. Box 81064
Seattle, WA 98108
(800) 936-5674
W.U.T.C. HG60620
www.tempstore.net

STATE OF WASH.
WUTC

September 30, 2005

Betty Young
Washington Utilities and Transportation Commission
P.O. Box 47250
Olympia, WA 98504-7250

Dear Betty:

Please find enclosed the copies of our Bills Of Ladings, which you requested from August 1, 2005 through August 20, 2005. This new BOL form is much better than the ones used previously by TempStore Moving Company.

There are a few documents that have the estimate category incorrectly initialed as if there were an estimate given. No estimates were done on any jobs in that time period. This was simply the customer marking it incorrectly and the driver not paying attention to it at the time so that he/she could advise the customer properly.

If you have any questions, please feel free to contact me with them at your convenience. Thank you for the opportunity to provide documents to the commission that show the tremendous progress this company has made in a short time with our compliance matters. Although, there is still work to be done I am sure you will agree with me and applaud the accomplishments to date.

Sincerely,

A handwritten signature in black ink that reads "Chris Jennings".

Chris Jennings
Operations Manager
TempStore Moving Company, Inc.
Direct: (206) 437-1193
Email: cjennings@tempstore.net

Enclosures

cc: Foster Hernandez
Michael Meyer
File

APPENDIX F

**TempStore Moving Company HG 60620
P.O. Box 81064
Seattle, WA. 98108**

HOUSEHOLD GOODS NON-BINDING ESTIMATE OF COST OF SERVICE

Name of shipper _____ Phone No. _____ Date: _____
 Address of shipper _____ Zip Code _____
 Moving from: City/State/Zip _____
 Moving to: City/State/Zip _____

IMPORTANT NOTICE: A non-binding estimate covers only the articles and services. It is not a warranty or representation that the actual charges will not exceed the amount of the estimate. If you request additional services to complete the move or add articles to the inventory attached to this estimate, the household goods mover must prepare a supplemental estimate which will change the amount of the original estimate.

If the total tariff charges for the listed articles and services exceed this estimate by more than ten percent, upon your request, the carrier must relinquish possession of your shipment upon payment of the maximum amount of 110% of the amount of the estimate (and any supplement estimate). You are obligated to pay the balance of the total charges within 30 days.

Household goods carriers are required by law to collect transportation and other incidental charges on the basis of rates shown in their lawfully published tariffs, except as provided below:

- (1) A household goods carrier may not charge more than twenty-five percent more than its written non-binding estimate for time charges for a local hourly rated move nor can the household goods carrier charge more than the written non-binding estimate for accessorial and other services not related to time, unless the household goods carrier prepares and the shipper signs a supplemental estimate.
- (2) A household goods carrier may not charge more than fifteen percent above your written estimate for a long-distance-rated move, unless household goods carrier prepares and you sign a supplemental estimate.

ESTIMATE COST OF SERVICE

HOURLY RATED SHIPMENT (under 35 miles)

Carrier employees, _____ hours @ \$ _____ per hour\$ _____
 Carrier Vans, _____ hours @ \$ _____ per hour\$ _____

Packing Date Requested _____

MILEAGE RATED SHPMENTS: (over 35 miles or transportation to storage in transit)

Miles _____ pounds @ _____ per pound\$ _____
 OVERTIME: _____ # personnel, _____ # hours @ _____ per hour\$ _____

Loading Date Requested _____

BRIDGE OR FERRY TOLLS (Estimated)\$ _____

VALUATION CHARGES (choose one):

60 cents per pound per article.....\$ No Charge
 Deprecated value protection \$ _____ per \$100 declared value.....\$ _____
 Replacement cost, with deductible \$ _____ per \$100 declared value.....\$ _____
 Replacement cost, with no deductible \$ _____ per \$100 declared value.....\$ _____

Delivery Date or period of time requested _____

STORAGE

_____ pounds, @ \$ _____ per 100 pounds, for each 30 days or fraction\$ _____
 Warehouse Handling _____ pounds @ \$ _____ per 100 pounds\$ _____

SUMMARY OF CHARGES

OTHER SERVICES

Split pickup, split delivery or stop in transit (to partially load or unload or both)\$ _____
 Servicing of appliances\$ _____
 Hoisting, lowering, etc.\$ _____
 Piano/organ carry\$ _____
 Bulky articles\$ _____
 Stairs/elevator\$ _____
 Long carry\$ _____
 Other\$ _____
 Other\$ _____

Moving\$ _____
 Storage\$ _____
 Packing/Unpacking\$ _____
 Other\$ _____
 Estimated total cost\$ _____
 Maximum amount to be paid on delivery (estimated plus 10%)\$ _____

PACKING, UNPACKING AND CONTAINERS

Quantity	Charge per unit	Total		Total
Dish packs or barrels _____	_____	\$ _____	Mattress ctn. Crib _____	\$ _____
Cartons over 1-1/2 cu ft _____	_____	\$ _____	Foam Sets _____	\$ _____
Cartons over 3 cu ft _____	_____	\$ _____	Glass Packs _____	\$ _____
Cartons over 4-1/2 cu ft _____	_____	\$ _____	Crate, size _____	\$ _____
Cartons over 6 cu ft _____	_____	\$ _____	Crate, size _____	\$ _____
Wardrobes _____	_____	\$ _____		
Mattress ctn. Single _____	_____	\$ _____	Estimated Total Cost	\$ _____
Mattress ctn. double _____	_____	\$ _____		
Mattress ctn. Queen _____	_____	\$ _____		
Mattress ctn. King _____	_____	\$ _____		

Estimator's Signature _____

Estimator's Title _____

Shipper's Signature _____

Date Signed _____

[Faint handwritten notes and signatures]

TEMPSTORE MOVING CO. HG 60620
WUTC# HG60620 – DOT#970528 – MC# 429226
 P.O. Box 81064 Seattle, WA 98108
 Toll-Free: 800-936-5674

HOUSEHOLD GOODS BINDING ESTIMATE OF COST OF SERVICES

IMPORTANT NOTICE: This is a binding estimate. It is representation of the actual charges which will apply on this shipment. If you change the conditions of the shipment (request additional services, add items to be shipped, etc.), the household goods carrier must prepare a supplemental estimate which will change the amount of the estimate for the shipment.

Name of shipper _____ Phone No. _____ Date: _____
 Address of shipper _____ Zip Code _____
 Moving from: City/State/Zip _____
 Moving to: City/State/Zip _____
 Shipper's destination contact person: _____ Phone No. _____

ESTIMATE COST OF SERVICE

HOURLY RATE SHIPMENTS (under 35 miles) **Estimated Charges**
 Carrier employees, _____ hours @ \$ _____ per hour \$ _____
 Carrier Vans, _____ hours @ \$ _____ per hour..... \$ _____

MILEAGE RATED SHIPMENTS (over 35 miles or transportation to storage-in-transit)
 Miles _____ pounds @ _____ per pound \$ _____

OVERTIME: _____ # personnel, _____ #hours @ \$ _____ per hour\$ _____

BRIDGE OR FERRY TOLLS (Estimate).....\$ _____

VALUATION CHARGES (choose one):
 60 cents per pound article.....\$ **No Charge**
 Depreciated value protection \$ _____ per \$100 declared value.....\$ _____
 Replacement cost, with deductible \$ _____ per \$100 declared value.....\$ _____
 Replacement cost, without deductible \$ _____ per \$100 declared value.....\$ _____

STORAGE
 _____ pounds, @\$ _____ per 100 pounds, for each 30 days or fraction\$ _____
 Warehouse Handling _____ pounds @\$ _____ per 100 pounds.....\$ _____

OTHER SERVICES
 Split pickup, split delivery or stop in transit (to partially load or unload or both).....\$ _____
 Servicing of appliances\$ _____
 Hoisting, lowering, etc.....\$ _____
 Piano/organ carry.....\$ _____
 Bulky articles.....\$ _____
 Stairs/elevator.....\$ _____
 Long carry.....\$ _____
 Other.....\$ _____
 Other.....\$ _____

Packing Date Requested	
Loading Date Requested	
Delivery Date of period of time requested	

SUMMARY OF CHARGES	
Moving	\$ _____
Storage	\$ _____
Packing/Unpacking	\$ _____
Other	\$ _____
Estimated total cost	\$ _____

PACKING, UNPACKING AND CONTAINERS

	Quantity	Charge per unit	Total
Dish packs or barrels			\$
Cartons over 1-1/2 cu. ft.			\$
Cartons over 3 cu. ft.			\$
Cartons over 4-1/2 cu. ft.			\$
Cartons over 6 cu. ft.			\$
Wardrobes			\$
Mattress ctn. Single			\$
Mattress ctn. Double			\$
Mattress ctn. Queen			\$
Mattress ctn. King			\$
Mattress ctn. Crib			\$
Foam sets			\$
Glass Packs			\$
Crate, size			\$
Crate, size			\$
Estimated Total Cost			\$ _____

REMARKS

Estimator's Signature _____

Estimator's Title _____

Shipper's Signature _____

Date Signed _____

APPENDIX G

TempStore Moving Company HG 60620
P.O. Box 81064
Seattle, WA. 98108

HOUSEHOLD GOODS NON-BINDING ESTIMATE OF COST OF SERVICE

Name of shipper Kirsten Mackay Phone No. 425-985-4987 Date: 4/20/2005
 Address of shipper 141 42nd Ave Sam Zip Code 98074
 Work Phone _____ Cell Phone _____ E-Mail Address Kirsten.mackay@cingular.com
 Moving from: City/State/Zip Sammamish, WA
 Moving to: City/State/Zip Redmond, WA
 Intermediate Stops: City/State/Zip _____
 Shipper's destination contact person: K. Mackay Phone No. 425-985-4987

IMPORTANT NOTICE: A non-binding estimate covers only the articles and services. It is not a warranty or representation that the actual charges will not exceed the amount of the estimate. If you request additional services to complete the move or add articles to the inventory attached to this estimate, the household goods mover must prepare a supplemental estimate which will change the amount of the original estimate.

If the total tariff charges for the listed articles and services exceed this estimate by more than ten percent, upon your request, the carrier must relinquish possession of your shipment upon payment of the maximum amount of 110% of the amount of the estimate (and any supplement estimate). You are obligated to pay the balance of the total charges within 30 days.

Household goods carriers are required by law to collect transportation and other incidental charges on the basis of rates shown in their lawfully published tariffs, except as provided below:

- (1) A household goods carrier may not charge more than twenty-five percent more than its written non-binding estimate for time charges for a local hourly rated move nor can the household goods carrier charge more than the written non-binding estimate for accessororial and other services not related to time, unless the household goods carrier prepares and the shipper signs a supplemental estimate.
- (2) A household goods carrier may not charge more than fifteen percent above your written estimate for a long-distance-rated move, unless household goods carrier prepares and you sign a supplemental estimate.

ESTIMATE COST OF SERVICE

HOURLY RATED SHIPMENT (under 35 miles)
 4 Carrier employees, 15 hours @ \$135 per hour 2 days \$ 2025
 Carrier Vans, _____ hours @ \$ _____ per hour \$ _____

MILEAGE RATED SHIPMENTS: (over 35 miles or transportation to storage in transit)
 Miles _____ pounds @ _____ per pound \$ N/A
 OVERTIME: # personnel, _____ # hours @ _____ per hour \$ N/A

BRIDGE OR FERRY TOLLS (Estimated) \$ N/A
VALUATION CHARGES (choose one):
 60 cents per pound per article \$ No Charge
 Depreciated value protection \$ _____ per \$100 declared value \$ _____
 Replacement cost, with deductible \$ _____ per \$100 declared value \$ _____
 Replacement cost, with no deductible \$ _____ per \$100 declared value \$ _____

STORAGE
 _____ pounds, @ \$ _____ per 100 pounds, for each 30 days or fraction \$ N/A
 Warehouse Handling _____ pounds @ \$ _____ per 100 pounds \$ _____

OTHER SERVICES
 Split pickup, split delivery or stop in transit (to partially load or unload or both) \$ N/A
 Servicing of appliances \$ _____
 Hoisting, lowering, etc. \$ _____
 Piano/organ carry \$ _____
 Bulky articles \$ _____
 Stairs/elevator \$ _____
 Long carry \$ _____
 Other \$ _____
 Other \$ _____

Packing Date Requested 5/12
 Loading Date Requested 5/13
 Deliver Date or period of time requested 5/12-13

SUMMARY OF CHARGES
 Moving \$ 2025
 Storage \$ N/A
 Packing/Unpacking \$ N/A
 Other \$ 175
 Estimated total cost \$ 2200

Maximum amount to be paid on delivery (estimated plus 10%) \$ 2420

(included in Hourly Rate)

PACKING, UNPACKING AND CONTAINERS

	Quantity	Charge per unit	Total			
Dish packs or barrels	10	2	\$ 20	Mattress ctn. Crib	N/A	\$
Cartons over 1-1/2 cu ft	20	3	\$ 60	Foam Sets	N/A	\$
Cartons over 3 cu ft	20	3.5	\$ 70	Glass Packs	2	\$ 10
Cartons over 4-1/2 cu ft	20	4	\$ 80	Crate, size	N/A	\$
Cartons over 6 cu ft		N/A	\$	Crate, size	N/A	\$
Wardrobes	15	6	\$ 90	Estimated Total Cost		\$ 357
Mattress ctn. Single	4	3	\$ 12			
Mattress ctn. double		N/A	\$			
Mattress ctn. Queen	5	3	\$ 15			
Mattress ctn. King		N/A	\$			

Chic
Page

~~\$ 357~~ x 7% discount for job.
\$ 175

Remarks:

Billed only for what you use on job.

Estimator's Signature [Signature]

Estimator's Title Manager

Shipper's Signature [Signature]

Date Signed 4/20/2005



FINAL BILL AT TIME OF CUSTOMER OF MOVE
/ SEE ESTIMATE FOR COST


ACCEPTED BY CLIENT: *Justin Mackay*
DATE: *4-30-2005*

DELIVERY PERSON: *Alfred V. Gyl*

	Packing Prices:	Cost:	DROP OFF - MACKAY:	Cost:	Used	Return	Final Cost:
	Description: <i>VS</i>	<i>1.50</i>	<i>15</i>	<i>22.50</i>			
1	Box - Small - 1.5 Cu Feet - New	\$2.00	<i>12 + 30</i>	<i>42</i>			
2	Box - Medium - 3.0 Cu Feet - New	\$3.00	<i>12 + 30</i>	<i>42</i>			
3	Box - Large - 4.5 Cu Feet - New	\$4.00	<i>20</i>	<i>80</i>			
4	Box - XLarge - 6.0 Cu Feet - New	\$5.00		<i>0</i>			
5	Box - Dish Pack	\$8.00	<i>4</i>	<i>32</i>			
6	Box - Wardrobe - Small - New / w/ Bars	\$5.50	<i>10</i>	<i>55</i>			
7	Box - Wardrobe - Large - New	\$8.00		<i>0</i>			
8	Box - Misc. XXL	\$15.00		<i>0</i>			
9	Box - Lamp	\$3.00	<i>4</i>	<i>12</i>			
10	Box - Mirror - small	\$5.00	<i>5</i>	<i>25</i>			
11	Box - Mirror - large	\$7.00	<i>2</i>	<i>14</i>			
12	Box - Mattress	\$12.00		<i>0</i>			
13	Box - Bicycle	\$7.00		<i>0</i>			
14	Box - Misc. XXL	\$5.00		<i>0</i>			
15	Box - Small - 1.5 Cu Feet - Recycle	\$1.00		<i>0</i>			
16	Box - Medium - 3.0 Cu Feet - Recycle	\$2.00		<i>0</i>			
17	Box - Large - 4.5 Cu Feet - Recycle	\$3.00		<i>0</i>			
18	Box - XLarge - 6.0 Cu Feet - Recycle	\$4.00		<i>0</i>			
19	Box - Wardrobe - Small - Recycle	\$4.00		<i>0</i>			
20	Box - Wardrobe - Large - Recycle	\$5.00		<i>0</i>			
21	Box - Bicycle - Recycle	\$4.00		<i>0</i>			
22	Box - Misc. XXL Furniture	\$9.00		<i>0</i>			
23	Cardboard Sheets	\$1.00		<i>0</i>			
24	Tape - Packing	\$2.50	<i>1 case 18</i>	<i>45</i>			
25	Tape - Masking	\$1.25		<i>0</i>			
26	Tape - Blue Carpenter	\$3.00		<i>0</i>			
27	Bubble Wrap - Small - (per foot)	\$1.25		<i>0</i>			
28	Bubble Wrap - Large - (per foot)	\$1.00		<i>0</i>			
29	White packing paper (per box)	\$8.00	<i>2 Spds 2</i>	<i>16</i>			
30	Newsprint (per box / ream)	\$5.00		<i>0</i>			
31	Multi-Ply Packing Paper (per sheet)	\$1.00		<i>0</i>			
32	Shrinkwrap (based on 5 * 5 * 5 item)	\$5.00		<i>0</i>			
33	Mattress Bags (Queen)	\$3.00	<i>2</i>	<i>6</i>			
	Mattress Bags (King)	\$4.00	<i>3</i>	<i>12</i>			
34	Pallets	\$25.00		<i>0</i>			
35	Wood Crate	Depends on Size					
	Total:						

* second pickup / dropoff on 5/10/2005

APPENDIX H



TempStore
Moving Company

P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

DATE: 8/16/05

Uniform Household Goods Bill of Lading Intrastate (Local) 10:00-12:00

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)
The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: [Signature] Date: 8/16/05

FROM		TO	
Customer: Dana Taysavant	Customer: Dana Taysavant	Customer: Dana Taysavant	Customer: Dana Taysavant
Pick Up Address: 12433 Admiralty Way # K-202,	Delivery Address: 1116 Mill Creek Blvd. #B-302	Delivery Address: 1116 Mill Creek Blvd. #B-302	Delivery Address: 1116 Mill Creek Blvd. #B-302
City: Everett ST: WA Zip: 98204	City: Mill Creek ST: WA Zip: 98021	City: Mill Creek ST: WA Zip: 98021	City: Mill Creek ST: WA Zip: 98021
Stops At: None	Storage-In-Transit At: None	Storage-In-Transit At: None	Storage-In-Transit At: None

WEIGHT OF SHIPMENT: (Weight Tickets Attached)		JOB CODE		PICKED UP BY	
Gross Weight: _____ Lbs. Weighmaster: _____	Gross Weight: _____ Lbs. Weighmaster: _____	PACKED BY		BOOKED BY	
Tare Weight: _____ Lbs. Weighmaster: _____	Tare Weight: _____ Lbs. Weighmaster: _____	DATE	TRIP NO.	DRIVER NAME	EQUIP NO.
Net Weight: _____ Lbs.	Net Weight: _____ Lbs.				

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signature: [Signature]

Exclusive Use: Customer requests exclusive use of vehicle by signing below.
Customer Signature: [Signature]

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

Mover 1 Start Time: <u>9:30</u> Stop Time: <u>12:30</u> Total Hrs: <u>2 1/2</u>	Mover 2 Start Time: <u>10:00</u> Stop Time: <u>12:30</u> Total Hrs: <u>2 1/2</u>
Mover 3 Start Time: _____ Stop Time: _____ Total Hrs: _____	Mover 4 Start Time: _____ Stop Time: _____ Total Hrs: _____

The customer and carrier agree that payment, at time of delivery, will be made by:
 Cash Money Order Certified Check Credit Card
 Personal Check Business Check Debit Card
 If credit arrangements are made, bill to:
 NAME: _____
 ADDRESS: _____
 ADDITIONAL: _____

ESTIMATES: The customer must initial the option selected.
 I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
 I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.
 Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.
 Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
 Or, I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
 Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
 Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
 This shipment is to be placed in storage for a period of less than 90 days (Storage-in-Transit).
 This shipment is to be placed in storage for more than 90 days (Permanent Storage).
 This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

DETAILS OF PACKING MATERIALS			
Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			
TOTAL PACKING AND MATERIALS CHARGES			\$

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED			
Service:			<u>175.00</u>
Transportation _____ mi. Wt. _____			
Trans. Storage-in-transit shipment			
Warehouse to destination: _____ mi.			
Storage-in-transit, 30 days or fraction			
Warehouse handling in/out			
Storage Valuation charges			
Extra Stops			
Hoisting or piano handling			
Stairs, elevators, long carries			
Transportation valuation charges			
Fuel Surcharge		@ 1.5%	<u>\$2.63</u>
Other:			
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES			\$
TOTAL BOTH SECTIONS			\$176.63
(-LESS AMOUNT PREPAID)			\$
BALANCE DUE FROM CUSTOMER			\$177.63

All goods were received in good condition, except as noted on this contract or on the inventory form.

Receipt for goods: _____ Driver's Signature _____ Date _____ Delivery receipt: [Signature] Customer's Signature _____ Date 8/16/05

Damage Noted: _____

APPENDIX I



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

_____	Pack
_____	Load
_____	Del
_____	Sales
_____	Coord
_____	Job Code

Uniform Household Goods Bill of Lading

This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or deliver the goods shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From Customer <u>Janine Porter</u> Address <u>2243 Moon Valley Rd</u> City/State/Zip <u>North Bend</u> H/Phone _____ Cell <u>125-736-4093</u> W/Phone <u>425-580-1555</u> Page _____ email _____ Add'l Pickup _____ Billing Address <u>PO Box 1016, Fall City WA 98024</u>	To Customer <u>same (storage unit)</u> Address <u>15727 56 140th, North Bend</u> City/State/Zip _____ H/Phone _____ Cell _____ W/Phone _____ Page _____ email _____ Extra-Stop <u>8357 16th Ave NW, Seattle</u> Other _____
--	---

Day	Hours	Personnel	Start	Arrive	Breaks	Report	End	Total Hrs	Rate	Charges
5/4/05	22	Bobby Sarin	8:15	9:30		3:30	10	174	10.00	542.50

Storage
 Shipment will be placed into storage, the customer must initial option selected.
 Shipment is to be placed in storage for a period of less than 90 days (Storage-in-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.
 Shipment is to be placed in storage for more than 90 days.
 I certify that I have requested Storage-In-Vehicle for a period of _____ days at an agreed upon rate of \$ _____ per day.

Storage In Transit	Cuft	_____
Charges to/from Warehouse	lbs at _____ Cwt	_____
Storage per month	lbs at _____ Cwt	_____
Warehouse Handling in/out	lbs at _____ Cwt	_____
Add'l Valuation \$	at _____ per \$100	_____
Permanent Storage	Cuft	_____
at _____	at _____ per hour	_____
to _____ per month	lbs at _____ Cwt	_____
Warehouse Handling in/out	lbs at _____ Cwt	_____
Add'l Valuation \$	at _____ per \$100	_____
Pickup/Load Vaults	at _____ per vault	_____
oversized Items	at _____ ea	_____
Storage	months _____ per month	_____
Delivery of Vaults	_____	_____

Mileage Rated Moves

Actual Shipment Weight(lbs) Gross	_____	Tare _____	Net _____
Expedited Shipment Wt (cust sign here)	_____	_____	Net _____
Billed shipment weight	_____ lbs at _____	_____ Cwt	_____
Stairs	_____ at _____	_____ Cwt	_____
Distance Carry	_____ at _____	_____ Cwt	_____
Elevator	_____ at _____	_____ Cwt	_____
Extra pickup/del	_____ at _____	_____ ea	_____
Piano _____	_____ at _____	_____ per stop	_____
Piano carry	_____ at _____	_____ ea	_____
Overtime Labor	_____ at _____	_____ per hour	_____
Mileage	_____	_____	_____
Fuel Surcharge	1 1/2	_____	8.14

Materials, Additional Services

Dishpacs	_____ at _____	_____ per unit	_____
Less than 3.0 cuft ctns	_____ at _____	_____ per unit	_____
3.0 cuft ctns	_____ at _____	_____ per unit	_____
4.5 cuft ctns	_____ at _____	_____ per unit	_____
6.0 cuft ctns	_____ at _____	_____ per unit	_____
Wardrobe ctns	_____ at _____	_____ per unit	_____
Crib matt	_____ at _____	_____ per unit	_____
Single matt	_____ at _____	_____ per unit	_____
Double matt	_____ at _____	_____ per unit	_____
Queen matt	_____ at _____	_____ per unit	_____
King matt	_____ at _____	_____ per unit	_____
King box ctn	_____ at _____	_____ per unit	_____
Mirror ctn	_____ at _____	_____ per unit	_____
Crates cuft	_____ at _____	_____ per unit	_____
Appliances	_____ at _____	_____ per unit	_____
Add'l Labor	_____ at _____	_____ per hour	_____
Ferry or Bridge Toll	_____ at _____	_____ per unit	_____

Declarations (Customer must initial preferences)
Rights and Responsibilities Guide:
 The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer."
Valuation: The customer must initial option selected
 Basic Valuation: I release this shipment to a value of \$.60 per pound per article
 Depreciated Valuation: I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$ _____ per \$100 of declared value. Or:
 I declare a lump sum total dollar valuation of this entire shipment of \$ _____ and select the following:
 Replacement Cost Coverage/\$300 Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.
 Replacement Cost Coverage/No Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.
Estimates: The customer must initial option selected
 I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate
 I understand this shipment is moving under a non-binding estimate. If the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 110% of the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

Subtotal Moving, Packing, Materials, Storage Charges	550.64
Additional Valuation	_____
Total Relocation Charges	550.64
Total Amount Paid	550.64
Balance Due	550.64

Payment (Customer must initial): The customer and carrier agree that payment, at time of delivery, will be made by:
 _____ Cash _____ Other _____

I have read and understand this contract thoroughly, and release the goods to the carrier subject to the terms and conditions above.
 Janine Porter 05/04/05
 Legals of Goods/Customer Date

All goods were received in good condition, except as noted on this contract or on the inventory form.
 Carmo Karol 5/4/05
 Legals of Goods/Carrier Date



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 HG-60620 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

Pack	_____
Load	_____
Del	_____
Sales	_____
Coord	_____
Job Code	_____

Uniform Household Goods Bill of Lading

This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or transport the goods shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From	To
Customer: <u>Megan Goicoechea</u>	Customer: <u>Blk 3644 Phinney #5</u>
Address: <u>1001 Baylston Ave E</u>	Address: <u>3644 Phinney #5</u>
City/State/Zip: <u>Seattle WA 98102</u>	City/State/Zip: <u>Seattle WA 98103</u>
V/Phone: _____ Cell: _____	H/Phone: _____ Cell: _____
V/Phone: _____ Page: _____	W/Phone: _____ Page: _____
email: _____	email: _____
Address: _____	Extra-Stop: _____
Address: _____	Other: _____

Hourly Rated Moves

Day	Start	Arrive	Breaks	Depart	End	Total Hrs	Rate	Charges
5/13/05	8:15	11:15		2:15	2:45	6.5	100.00	659.75

Storage

shipment will be placed into storage. the customer must initial option selected.
 ___ Shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.
 ___ Shipment is to be placed in storage for more than 90 days.
 ___ I certify that I have requested Storage-In-Vehicle for a period of _____ days at an agreed upon rate of \$_____ per day.

Storage in Transit	_____	Cuft	_____
Days to/from Warehouse	_____	lbs at	_____ Cwt _____
Storage per month	_____	lbs at	_____ Cwt _____
Warehouse Handling In/out	_____	lbs at	_____ Cwt _____
Additional Valuation \$	_____	at	_____ per \$100 _____
Permanent Storage	_____	Cuft	_____
at	_____	at	_____ per hour _____
Storage per month	_____	lbs at	_____ Cwt _____
Warehouse Handling In/out	_____	lbs at	_____ Cwt _____
Additional Valuation \$	_____	at	_____ per \$100 _____
Pickup/Load Vaults	_____	at	_____ per vault _____
Overstuffed Items	_____	at	_____ ea _____
Storage	_____	months	_____ per month _____
Delivery of Vaults	_____		_____

Mileage Rated Moves

Actual Shipment Weight(lbs) Gross	_____	Tare	_____	Net	_____
Expedited Shipment Wt (cust sign here)	_____			Net	_____
Billed shipment weight	_____	lbs at	_____	Cwt	_____
Stairs	_____	at	_____	Cwt	_____
Distance Carry	_____	at	_____	Cwt	_____
Elevator	_____	at	_____	Cwt	_____
Extra pickup/del	_____	at	_____	ea	_____
Piano	_____	at	_____	per stop	_____
Piano carry	_____	at	_____	ea	_____
Overtime Labor	_____	at	_____	per hour	_____
Mileage	_____				_____
Fuel Surcharge	1.72%				9.75

Materials, Additional Services

Dishpacks	_____	at	_____	per unit	_____
Less than 3.0 cuft ctns	_____	at	_____	per unit	_____
3.0 cuft ctns	_____	at	_____	per unit	_____
4.5 cuft ctns	_____	at	_____	per unit	_____
6.0 cuft ctns	_____	at	_____	per unit	_____
Wardrobe ctns	_____	at	_____	per unit	_____
Crib matt	_____	at	_____	per unit	_____
Single matt	_____	at	_____	per unit	_____
Double matt	_____	at	_____	per unit	_____
Queen matt	_____	at	_____	per unit	_____
King matt	_____	at	_____	per unit	_____
King box ctn	_____	at	_____	per unit	_____
Mirror ctn	_____	at	_____	per unit	_____
Crates cuft	_____	at	_____	per unit	_____
Appliances	_____	at	_____	per unit	_____
Add'l Labor	_____	at	_____	per hour	_____
Ferry or Bridge Toll	_____	at	_____		_____

Declarations (Customer must initial preferences)

Rights and Responsibilities Guide:
 ___ The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer".
Valuation: The customer must initial option selected
 ___ **Basic Valuation:** I release this shipment to a value of \$.60 per pound per article.
 ___ **Depreciated Valuation:** I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$_____ per \$100 of declared value. Or:
 I declare a lump sum total dollar valuation of this entire shipment of \$_____ and select the following:
 ___ **Replacement Cost Coverage/\$300 Deductible:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$_____ per \$100 of declared value.
 ___ **Replacement Cost Coverage/No Deductible:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$_____ per \$100 of declared value.

Estimates: The customer must initial option selected

___ I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract.
 ___ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate.
 ___ I understand this shipment is moving under a non-binding estimate. If the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 110% of the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

Subtotal Moving, Packing, Materials, Storage Charges	659.75
Additional Valuation	_____
Total Relocation Charges	_____
Total Amount Paid	_____
Balance Due	659.75

Payment (Customer must initial): The customer and carrier agree that payment, at time of delivery, will be made by:
 ___ Cash ___ Other

Comments

I have read and understand this contract thoroughly, and release my goods to the carrier subject to the terms and conditions above.

Megan Goicoechea 5/13/05
 Recipient for Goods/Customer Date
Chris Kemp
 Carrier for Goods/Driver Date

All goods were received in good condition, except as noted on this contract or on the inventory form.
Megan Goicoechea 5/13/05
 Recipient for Goods/Customer Date

Cavlogix Corporation, d/b/a TempStore Moving Company, Post Audit Review Report

TempStore Moving Co.
P.O. Box 81064
Seattle, WA 98108

HG 60620

BILL OF LADING NUMBER _____
DATE ORDER TAKEN _____
MOVE DATE 7-15-05

Bill of Lading
Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to the conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)
The carrier gave me, or I declined, a copy of the brochure "Your Rights and Responsibilities as a Moving Company Customer"
Signature of customer: _____

Customer: Janine Ayler Customer: _____
Pick Up Address: _____ Delivery Address: 11531 Tulare Way W
City: North Bend State: WA Zip: _____ City: Marysville State: WA Zip: 98271
Stops At: _____ Storage-In-Transit At: _____

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight _____ Lbs. Weighmaster _____
Tare Weight _____ Lbs. Weighmaster _____
Net Weight _____

Expedited shipment: Moving at weight of _____ pounds.
Actual weight is: _____ pounds. Agreed to by customer: _____
Customer's Signature: _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below:
Customer's Signature: _____

Note: The customer must indicate choices made on the items shown below by initialing the appropriate line.

PAYMENT: The customer and carrier agree that payment, at time of delivery, will be made by:
_____ cash _____ money order _____ certified check _____ credit card
_____ personal check _____ business check _____ debit card
If credit arrangements are made, bill to:
NAME: _____
ADDRESS: _____

ESTIMATES: The customer must initial the option selected:
_____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
_____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
_____ I understand this shipment is moving under a non-binding estimate.
NOTE: If the charges shown on this bill exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected:
_____ Basic value protection. I release this shipment to a value of 60 cents per pound per article.
_____ Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
or:
_____ I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
_____ Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times weight of shipment.)
_____ Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
_____ This shipment is to be placed in storage for a period of less than 90 days (storage in transit).
_____ This shipment is to be placed in storage for more than 90 days (permanent storage).
_____ This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent storage.

All goods were received in good condition, except as noted on this contract or on the inventory form.
Signature of Driver: James Smith Date: 7/15/05
Signature of Customer: Janine Ayler Date: 07/15/05

Damage noted: _____

JOB CODE _____ PICKED UP BY _____
PACKED BY _____ ORDER BOOKED BY _____

DATE	TRIP NO.	DRIVER	EQUIP. NO

TIME RECORD (Complete start and stop time check)
REG HOURS @ 2 hrs PER HOUR = CHARGES 115.00
OVERTIME HRS @ _____ PER HOUR = CHARGES _____

Person	Start Time	Stop Time	Total Hours
Person 1	<u>8:30</u>	<u>11:30</u>	<u>3 hrs</u>
Person 2	<u>8:30</u>	<u>4:30</u>	
Person 3			
Person 4			

Details of packing and packing materials

Description	Quantity	Rate	Amount
Dish pack			
Cartons - Less than 3 cubic feet			
3 cubic feet			
4-1/2 cubic feet			
6 cubic feet			
6-1/2 cubic feet			
Wardrobe cartons			
Mattress cartons - crib			
Mattress cartons - twin			
Mattress cartons - double			
Mattress cartons - queen			
Mattress cartons - king			
Glass containers minimum			
Glass containers _____ cubic feet			
Boxes or crates minimum			
Boxes or crates _____ cubic feet			
Appliance packing materials			
Other:			
Total packing and materials charges →			

Details transportation, valuation and services provided:

Service:		
Transportation _____ mi. Wt. _____		
Trans. storage-in-transit shipment		
Warehouse to destination: _____ mi.		
Storage-in-transit, 30 days or fraction		
Warehouse handling in/out		
Storage valuation charges		
Extra stops		
Hoisting or piano handling		
Stairs, elevators, long carries		
Transportation valuation charges		
Other: <u>Fuel Surcharge</u>		<u>19.00</u>
Other:		
Total for transportation, valuation, services →		

TOTAL BOTH SECTIONS
LESS AMOUNT PREPAID
BALANCE DUE FROM CUSTOMER 1209.00

APPENDIX J

OCT 10 2005 2:34PM HP LASERJET 3200

p. 2

TempStore Moving Co.
 P.O. Box 81064
 Seattle, WA 98108

AGENT
Temp Store Moving Co.

OWNER'S NAME AND RATING AND NAME
Erica Jones

ORIGINAL DRAINING ADDRESS
1025-219th Pl SW

CITY STATE
Brier WA 98036

DESTINATION
STORAGE IN TRANSIT 71 S. Orcas St., Seattle 98108

FACE NO. *1* NO. OF PAGES *1*

STANDARD REFERENCE NO.
 CONTRACT OR GBL NO.

GOVT. SERVICE ORDER NO.

LAN NUMBER

DESCRIPTIVE SYMBOLS
 BW - BLACK & WHITE TV
 C - COLOR TV
 CP - CARTON PACKED
 FPO - PACKED BY OWNER
 CD - CARRIER DISASSEMBLED
 SW - STRETCH WRAPPED

EXCEPTION SYMBOLS
 D - DENTED
 F - FROZEN
 G - GORDED
 L - LOCKED
 M - MARKED
 ME - MELDOW

LOCATION SYMBOLS
 1. ARM
 2. BOTTOM
 3. CORNER
 4. FRONT
 5. LEFT
 6. LEFT
 7. REAR

NOTE: THE OMISSION OF THESE SYMBOLS INDICATES GOOD CONDITION EXCEPT FOR NORMAL WEAR.

ITEM NO.	CR. REF.	ARTICLES	CONDITION AT ORIGIN	EXCEPTIONS (IF ANY) AT DESTINATION	ITEM NO.	CR. REF.	ARTICLES	CONDITION AT ORIGIN	EXCEPTIONS (IF ANY) AT DESTINATION
1		<i>Old Loue Seat</i>	<i>Good</i>		6				
2		<i>Old Couch</i>	<i>Good</i>		7				
3		<i>Old Barbecue grill w/corer</i>	<i>Good</i>		8				
4		<i>Old Big Screen T.V.</i>	<i>Good</i>		9				
5		<i>Old Area Rug</i>	<i>Good</i>		0				
6					1				
7					2				
8					3				
9					4				
0					5				
1					6				
2					7				
3					8				
4					9				
5					0				
6					1				
7					2				
8					3				
9					4				
0					5				
1					6				
2					7				
3					8				
4					9				
5					0				

ITEM NO. REMARKS/EXCEPTIONS

"WE HAVE CHECKED ALL THE ITEMS LISTED AND NUMBERED 1 TO THAT THIS IS A TRUE AND COMPLETE LIST OF THE GOODS TENDERED AND OF THE STATE OF THE GOODS RECEIVED"

WARNING BEFORE SIGNING CHECK SHIPMENT, COUNT ITEMS AND DESCRIBE LOSS OR DAMAGE IN SPACE ON THE RIGHT ABOVE.

INCLUSIVE AND ACKNOWLEDGE

TAPE LOT NO. *064-070* TAPE COLOR *Orange*

NOS. FROM *(except 065)* THRU

AT ORIGIN	CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER) (SIGNATURE) <i>Erica Jones</i>	DATE <i>8/19/05</i>	AT DESTINATION	CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER) (SIGNATURE)	DATE
	OWNER OR AUTHORIZED AGENT (SIGNATURE)	DATE		OWNER OR AUTHORIZED AGENT (SIGNATURE)	DATE



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 08 / 19 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the back page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."
Customer Signature: X *[Signature]* Date: 8 / 19 / 05

FROM TO
Customer: Erica ~~Smith~~ Jones Customer: Erica ~~Smith~~ Jones
Pick Up Address: 1525 - 219th Pl. SW Delivery Address: 71 S. Orcas St.
City: Brier ST: WA Zip: 98036 City: Seattle ST: WA Zip: 98108
Stops At: Storage-In-Transit At: TempStore Warehouse

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight: _____ Lbs. Weighmaster: _____
Tare Weight: _____ Lbs. Weighmaster: _____
Net Weight: _____ Lbs.

JOB CODE _____ PICKED UP BY _____
PACKED BY _____ BOOKED BY _____

DATE	TRIP NO.	DRIVER NAME	EQUIP NO.
8/19/05	2	Chris Jennings	TS-18

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signature: X _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below.
Customer Signature: X _____

TIME RECORD
2 Men & Truck (1 hour minimum + Travel Time)
3 Reg. Hours @ \$75 Per Hour = charges \$ 225.00
Overtime Hrs. @ _____ Per Hour = charges \$ _____

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

Mover	Start Time	Stop Time	Total Hrs.
Mover 1	11:00	2:00	3
Mover 2	11:00	2:00	3
Mover 3			
Mover 4			

The customer and carrier agree that payment, at time of delivery, will be made by:
Cash _____ Money Order _____ Certified Check Credit Card _____
Personal Check _____ Business Check _____ Debit Card _____
If credit arrangements are made, bill to:

NAME: _____
ADDRESS: _____
ADDITIONAL: _____

ESTIMATES: The customer must initial the option selected.

I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
 I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.

Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.
 Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
Or,
 I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
 Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
 Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)


STORAGE: If shipment will be placed in storage, the customer must initial the option selected:

This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).
 This shipment is to be placed in storage for more than 90 days (Permanent Storage).
 This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			
TOTAL PACKING AND MATERIALS CHARGES			\$ _____
DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED			
Service:			225.00
Transportation _____ mi. W/L _____			
Trans. Storage-in-transit shipment			
Warehouse to destination: _____ mi.			
Storage-in-transit, 30 days or fraction			70.00
Warehouse handling in/out			
Storage Valuation charges			
Extra Stops			
Hoisting or piano handling			
Stairs, elevators, long carries			
Transportation valuation charges			
Fuel Surcharge		@ 1.5%	\$ 3.37
Other:			
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES			\$ _____
TOTAL BOTH SECTIONS			\$ _____
(LESS AMOUNT PREPAID)			\$ _____
BALANCE DUE FROM CUSTOMER			\$ 298.37

All goods were received in good condition, except as noted on this contract or on the inventory form.
Receipt for goods: *[Signature]* Date: 8/19/05 Delivery receipt: X *[Signature]* Date: 8/19/05
Driver's Signature Customer's Signature

APPENDIX K



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

HG-60620

No. _____
 Pack _____
 Load MAY 10 - 2005
 Del _____
 Sales _____
 Coord _____
 Job Code _____

Uniform Household Goods Bill of Lading

I hereby certify that the information on this bill of lading was obtained from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From, to, and if of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or unmove services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From		To	
Customer Name: <u>STEPHANIE GARDY</u>	Customer Name: <u>STEPHANIE GARDY</u>	Address: <u>2000 2nd AVE #1407</u>	Address: <u>3432A 27th AVE NE</u>
City/State/Zip: <u>SEA WA 98112</u>	City/State/Zip: <u>SEA WA 98115</u>	Phone: _____	Phone: <u>206-901-919</u>
Cell Phone: _____	Cell Phone: _____	Page: <u>773-909-1862</u>	Page: _____
Mail Address: _____	Mail Address: _____	Extra-Stop: <u>DOWNTOWN SELF STORAGE</u>	Other: _____

Day	Vans	Personnel	Start	Arrive	Breaks	Depart	End	Total Hrs	Rate	Charges
10-2005	1	ALY	8:30	9:00am	0	5:30	5:45	125	9.44	1186.25
1-9-2005		JAMES	8:30	9:00am		11:30am	12:00pm	6.77	3.76	254.20

2 men work

Storage

Shipment will be placed into storage, the customer must initial option selected.

Shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.

Shipment is to be placed in storage for more than 90 days.

I certify that I have requested Storage-In-Vehicle for a period of _____ days at an agreed upon rate of \$ _____ per day.

Storage In Transit	Cuft	_____	_____
Trans to/from Whse	lbs at	_____	Cwt _____
Storage per month	lbs at	_____	Cwt _____
Whse Handling In/out	lbs at	_____	Cwt _____
Add'l Valuation \$	at	_____	per \$100 _____
Pickup/Load Vaults	at	_____	per vault _____
Storage	months	_____	per month _____

Mileage Rated Moves

Actual Shipment Weight (lbs) Gross	Tare	Net
_____	_____	_____
Expedited Shipment Wt (cust sign here)	_____	_____
Billed shipment weight	lbs at _____	Cwt _____
Stairs	at _____	Cwt _____
Distance Carry	at _____	Cwt _____
Elevator	at _____	Cwt _____
Extra pickup/del	at _____	ea _____
Piano	at _____	per stop _____
Piano carry	at _____	per hour _____
Overtime Labor	at _____	per hour _____
Mileage	_____	_____
Fuel Surcharge	_____	_____

Materials, Additional Services

Dishpacks	at _____	per unit _____
Less than 3.0 cuft ctns	at _____	per unit _____
3.0 cuft ctns	at _____	per unit _____
4.5 cuft ctns	at _____	per unit _____
6.0 cuft ctns	at _____	per unit _____
Wardrobe ctns	at _____	per unit _____
Crib matt	at _____	per unit _____
Single matt	at _____	per unit _____
Double matt	at _____	per unit _____
Queen matt	at _____	per unit _____
King matt	at _____	per unit _____
King box ctn	at _____	per unit _____
Mirror ctn	at _____	per unit _____
Crates cuft	at _____	per unit _____
Appliances	at _____	per unit _____
Add'l Labor	at _____	per hour _____
Ferry or Bridge Toll	at _____	per hour _____

Declarations (Customer must initial preferences)

Rights and Responsibilities Guide: The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer."

Valuation: The customer must initial option selected

Basic Valuation: I release this shipment to a value of \$60 per pound per article.

Depreciated Valuation: I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$ _____ per \$100 of declared value. Or:

I declare a lump sum total dollar valuation of this entire shipment of \$ _____ and select the following:

Replacement Cost Coverage/\$300 Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.

Replacement Cost Coverage/No Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.

Estimates: The customer must initial option selected

I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract.

I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate.

I understand this shipment is moving under a non-binding estimate. If the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

I have read and understand this contract thoroughly, and release my goods to the carrier subject to the terms and conditions above.

Release of Goods/Customer: Stephanie Gardy Date: 5-10-05

Carrier: _____ Date: 10/08

Receipt for Goods/Customer: Stephanie Gardy Date: 5-10-05



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

Pack _____
 Load 25 2005
 Del _____
 Sales _____
 Coord _____
 Job Code _____

Uniform Household Goods Bill of Lading

This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or deliver the goods shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From	To
Customer <u>Ronald Linjak</u>	Customer <u>RONALD LINJAK</u>
Address <u>1129 125th Place NW</u>	Address <u>1942 Westlake Avenue # 2903</u>
City/State/Zip <u>Redmond WA 98052 01013</u>	City/State/Zip <u>Seattle WA 98101</u>
H/Phone _____ Cell <u>425-205-1386</u>	H/Phone _____ Cell <u>425-205-1386</u>
W/Phone _____ Page <u>1386</u>	W/Phone _____ Page <u>1386</u>
email _____	email _____
Add'l Pickup _____	Extra-Stop <u>Metropolitan Tower</u>
Billing Address _____	Other _____

Hourly Rated Moves

Day	Vans	Personnel	Start	Arrive	Breaks	Depart	End	Total Hrs	Rate	Charges
3/3	1	JAMES R. RICO	7:35	7:00	0	7:35	7:00	7.4	97.00	686.35
2005		THOMAS H. HARRIS								

Storage

If shipment will be placed into storage, the customer must initial option selected.
 _____ Shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.
 _____ Shipment is to be placed in storage for more than 90 days.
 _____ I certify that I have requested Storage-In-Vehicle for a period of _____ days at an agreed upon rate of \$_____ per day.

Storage in Transit	Cuft	
Trans to/from Whse	lbs at	Cwt
Storage per month	lbs at	Cwt
Whse Handling in/out	lbs at	Cwt
Add'l Valuation \$	at	per \$100
Permanent Storage	Cuft	
Labor	at	per hour
Stk. r month	lbs at	Cwt
Whse. Handling in/out	lbs at	Cwt
Add'l Valuation \$	at	per \$100
Pickup/Load Vaults	at	per vault
Oversized Items	at	ea
Storage	months	per month
Delivery of Vaults		

Mileage Rated Moves

Actual Shipment Weight(lbs) Gross	Tare	Net
Expedited Shipment Wt (cust sign here)		Net
Billed shipment weight	lbs at	Cwt
Stairs	at	Cwt
Distance Carry	at	Cwt
Elevator	at	Cwt
Extra pickup/del	at	ea
Piano	at	per stop
Piano carry	at	ea
Overtime Labor	at	per hour
Mileage		
Fuel Surcharge		

Materials, Additional Services

Dishpicks	at	per unit
Less than 3.0 cuft ctns	at	per unit
3.0 cuft ctns	at	per unit
4.5 cuft ctns	at	per unit
6.0 cuft ctns	at	per unit
Wardrobe ctns	at	per unit
Crib matt	at	per unit
Single matt	at	per unit
Double matt	at	per unit
Queen matt	at	per unit
King matt	at	per unit
King box ctn	at	per unit
Mirror ctn	at	per unit
Crates cuft	at	per unit
Appliances	at	per unit
Add'l Labor	at	per hour
Ferry or Bridge Toll	at	

Declarations (Customer must initial preferences)

Waiver and Responsibilities Guide:
 _____ The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer".
 _____ **Basic Valuation:** The customer must initial option selected
 _____ **Basic Valuation:** I release this shipment to a value of \$60 per pound per article.
 _____ **Decelerated Valuation:** I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$_____ per \$100 of declared value. Or:
 _____ I declare a lump sum total dollar valuation of this entire shipment of \$_____ and select the following:
 _____ **Replacement Cost Coverage/\$300 Deductable:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$_____ per \$100 of declared value.
 _____ **Replacement Cost Coverage/No Deductable:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$_____ per \$100 of declared value.

Estimates: The customer must initial option selected
 _____ I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract.
 _____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate.
 _____ I understand this shipment is moving under a non-binding estimate. If the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

_____ I have read and understand this contract thoroughly, and release my goods to the carrier subject to the terms and conditions above.
 _____ Date: 5/3/2005

Standard Moving, Packing, Materials, Storage Charge: 686.35
 Additional Valuation: 0
 Total Valuation Charges: 686.35
 Total Amount Paid: 686.35
 Balance Due: 0

_____ The customer and carrier agree that the carrier is not responsible for the loss of or damage to the goods shown on this bill of lading if the goods are not properly packed and secured by the customer.

_____ Date: 5/3/2005

All goods were received in good condition, except as noted on this contract or on the inventory form.
 _____ Date: 5/3/2005

TempStore Moving Co.
P.O. Box 81064
Seattle, WA 98108
HG 60620

BILL OF LADING NUMBER _____
DATE ORDER TAKEN _____
MOVE DATE **7-15-05**

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to the conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)

The carrier gave me, or I declined, a copy of the brochure "Your Rights and Responsibilities as a Moving Company Customer"

Signature of customer: _____

Customer: Janine Axter **Customer:** _____
Pick Up Address: _____ **Delivery Address:** 11531 Tulare Way W
City: North Bend **State:** WA **Zip:** _____ **City:** Marysville **State:** WA **Zip:** 98271
Stops At: _____ **Storage-In-Transit At:** _____

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
 Gross Weight _____ Lbs. Weighmaster _____
 Tare Weight _____ Lbs. Weighmaster _____
 Net Weight _____

Expedited shipment: Moving at weight of _____ pounds.
 Actual weight is: _____ pounds. Agreed to by customer: _____
 Customer's Signature: _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below:
 Customer's Signature: _____

Note: The customer must indicate choices made on the items shown below by initialing the appropriate line.

PAYMENT: The customer and carrier agree that payment, at time of delivery, will be made by:
 cash money order certified check credit card
 personal check business check debit card
 If credit arrangements are made, bill to:
 NAME: _____
 ADDRESS: _____

ESTIMATES: The customer must initial the option selected:
 I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
 I understand this shipment is moving under a non-binding estimate.
NOTE: If the charges shown on this bill exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected:
 Basic value protection. I release this shipment to a value of 60 cents per pound per article.
 Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
 or:
 I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
 Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times weight of shipment.)
 Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
 This shipment is to be placed in storage for a period of less than 90 days (storage in transit).
 This shipment is to be placed in storage for more than 90 days (permanent storage).
 This shipment is to be placed in storage in transit for an unknown period of time, I understand that on the 91st day of storage the shipment becomes permanent storage.

LABORERS & VAN
 REG HOURS @ \$ _____ PER HOUR = CHARGES \$175.00
 OVERTIME HRS @ _____ PER HOUR = CHARGES _____

Person	Start Time	Stop Time	Total Hours
Person 1	8:30	11:30	3 hrs
Person 2	9:30	11:30	2 hrs
Person 3			
Person 4			

Details of packing and packing materials			
Description	Quantity	Rate	Amount
Dish pack			
Cartons - Less than 3 cubic feet			
3 cubic feet			
4-1/2 cubic feet			
6 cubic feet			
6-1/2 cubic feet			
Wardrobe cartons			
Mattress cartons - crib			
Mattress cartons - twin			
Mattress cartons - double			
Mattress cartons - queen			
Mattress cartons - king			
Glass containers minimum			
Glass containers _____ cubic feet			
Boxes or crates minimum			
Boxes or crates _____ cubic feet			
Appliance packing materials			
Other:			
Total packing and materials charges →			


Details transportation, valuation and services provided:			
Service:			
Transportation _____ mi. Wt. _____			
Trans. storage-in-transit shipment			
Warehouse to destination: _____ mi.			
Storage-in-transit, 30 days or fraction			
Warehouse handling in/out			
Storage valuation charges			
Extra stops			
Hoisting or piano handling			
Stairs, elevators, long carries			
Transportation valuation charges			
Other: <u>Fuel Surcharge</u>			<u>\$9.00</u>
Other:			
Total for transportation, valuation, services →			
TOTAL BOTH SECTIONS			
LESS AMOUNT PREPAID			
BALANCE DUE FROM CUSTOMER <u>1209.00</u>			

All goods were received in good condition, except as noted on this contract or on the inventory form.

for goods: _____ Date: 7/15/05 Delivery receipt: _____ Date: 07/15/05
 Driver's signature: _____ Customer's signature: _____

Damage noted: _____

APPENDIX L



TempStore
Moving Company

P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429228


DATE: 08 / 19 / 05

Uniform Household Goods Bill of Lading Intrastate (Local)

Customer: This bill of lading establishes a contract between you and the household goods carrier, it confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the back page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X  Date: 8 / 19 / 05

FROM	TO
Customer: <u>Erica Smith Jones</u>	Customer: <u>Erica Smith Jones</u>
Pick Up Address: <u>1525 - 219th Pl. SW</u>	Delivery Address: <u>71 S. Orcas St.</u>
City: <u>Brier</u> ST: <u>WA</u> Zip: <u>98036</u>	City: <u>Seattle</u> ST: <u>WA</u> Zip: <u>98108</u>
Stops At:	Storage-In-Transit At: <u>TempStore Warehouse</u>

WEIGHT OF SHIPMENT: (Weight Tickets Attached)		JOB CODE		PICKED UP BY	
Gross Weight: _____ Lbs.	Weighmaster: _____	PACKED BY _____		BOOKED BY _____	
Tare Weight: _____ Lbs.	Weighmaster: _____	DATE: <u>8/19/05</u>		TRIP NO.: <u>2</u>	
Net Weight: _____ Lbs.		DRIVER NAME: <u>Chris Jennings</u>		EQUIP NO.: <u>TS-18</u>	

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signature: X _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below.
Customer Signature: X _____

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

Mover 1	Start Time: <u>11:00</u>	Stop Time: <u>2:00</u>	Total Hrs: <u>3</u>
Mover 2	Start Time: <u>11:00</u>	Stop Time: <u>2:00</u>	Total Hrs: <u>3</u>
Mover 3	Start Time: _____	Stop Time: _____	Total Hrs: _____
Mover 4	Start Time: _____	Stop Time: _____	Total Hrs: _____

The customer and carrier agree that payment, at time of delivery, will be made by:
 Cash Money Order Certified Check Credit Card
 Personal Check Business Check Debit Card
 If credit arrangements are made, bill to:

NAME: _____
ADDRESS: _____
ADDITIONAL: _____

ESTIMATES: The customer must initial the option selected.
 I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
 I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 110% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.
 Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.
 Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
 Or,
 I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
 Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
 Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

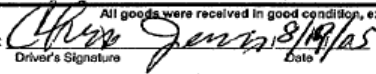
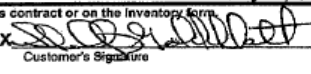
STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
 This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).
 This shipment is to be placed in storage for more than 90 days (Permanent Storage).
 This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

DETAILS OF PACKING MATERIALS			
Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			

TOTAL PACKING AND MATERIALS CHARGES → \$ _____

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED

Service:		<u>225.00</u>
Transportation _____ mi. WL _____		
Trans. Storage-in-transit shipment		
Warehouse to destination: _____ mi.		
Storage-in-transit, 30 days or fraction		<u>70.00</u>
Warehouse handling in/out		
Storage Valuation charges		
Extra Stops		
Hoisting or piano handling		
Stairs, elevators, long carries		
Transportation valuation charges		
Fuel Surcharge @ 1.5%		<u>\$3.37</u>
Other:		
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES →		\$ _____
TOTAL BOTH SECTIONS		\$ _____
(-LESS AMOUNT PREPAID)		\$ _____
BALANCE DUE FROM CUSTOMER →		\$ <u>298.37</u>

Receipt for goods:  Date: 8/19/05 Delivery receipt: X  Date: 8/19/05

Damage Noted: _____



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 HG-60620 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

NO
 Pack _____
 Load _____
 Del 5/30/05
 Sales _____
 Coord _____
 Job Code _____

Uniform Household Goods Bill of Lading

This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or transport services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From	To
Customer <u>Melissa Sombath</u>	Customer <u>Melissa Sombath</u>
Address <u>16014 NE 80th St</u>	Address <u>12121 SE 60th St</u>
City/State/Zip <u>Redmond, WA 98052</u>	City/State/Zip <u>Bellvue, WA 98006</u>
H/Phone <u>206 769 6201</u> Cell _____	H/Phone _____ Cell <u>206 759 6201</u>
W/Phone _____ Page _____	W/Phone _____ Page _____
email <u>lindsay@yaca.org</u>	email <u>lindsay@yaca.org</u>
Add'l Pickup _____	Extra-Stop _____
Billing Address _____	Other _____

Hourly Rated Moves

Day	Vans	Personnel	Start	Arrive	Breaks	Depart	End	Total Hrs	Rate	Charges
5/30	15:30	2 Willie JD	4:15	4:50		9:30	10:00	3:45	\$0/hr	468.90

Storage

If shipment will be placed into storage, the customer must initial option selected.
 _____ Shipment is to be placed in storage for a period of less than 90 days (Storage-in-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.
 _____ Shipment is to be placed in storage for more than 90 days.
 _____ I certify that I have requested Storage-in-Vehicle for a period of _____ days at an agreed upon rate of \$ _____ per day.

Storage in Transit	Cuft	_____
Trans to/from Whse	lbs at	_____ Cwt _____
Storage per month	lbs at	_____ Cwt _____
Whse Handling In/out	lbs at	_____ Cwt _____
Add'l Valuation \$	at	_____ per \$100 _____
Permanent Storage	Cuft	_____
_____	at	_____ per hour _____
_____	lbs at	_____ Cwt _____
Whse Handling In/out	lbs at	_____ Cwt _____
Add'l Valuation \$	at	_____ per \$100 _____
Pickup/Load Vaults	at	_____ per vault _____
Overized Items	at	_____ ea _____
Storage	months	_____ per month _____
Delivery of Vaults	_____	_____

Mileage Rated Moves

Actual Shipment Weight(lbs) Gross	_____	Tare	_____	Net	_____
Expedited Shipment Wt (cust sign here)	_____	_____	_____	_____	_____
Billed shipment weight	_____ lbs at	_____ Cwt	_____	_____	_____
Stairs	_____ at	_____ Cwt	_____	_____	_____
Distance Carry	_____ at	_____ Cwt	_____	_____	_____
Elevator	_____ at	_____ Cwt	_____	_____	_____
Extra pickup/del	_____ at	_____ ea	_____	_____	_____
Piano	_____ at	_____ per stop	_____	_____	_____
Piano carry	_____ at	_____ ea	_____	_____	_____
Overtime Labor	_____ at	_____ per hour	_____	_____	_____
Mileage	_____	_____	_____	_____	_____
Fuel Surcharge	1.5 %	_____	_____	_____	6.90

Materials, Additional Services

Dishpaks	_____ at	_____ per unit	_____
Less than 3.0 cuft ctns	_____ at	_____ per unit	_____
3.0 cuft ctns	_____ at	_____ per unit	_____
4.5 cuft ctns	_____ at	_____ per unit	_____
6.0 cuft ctns	_____ at	_____ per unit	_____
Wardrobe ctns	_____ at	_____ per unit	_____
Crib matt	_____ at	_____ per unit	_____
Single matt	_____ at	_____ per unit	_____
Double matt	_____ at	_____ per unit	_____
Queen matt	_____ at	_____ per unit	_____
King matt	_____ at	_____ per unit	_____
King box ctn	_____ at	_____ per unit	_____
Mirror ctn	_____ at	_____ per unit	_____
Crates cuft	_____ at	_____ per unit	_____
Appliances	_____ at	_____ per unit	_____
Add'l Labor	_____ at	_____ per hour	_____
Ferry or Bridge Toll	_____ at	_____ per hour	_____

Declarations (Customer must initial preferences)

M.S. Rights and Responsibilities Guide:
 The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer".

M.S. Valuation: The customer must initial option selected
Basic Valuation: I release this shipment to a value of \$.60 per pound per article
Depreciated Valuation: I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$ _____ per \$100 of declared value. Or:

I declare a lump sum total dollar valuation of this entire shipment of \$ _____ and select the following:
 _____ **Replacement Cost Coverage/\$300 Deductible:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.
 _____ **Replacement Cost Coverage/No Deductible:** I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.

Estimates: The customer must initial option selected
 _____ I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract
 _____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate
 _____ I understand this shipment is moving under a non-binding estimate. If the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

I have read and understand this contract thoroughly, and release my goods to the carrier subject to the terms and conditions above.

Melissa Sombath 5/30/05
 Release of Goods Customer Date
[Signature] 5/30/05
 Receipt for Goods/Driver Date

Subtotal Moving, Packing, Materials, Storage Charges	460.00
Additional Valuation	6.90
Total Relocation Charges	
Total Amount Paid	
Balance Due	466.90

Payment (Customer must initial): The customer and carrier agree that payment, at time of delivery, will be made by:
 _____ Cash _____ Other Bill to YACA

Comments

All goods were received in good condition, except as noted on this contract or on the inventory form.
Melissa Sombath 5/30/05
 Receipt for Goods/Customer Date



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 08 / 18 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It contains the instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X

Date: 8 / 18 / 05

FROM TO

Customer: Julie Wheeler (206)718-3700 Customer: Julie Wheeler

Pick Up Address: 12510 SE 80th. Way Delivery Address: 13235 SE 55th Place

City: Newcastle ST: WA Zip: 98056 City: Bellevue ST: WA Zip: 98006

Stops At: Storage Facility to be advised Storage-In-Transit At: None

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight: _____ Lbs. Weighmaster: _____
Tare Weight: _____ Lbs. Weighmaster: _____
Net Weight: _____ Lbs.

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signature: X

EXCLUSIVE USE: Customer requests exclusive use of vehicle by signing below.
Customer Signature: X

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

The customer and carrier agree that payment, at time of delivery, will be made by:
_____ Cash _____ Money Order _____ Certified Check _____ Credit Card
_____ Personal Check _____ Business Check _____ Debit Card
If credit arrangements are made, bill to:

NAME:
ADDRESS:
ADDITIONAL:

ESTIMATES: The customer must initial the option selected.
I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.
Basic Value Protection. I release this shipment to a value of 80 cents per pound per article.
Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
Or,
I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).
This shipment is to be placed in storage for more than 90 days (Permanent Storage).
This shipment is to be placed in storage in transit for an unknown period of time, I understand that on the 91st day of storage the shipment becomes permanent Storage.

DETAILS OF PACKING MATERIALS

Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			

TOTAL PACKING AND MATERIALS CHARGES \$

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED

Service:			
Transportation _____ mi. Wt. _____			1097.50
Trans. Storage-in-transit shipment			
Warehouse to destination: _____ mi.			
Storage-in-transit, 30 days or fraction			
Warehouse handling in/out			
Storage Valuation charges			
Extra Stops			
Hoisting or piano handling			
Stairs, elevators, long carries			
Transportation valuation charges			
Fuel Surcharge @ 1.5%			16.46
Other:			
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES			\$
TOTAL BOTH SECTIONS			\$
(-LESS AMOUNT PREPAID)			\$
BALANCE DUE FROM CUSTOMER			\$ 1139.6

Receipt for goods: Drivers Signature Date Delivery receipt: X Customer's Signature Date

Damage Noted:

All goods were received in good condition, except as noted on this contract or on the inventory form.



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 08 / 17 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)
The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X

Date: 08 / 17 / 05

FROM TO

Customer: **Bonnie Yune (206) 228-8949** Customer: **Bonnie Yune**
Pick Up Address: **2009 N. 154th. Place** Delivery Address: **5416 162nd St. SW**
City: **Shoreline** ST: **WA** Zip: **98133** City: **Edmonds** ST: **WA** Zip: **98026**
Stops At: **None** Storage-In-Transit At: **None**

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight: _____ Lbs. Weighmaster: _____
Tare Weight: _____ Lbs. Weighmaster: _____
Net Weight: _____ Lbs.

JOB CODE	PICKED UP BY		
PACKED BY	BOOKED BY		
DATE	TRIP NO.	DRIVER NAME	EQUIP NO.
8/17/05	1	Bobby Constantino	TS2

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signature: X

TIME RECORD

3	Men & Truck (1 hour minimum + Travel Time)
10	Reg. Hours @ \$97 Per Hour = charges \$
	Overtime Hrs. @ Per Hour = charges \$

Exclusive Use: Customer requests exclusive use of vehicle by signing below.
Customer Signature: X

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

Mover 1 Start Time: 8:30	Stop Time: 6:30	Total Hrs: 10 hrs
Mover 2 Start Time: 8:30	Stop Time: 6:30	Total Hrs: 10 hrs
Mover 3 Start Time: 8:30	Stop Time: 6:30	Total Hrs: 10 hrs
Mover 4 Start Time:	Stop Time:	Total Hrs:

The customer and carrier agree that payment, at time of delivery, will be made by:
_____ Cash _____ Money Order _____ Certified Check _____ Credit Card
_____ Personal Check _____ Business Check _____ Debit Card
If credit arrangements are made, bill to:

DETAILS OF PACKING MATERIALS

Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (orb)			
Mattress cartons (win)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			

NAME:
ADDRESS:
ADDITIONAL:

ESTIMATES: The customer must initial the option selected.
_____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
_____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
_____ I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage related shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.
_____ Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.
_____ Appreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
Or,
I declare a lump sum total dollar valuation on this entire shipment of:
\$ _____ and select the following option:
_____ Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
_____ Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

TOTAL PACKING AND MATERIALS CHARGES → \$

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED

Service:		
Transportation _____ mi. Wt. _____		970.00
Trans. Storage-in-transit shipment		
Warehouse to destination: _____ mi.		
Storage-in-transit, 30 days or fraction		
Warehouse handling in/out		
Storage Valuation charges		
Extra Stops		
Holisting or piano handling		
Stairs, elevators, long carries		
Transportation valuation charges		
Fuel Surcharge @ 1.5%		14.55
Other:		
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES		5984.55
TOTAL BOTH SECTIONS		5196.91
(-LESS AMOUNT PREPAID) <i>Hand Time ?</i>		
BALANCE DUE FROM CUSTOMER		787.64

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
_____ This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).
_____ This shipment is to be placed in storage for more than 90 days (Permanent Storage).
_____ This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

Receipt for goods: _____ All goods were received in good condition, except as noted on this contract or on the inventory form.
Driver's Signature: _____ Date: 8/17/05 Delivery Receipt: _____ Customer's Signature: _____ Date: 8/17/05
Damage Noted: _____



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 8.4.05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X _____ Date: 8.4.05

FROM: _____ TO: _____

Customer: **Marie Hardie** Customer: **Marie Hardie**

Pick Up Address: **2320 N. 59th St.** Delivery Address: **1619 Belmont Ave. E., Apt. 208**

City: **Seattle** ST: **WA** Zip: **98103** City: **Seattle** ST: **WA** Zip: **98103**

Stops At: _____ Storage-In-Transit At: _____

WEIGHT OF SHIPMENT: (Weight Tickets Attached)		JOB CODE		PICKED UP BY	
Gross Weight: _____ Lbs.	Weighmaster: _____	PACKED BY	BOOKED BY		
Tare Weight: _____ Lbs.	Weighmaster: _____	DATE TRIP NO. DRIVER NAME EQUIP. NO.			
Net Weight: _____ Lbs.					

EXPEDITED SHIPMENT: Moving at weight of _____ pounds. Actual weight is _____ pounds, and agreed to by customer.

Customer's Signature: X _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below. Customer Signature: X _____

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.			
2 1/1	Laborers & Van (Complete start and stop time chart below)		
4 hr	Reg Hours @ \$70	Per Hour = charges	\$ 280
	Overtime Hrs. @	Per Hour = charges	\$
Mover 1 Start Time: 8:45	Stop Time: 12:45	Total Hrs: 4	
Mover 2 Start Time: 8:45	Stop Time: 12:45	Total Hrs: 4	
Mover 3 Start Time:	Stop Time:	Total Hrs:	
Mover 4 Start Time:	Stop Time:	Total Hrs:	

The customer and carrier agree that payment, at time of delivery, will be made by:
 Cash Money Order Certified Check Credit Card
 Personal Check Business Check Debit Card
 If credit arrangements are made, bill to: _____

NAME: _____ ADDRESS: _____

ADDITIONAL: _____

ESTIMATES: The customer must initial the option selected.

I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and the amount shown on that estimate is the amount I will be required to pay for this shipment.

Note: This did not move under an estimate. Wrong location was initialed.

VALUATION: The Basic Value _____ pound per an depreciated 1 pound times th
 Or, I declare a lump sum of \$ _____
 Replacement (Declared value)
 Replacement (Declared value)

DETAILS OF PACKING MATERIALS	
Description	Quantity Rate Amount
Dish Pack	
Cartons - Less than 3 cubic feet	
3.0 cubic ft.	
4.5 cubic ft.	
6.0 cubic ft.	
6.5 cubic ft.	
Wardrobe cartons	
Mattress cartons (crib)	
Mattress cartons (twin)	
Mattress cartons (double)	
Mattress cartons (queen)	
Mattress cartons (king)	
Glass Containers Minimum	
Glass Containers _____ cubic feet	
Boxes or Crates Minimum	
Boxes or Crates _____ cubic feet	
Appliance Packing Materials	
Other:	
TOTAL PACKING AND MATERIALS CHARGES	\$

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:	
<input type="checkbox"/> This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).	
<input type="checkbox"/> This shipment is to be placed in storage for more than 90 days (Permanent Storage).	
<input type="checkbox"/> This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91 st day of storage the shipment becomes permanent Storage.	
Trans. Storage-in-transit shipment	
Warehouse to destination: _____ mi.	
Storage-in-transit, 30 days or fraction	
Warehouse handling in/out	
Storage Valuation charges	
Extra Stops	
Hoisting or piano handling	
Stairs, elevators, long carries	
Transportation valuation charges	
Fuel Surcharge @ 1.5%	\$ 4.20
Other:	
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES	\$

TOTAL BOTH SECTIONS (LESS AMOUNT PREPAID)
BALANCE DUE FROM CUSTOMER \$ 284.20

Receipt for goods: _____ Drivers Signature _____ Date 8/30/05
 Delivery receipt: X _____ Customer's Signature _____ Date 8.24.05
 Damage Noted: _____

TempStore Moving Co.
P.O. Box 81064
Seattle, WA 98108

HG 60620

BILL OF LADING NUMBER _____
DATE ORDER TAKEN _____
MOVE DATE 7-15-05

Bill of Lading

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to the conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)
The carrier gave me, or I declined, a copy of the brochure "Your Rights and Responsibilities as a Moving Company Customer"

Signature of customer: _____

Customer: Janine Porter

Pick Up Address: _____ Delivery Address: 11531 Tulare Way W

City: North Bend State: WA Zip: _____ City: Marysville State: WA Zip: 98221

Stops At: _____ Storage-In-Transit At: _____

WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight _____ Lbs. Weighmaster _____ PICKED UP BY _____
Tare Weight _____ Lbs. Weighmaster _____ ORDER BOOKED BY _____
Net Weight _____ DATE _____ TRIP NO. _____ DRIVER _____ EQUIP. NO. _____

Expedited shipment: Moving at weight of _____ pounds.
Actual weight is: _____ pounds. Agreed to by customer: _____

Customer's Signature: _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below:
Customer's Signature: _____

TIME RECORD (Complete start and stop time check below)
REG HOURS @ 9 hrs PER HOUR = CHARGES \$175.00 = 100
OVERTIME HRS @ _____ PER HOUR = CHARGES _____
Person 1: Start Time 8:30 Stop Time 11:30 Total Hours 3 hrs
Person 2: Start Time 9:30 Stop Time 1:30 Total Hours _____
Person 3: Start Time _____ Stop Time _____ Total Hours _____
Person 4: Start Time _____ Stop Time _____ Total Hours _____

Note: The customer must indicate choices made on the items shown below by initialing the appropriate line.

PAYMENT: The customer and carrier agree that payment, at time of delivery, will be made by:
_____ cash _____ money order _____ certified check _____ credit card
_____ personal check _____ business check _____ debit card
If credit arrangements are made, bill to:
NAME: _____
ADDRESS: _____

ESTIMATES: The customer must initial the option selected:
_____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
_____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
fx I understand this shipment is moving under a non-binding estimate.
NOTE: If the charges shown on this bill exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected:
fx Basic value protection. I release this shipment to a value of 60 cents per pound per article.
_____ Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
or,
I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
_____ Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times weight of shipment.)
_____ Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
_____ This shipment is to be placed in storage for a period of less than 90 days (storage in transit).
_____ This shipment is to be placed in storage for more than 90 days (permanent storage).
_____ This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent storage.

Description	Quantity	Rate	Amount
Dish pack			
Cartons - Less than 3 cubic feet			
3 cubic feet			
4-1/2 cubic feet			
6 cubic feet			
6-1/2 cubic feet			
Wardrobe cartons			
Mattress cartons - crib			
Mattress cartons - twin			
Mattress cartons - double			
Mattress cartons - queen			
Mattress cartons - king			
Glass containers minimum			
Glass containers _____ cubic feet			
Boxes or crates minimum			
Boxes or crates _____ cubic feet			
Appliance packing materials			
Other:			
Total packing and materials charges →			

Details transportation, valuation and services provided:			
Service:			
Transportation _____ mi. Wt. _____			
Trans. storage-in-transit shipment			
Warehouse to destination: _____ mi.			
Storage-in-transit, 30 days or fraction			
Warehouse handling in/out			
Storage valuation charges			
Extra stops			
Hoisting or piano handling			
Stairs, elevators, long carries			
Transportation valuation charges			
Other: <u>Carl Schaefer</u>			<u>\$9.00</u>
Other:			
Total for transportation, valuation, services →			

TOTAL BOTH SECTIONS
LESS AMOUNT PREPAID
BALANCE DUE FROM CUSTOMER 1209.00

All goods were received in good condition, except as noted on this contract or on the inventory form.

for goods: _____ Driver's signature: James Keith Date: 7/15/05 Delivery receipt: Janine Porter Customer's signature: _____ Date: 07/15/05

Damage noted: _____



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 08 / 19 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It contains instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X *[Signature]* Date: 8 / 19 / 05

FROM TO

Customer: **Chris Tucker** Customer: **Chris Tucker**

Pick Up Address: **5005 Davis Ave. S., #A** Delivery Address: **11320 SE 193rd Pl.**

City: **Renton** ST: **WA** Zip: **98055** City: **Renton** ST: **WA** Zip: **98055**

Stops At: Storage-In-Transit At: **None**

WEIGHT OF SHIPMENT: (Weight Tickets Attached)

Gross Weight: _____ Lbs. Weighmaster: _____

Tare Weight: _____ Lbs. Weighmaster: _____

Net Weight: _____ Lbs.

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.

Actual weight is _____ pounds, and agreed to by customer.

Customer's Signature: X _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below.

Customer Signature: X _____

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

The customer and carrier agree that payment, at time of delivery, will be made by:

_____ Cash _____ Money Order _____ Certified Check _____ Credit Card

_____ Personal Check _____ Business Check _____ Debit Card

If credit arrangements are made, bill to:

NAME:

ADDRESS:

ADDITIONAL:

ESTIMATES: The customer must initial the option selected.

_____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.

_____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.

_____ I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.

_____ Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.

_____ Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.

Or, I declare a lump sum total dollar valuation on this entire shipment of:

\$ _____ and select the following option:

_____ Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)

_____ Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.59 times the weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:

_____ This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).

_____ This shipment is to be placed in storage for more than 90 days (Permanent Storage).

_____ This shipment is to be placed in storage in transit for an unknown period of time, and if storage the shipment becomes permanent Storage.

DETAILS OF PACKING MATERIALS

Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			

TOTAL PACKING AND MATERIALS CHARGES → \$

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED

Service:

Transportation _____ mi. Wt. _____

Trans. Storage-in-transit shipment

Warehouse to destination: _____ mi.

Storage-in-transit, 30 days or fraction

Warehouse handling in/out

Storage Valuation charges

Extra Stops

Hoisting or piano handling

Stairs, elevators, long carries

Transportation valuation charges

Fuel Surcharge @ 1.5% \$ *11.25*

Other:

TOTAL FOR TRANSPORTATION, VALUATION, SERVICES → \$

TOTAL BOTH SECTIONS \$

(-LESS AMOUNT PREPAID) \$

PAYANCE DUE FROM CUSTOMER → \$ *761.25*

Receipt for goods: *[Signature]* Driver's Signature Date: *8/19/05*

Delivery receipt: X *[Signature]* Customer's Signature Date: *8, 19, 05*



P.O. Box 81064
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429228

Uniform Household Goods Bill of Lading Intrastate (Local)

DATE: 08 / 20 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the next page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer"

Customer Signature: X *PC* Date: 8 / 20 / 05

FROM TO

Customer: **Pablo Guzman** Customer: **Pablo Guzman**

Pick Up Address: **10392 NE 12th St, #1-103** Delivery Address: **13130 NE 120th Ln., #B-300**

City: **Bellevue** ST: **WA** Zip: **98004** City: **Kirkland** ST: **WA** Zip: **98034**

Stops At: Storage-In-Transit At:

WEIGHT OF SHIPMENT: (Weight Tickets Attached)	JOB CODE	PICKED UP BY
Gross Weight: _____ Lbs. Weighmaster: _____	PACKED BY	BOOKED BY
Tare Weight: _____ Lbs. Weighmaster: _____	DATE	TRIP NO.
Net Weight: _____ Lbs.	8/20/05	1
		DRIVER NAME
		James Randolph
		EQUIP NO.
		TS-22

EXPEDITED SHIPMENT: Moving at weight of _____ pounds. Actual weight is _____ pounds, and agreed to by customer. Customer's Signature: X

TIME RECORD			
3	Men & Truck (1 hour minimum + Travel Time)	Reg. Hours @	\$100
5 3/4		Per Hour = charges	\$ 575.00
	Overtime Hrs.@	Per Hour = charges	\$

Exclusive Use: Customer requests exclusive use of vehicle by signing below. Customer Signature: X

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.			
Mover 1	Start Time: 10:AM	Stop Time: 3:45	Total Hrs: 5 3/4
Mover 2	Start Time: 10:AM	Stop Time: 3:45	Total Hrs: 5 3/4
Mover 3	Start Time: 10:AM	Stop Time: 3:45	Total Hrs: 5 3/4
Mover 4	Start Time:	Stop Time:	Total Hrs:

The customer and carrier agree that payment, at time of delivery, will be made by:

Cash Money Order Certified Check Credit Card
 Personal Check Business Check Debit Card
 If credit arrangements are made, bill to:
 NAME:
 ADDRESS:
 ADDITIONAL:

ESTIMATES: The customer must initial the option selected.

I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
 I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.

Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.
 Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
 Or,
 I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
 Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)
 Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:

This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).
 This shipment is to be placed in storage for more than 90 days (Permanent Storage).
 This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Mattress cartons (crib)			
Mattress cartons (twin)			
Mattress cartons (double)			
Mattress cartons (queen)			
Mattress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			
TOTAL PACKING AND MATERIALS CHARGES			\$

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED		
Service:		
Transportation _____ mi. Wt _____		
Trans. Storage-in-transit shipment		
Warehouse to destination: _____ mi.		
Storage-in-transit, 30 days or fraction		
Warehouse handling in/out		
Storage Valuation charges		
Extra Stops		
Hoisting or piano handling		
Stairs, elevators, long carries		
Transportation valuation charges		
Fuel Surcharge	@ 1.5%	\$ 8.62
Other:		
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES		\$
TOTAL BOTH SECTIONS		\$
(-LESS AMOUNT PREPAID)		\$
BALANCE DUE FROM CUSTOMER		\$ 1583.62

All goods were received in good condition, except as noted on this contract or on the inventory form.

Receipt for goods: *[Signature]* Date: *8/20/05*
 Driver's Signature Date
 Delivery receipt: X *[Signature]* Date: _____
 Customer's Signature Date

Damage Noted:



"Chris Jennings"
<cjennings@tempstore.net>
10/04/2005 04:02 PM

To <BYoung@wutc.wa.gov>
cc
bcc
Subject Re: Fw: Questions about documents

Betty,

I have placed my answers in brackets below your questions.

> Chris - I received the documents. Thank you for sending them so quickly.
> I have one request for additional information and several questions:
>

On the move for customer Erica Jones (8/19/05) - please provide documents for the storage in transit, including inventory.

[[I will fax the additional documents to your attention]]

> Documents still needed:

>> Questions:


> On the moves for customers Pablo Guzman (8/20/05) and Chris Tucker
> (8/19/05), the letters "PC" are listed in several of the spaces reserved
> for customer signature or initials. What does PC stand for?

[[That stands for passed by client or passed on by customer, meaning that when the driver arrived and gave the Smart Consumer Guide pamphlet and went over the valuation and estimate sections, the customer opted to not sign or more of those sections for whatever reason. Everyone is clear now that this is not to be done. At the time I was cross training all employees to do the paperwork and one of them thought that was necessary when it wasn't.]]

> On the move for customer Bonnie Yune (8/17/05), in the section on the
> bill of lading marked, "(-Less Amount Prepaid)," someone has written in
> "Travel Time?" next to the amount of \$196.91. What does this mean?
>

[[Bonnie short paid her move at the time of service because she did not want to pay travel time as she thought it was an elective service. I called her the next day and explained how the tariff and the travel time was calculated and then Michael called her and she agreed to pay half but no more. She still has not paid any of that travel time. The \$196.91 that appears in the less amount prepaid line is my figuring after the fact as to what she owed us still and had nothing to do with any deposits.]]

APPENDIX M



TempStore
Moving Company

P.O. Box 81084
Seattle, WA 98108
www.tempstore.net

Toll-Free: (800) 936-5674
Tel: (206) 213-0426
Fax: (206) 764-7834

DOT: 970528
WUTC: HG60620
ICC: MC429226

Uniform Household Goods Bill of Lading Intrastate (Local) DATE: 08 / 19 / 05

Customer: This bill of lading establishes a contract between you and the household goods carrier. It contains instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you read the entire document, including the back page, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)
The carrier gave me, or I declined a copy of the brochure, "Your Rights and Responsibilities as a Moving Company Customer."

Customer Signature: X *[Signature]* Date: 8 / 19 / 05

FROM		TO	
Customer: Erica Smith Jones		Customer: Erica Smith Jones	
Pick Up Address: 1525 - 219 th Pl. SW		Delivery Address: 71 S. Orcas St.	
City: Brier ST: WA Zip: 98036		City: Seattle ST: WA Zip: 98108	
Stops At: Storage-In-Transit At: TempStore Warehouse			
<small>WEIGHT OF SHIPMENT: (Weight Tickets Attached)</small>		<small>JOB CODE</small>	
Gross Weight: _____ Lbs. Weighmaster: _____	<small>PACKED BY</small>		<small>PICKED UP BY</small>
Tare Weight: _____ Lbs. Weighmaster: _____	<small>BOOKED BY</small>		
Net Weight: _____ Lbs.	<small>DATE</small>	<small>TRIP NO.</small>	<small>DRIVER NAME</small>
	8/19/05	2	Chris Jennings
			<small>EQUIP NO.</small>
			TS-18

EXPEDITED SHIPMENT: Moving at weight of _____ pounds.
Actual weight is _____ pounds, and agreed to by customer.
Customer's Signatures: X _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below.
Customer Signature: X _____

NOTE: The customer must indicate choices made on the items shown below by initialing the appropriate line.

<input type="checkbox"/> Cash	<input type="checkbox"/> Money Order	<input type="checkbox"/> Certified Check	<input checked="" type="checkbox"/> Credit Card	
<input type="checkbox"/> Personal Check	<input type="checkbox"/> Business Check	<input type="checkbox"/> Debit Card		

If credit arrangements are made, bill to: _____

ESTIMATES: The customer must initial the option selected.

I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.

I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.

I understand this shipment is moving under a non-binding estimate.

NOTE: If the charges shown on this bill exceed the charges in the non-binding estimate given to me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected.

Basic Value Protection. I release this shipment to a value of 60 cents per pound per article.

Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.

Or,

I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:

Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times the weight of shipment.)

Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times the weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:

This shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit).

This shipment is to be placed in storage for more than 90 days (Permanent Storage).

This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent Storage.

<small>DETAILS OF PACKING MATERIALS</small>			
Description	Quantity	Rate	Amount
Dish Pack			
Cartons - Less than 3 cubic feet			
3.0 cubic ft.			
4.5 cubic ft.			
6.0 cubic ft.			
6.5 cubic ft.			
Wardrobe cartons			
Matress cartons (crib)			
Matress cartons (twin)			
Matress cartons (double)			
Matress cartons (queen)			
Matress cartons (king)			
Glass Containers Minimum			
Glass Containers _____ cubic feet			
Boxes or Crates Minimum			
Boxes or Crates _____ cubic feet			
Appliance Packing Materials			
Other:			

TOTAL PACKING AND MATERIALS CHARGES → \$ _____

DETAILS TRANSPORTATION, VALUATION AND SERVICES PROVIDED

Service:		
Transportation _____ mi. Wt. _____		225.00
Trans. Storage-in-transit shipment		
Warehouse to destination: _____ mi.		
Storage-in-transit, 30 days or fraction		10.00
Warehouse handling in/out		
Storage Valuation charges		
Extra Stops		
Hoisting or piano handling		
Stairs, elevators, long carries		
Transportation valuation charges		
Fuel Surcharge	@ 1.5%	\$ 3.37
Other:		
TOTAL FOR TRANSPORTATION, VALUATION, SERVICES	→	\$ _____
TOTAL BOTH SECTIONS		\$ _____
(-LESS AMOUNT PREPAID)		\$ _____
BALANCE DUE FROM CUSTOMER	→	\$ 298.37

All goods were received in good condition, except as noted on this contract or on the Inventory form.

Receipt for goods: *[Signature]* 8/19/05 Delivery receipt: X *[Signature]* 8/19/05

Driver's Signature Customer's Signature

Date Date

Damage Noted: _____

Erica Jones
8/31/05

I. Storage In Transit Calculations:

3.5'L x 8H x 7.5W = 210 Cubic Feet

210 x 7 pounds = \$14.70

\$14.70 x 4.75 = \$69.83 rounded up to \$70.00 Total SIT Rate

Key: 3.5 L = Length
8 = Height
7.5 = Width



"Chris Jennings"
<cjennings@tempstore.net>
11/17/2005 10:27 AM

To <BYoung@wutc.wa.gov>
cc
bcc

Subject Re: Fw: Questions about documents - Please respond

Hi Betty,

Sorry for the delay but I had to wait for Michael to get back to me on it. He charged according to the pg 39 chart but incorrectly calculated it as he used the total minimum charge amount as his multiplier. Therefore, we owe this customer a refund and he will cut a check to her this week.

Thanks,
Chris Jennings

> Chris -- I haven't heard back from you on this question. Thanks.
>
> Betty Young
> Compliance Specialist
> Business Practices Investigations
> Washington Utilities & Transportation Commission
> (360) 664-1202
>
> ----- Forwarded by Betty Young/WUTC on 11/15/2005 09:53 AM -----
>
> Betty Young/WUTC
> 11/08/2005 07:33 AM
>
> To
> "Chris Jennings" <cjennings@tempstore.net>
> cc
>
> Subject
> Re: Fw: Questions about documents
>
>
>
>
> Thanks -- My concern is that, according to Tariff 15-A, the maximum rate
> to be charged per 100 pounds stored is \$1.60. How did you arrive at
> \$4.75?
>
>
>
>

> "Chris Jennings" <cjennings@tempstore.net>
> 11/07/2005 03:14 PM
>
> To
> <BYoung@wutc.wa.gov>
> cc
>
> Subject
> Re: Fw: Questions about documents
>
>
>
>
>
>
> Betty-I am sorry, it should read like this:
>
> 1470 cubic feet x\$4.75 =\$69.83 then rounded up to \$70. Sorry, I was
> going too fast when replying to this the first time. I am sure that
> will answer your question.
>
> Thanks,
> Chris
>
>
>
>
>
> Chris -- in your SIT calculations, how did you come up with \$14.70 x
>> 4.75?
>> Where did the 4.75 figure come from and what does it represent?
>>
>>
>>
>> Thanks,
>> Betty Young
>> Compliance Specialist
>> Business Practices Investigations
>> Washington Utilities & Transportation Commission
>> (360) 664-1202
>>
>>
>>
>>
>> "Chris Jennings" <cjennings@tempstore.net>
>> 11/03/2005 03:51 PM
>>
>> To

APPENDIX N



FINAL BILL AT TIME OF CUSTOMER OF MOVE / SEE ESTIMATE FOR COST

ACCEPTED BY CLIENT: *Justin Mackay*

DATE: *4-30-2009*

DELIVERY PERSON: *Alfred V. Gyl*

	Packing Price:	Cost:	DROP OFF - MACKAY:	Cost:	Used	Return	Final Cost:
	Description:						
1	Box - Small - 1.5 Cu Feet - New	\$2.00	15	22.50			
2	Box - Medium - 3.0 Cu Feet - New	\$3.00	12 + 30	42			
3	Box - Large - 4.5 Cu Feet - New	\$4.00	20	80			
4	Box - XLarge - 6.0 Cu Feet - New	\$5.00		0			
5	Box - Dish Pack	\$8.00	4	32			
6	Box - Wardrobe - Small - New / w/ Bars	\$5.50	10	55			
7	Box - Wardrobe - Large - New	\$8.00		0			
8	Box - Misc. XXL	\$15.00		0			
9	Box - Lamp	\$3.00	4	12			
10	Box - Mirror - small	\$5.00	5	25			
11	Box - Mirror - large	\$7.00	2	14			
12	Box - Mattress	\$12.00		0			
13	Box - Bicycle	\$7.00		0			
14	Box - Misc. XXL	\$5.00		0			
15	Box - Small - 1.5 Cu Feet - Recycle	\$1.00		0			
16	Box - Medium - 3.0 Cu Feet - Recycle	\$2.00		0			
17	Box - Large - 4.5 Cu Feet - Recycle	\$3.00		0			
18	Box - XLarge - 6.0 Cu Feet - Recycle	\$4.00		0			
19	Box - Wardrobe - Small - Recycle	\$4.00		0			
20	Box - Wardrobe - Large - Recycle	\$5.00		0			
21	Box - Bicycle - Recycle	\$4.00		0			
22	Box - Misc. XXL Furniture	\$9.00		0			
23	Cardboard Sheets	\$1.00		0			
24	Tape - Packing	\$2.50	18	45			
25	Tape - Masking	\$1.25		0			
26	Tape - Blue Carpenter	\$3.00		0			
27	Bubble Wrap - Small - (per foot)	\$1.25		0			
28	Bubble Wrap - Large - (per foot)	\$1.00		0			
29	White packing paper (per box)	\$8.00	2	16			
30	Newsprint (per box / ream)	\$5.00		0			
31	Multi-Ply Packing Paper (per sheet)	\$1.00		0			
32	Shrinkwrap (based on 5 * 5 * 5 item)	\$5.00		0			
33	Mattress Bags (Queen)	\$3.00	2	6			
	Mattress Bags (King)	\$4.00	3	12			
34	Pallets	\$25.00		0			
35	Wood Crate	Depends on Size					
	Total:						

* second purchase / drop off on 5/10/2009

APPENDIX O



TEMPSTORE MOVING COMPANY
 P.O. Box 81064
 Seattle, WA 98108
 HG-60620 Toll Free: (800) 936-5674
 www.tempstore.net
 info@tempstore.net

Driver _____
 Pack _____
 Load _____
 Del 5/29/05
 Sales _____
 Coord _____
 Job Code _____

Uniform Household Goods Bill of Lading

This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, pack, store, and/or perform services thereon. Before you sign this document, it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or carrier's representative(s). This contract is subject to conditions on the back of this form.

From	To
Customer <u>Julia Valverde</u>	Customer <u>Julia Valverde</u>
Address <u>2302 Linden</u>	Address <u>2302 Linden Lane NE</u>
City/State/Zip <u>Seattle, WA</u>	City/State/Zip <u>Kirkland</u>
H/Phone _____ Cell _____	H/Phone _____ Cell _____
W/Phone _____ Page _____	W/Phone _____ Page _____
email _____	email _____
Add'l Pickup _____	Extra-Stop _____
Billing Address _____	Other _____

Hourly Rated Moves	Start	Arrive	Breaks	Depart	End	Total Hrs	Rate	Total
1/2 vans (2 men) <u>James</u>	<u>9 AM</u>	<u>9:30</u>	<u>1/2</u>		<u>4:00</u>	<u>4 1/2</u>	<u>\$126.00</u>	<u>\$570.00</u>
1/2 vans (2 men) <u>Willie</u>	<u>1:30</u>	<u>2:30</u>	<u>1/2</u>		<u>12:30</u>	<u>1 1/2</u>	<u>\$150.00</u>	<u>\$225.00</u>

Storage
 If shipment will be placed into storage, the customer must initial option selected.
 Shipment is to be placed in storage for a period of less than 90 days (Storage-In-Transit). I understand that on the 91st day of storage the shipment becomes permanent storage.
 Shipment is to be placed in storage for more than 90 days.
 I certify that I have requested Storage-In-Vehicle for a period of _____ days at an agreed upon rate of \$ _____ per day.

Storage in Transit
 Trans to/from Whse _____ lbs at _____ Cwt _____
 Storage per month _____ lbs at _____ Cwt _____
 Whse Handling in/out _____ lbs at _____ Cwt _____
 Add'l Valuation \$ _____ at _____ per \$100 _____
 Payment Storage _____ Cwt _____
 Storage per month _____ lbs at _____ Cwt _____
 Whse Handling in/out _____ lbs at _____ Cwt _____
 Add'l Valuation \$ _____ at _____ per \$100 _____
 Pickup/Load Vaults _____ at _____ per vault _____
 Oversized items _____ at _____ ea _____
 Storage _____ months _____ per month _____
 Delivery of Vaults _____

Mileage Rated Moves

Actual Shipment Weight (lbs) Gross _____ Tare _____ Net _____
Expedited Shipment Wt (cust sign here) _____ Net _____
Billed shipment weight _____ lbs at _____ Cwt _____
Stairs _____ at _____ Cwt _____
Distance Carry _____ at _____ Cwt _____
Elevator _____ at _____ Cwt _____
Extra pickup/del _____ at _____ ea _____
Piano _____ at _____ per stop _____
Piano carry _____ at _____ ea _____
Overtime Labor _____ at _____ per hour _____
Mileage <u>142.70</u> _____
Fuel Surcharge <u>32.18</u> _____

Materials, Additional Services

Dishpacs _____ at _____ per unit _____
Less than 3.0 cuft ctns _____ at _____ per unit _____
3.0 cuft ctns _____ at _____ per unit _____
4.5 cuft ctns _____ at _____ per unit _____
6.0 cuft ctns _____ at _____ per unit _____
Wardrobe ctns _____ at _____ per unit _____
Crib matt _____ at _____ per unit _____
Single matt _____ at _____ per unit _____
Double matt _____ at _____ per unit _____
Queen matt _____ at _____ per unit _____
King matt _____ at _____ per unit _____
King box ctn _____ at _____ per unit _____
Mirror ctn _____ at _____ per unit _____
Crates cuft _____ at _____ per unit _____
Appliances _____ at _____ per unit _____
Add'l Labor _____ at _____ per hour _____
Ferry or Bridge Toll _____ at _____ _____

Declarations (Customer must initial preferences)
 Rights and Responsibilities Guide: The carrier gave me, or I declined a copy of the brochure "Your Rights and Responsibilities as a Moving Customer".
 Valuation: The customer must initial option selected
 Basic Valuation: I release this shipment to a value of \$60 per pound per article.
 Depreciated Valuation: I release this shipment to a value of \$2 per pound times the shipment wt. at rate of \$ _____ per \$100 of declared value. Or:
 I declare a lump sum total dollar valuation of this entire shipment of \$ _____ and select the following:
 Replacement Cost Coverage/\$300 Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.
 Replacement Cost Coverage/No Deductible: I release this shipment to a value of \$3.50 per pound times the shipment wt. at a rate of \$ _____ per \$100 of declared value.
 Estimates: The customer must initial option selected
 I did not request a written estimate on this shipment and understand I will be required to pay charges as shown on this contract.
 I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on the estimate.
 I understand this shipment is moving under a non-binding estimate, if the charges shown on the bill of lading exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplements) for mileage rated shipment, or more than 125% of the estimate plus supplements for hourly rated shipments.

Subtotal Moving, Packing, Materials, Storage Charges	<u>2177.18</u>
Additional Valuation	_____
Total Relocation Charges	<u>2177.18</u>
Total Amount Paid	_____
Balance Due	<u>2177.18</u>

Payment (Customer must initial): The customer and carrier agree that payment, at time of delivery, will be made by:
 Cash _____ Other _____

Comments _____

I have read and understand this contract thoroughly, and release my goods to the carrier subject to the terms and conditions above.
 Release of Goods/Customer _____ Date 5/29/05

All goods were received in good condition, except as noted on this contract or on the Inventory form.
 Date 5/29/05

APPENDIX P



facsimile transmittal

To: Betty Young	Fax: 360-664-4291
From: Chris Jennings	Date: 11/2/05
Re: Mileage Rated Moves	Pages: 2 including cover
CC:	
<input type="checkbox"/> Urgent <input type="checkbox"/> For Review <input type="checkbox"/> Please Comment <input type="checkbox"/> Please Reply <input type="checkbox"/> Please Recycle	



Hi Betty,

It appears that we did have one mileage rated move that was not moved as a mileage rated move but was done as an hourly move. I started on July 25th and the move was done on July 15th.

Thank you,

Chris Jennings
Operations Manager
TempStore Moving Company, Inc.
Toll-Free: 800-938-5674
Mobile: 206-437-1193



MAIN OFFICE AND WAREHOUSE LOCATED AT:
71 S. Orcas Street
Seattle, Washington 98188

TempStore Moving Co.
P.O. Box 81064
Seattle, WA 98108

HG 60620

BILL OF LADING NUMBER _____
DATE ORDER TAKEN _____
MOVE DATE 7-15-05

Bill of Lading

Customer: This bill of lading establishes a contract between you and the household goods carrier. It confirms instructions and authorizes the carrier to move, ship, pack, store and/or perform the services shown. Before you sign this document it is important that you first read the entire document, including the back, and that you ask for an explanation of anything that is not clear or that is different from any previous information received from the carrier or the carrier's representative(s). This contract is subject to conditions on the back of this form.

Rights and Responsibilities Guide (customer must sign this section)

The carrier gave me, or I declined, a copy of the brochure "Your Rights and Responsibilities as a Moving Company Customer" Signature of customer: _____

Customer: Janine Arter Customer: _____
Pick Up Address: _____ Delivery Address: 11531 Tulare Way W
City: North Bend State: WA Zip: _____ City: Marysville State: WA Zip: 98271

Stops At: _____ Storage-In-Transit At: _____
WEIGHT OF SHIPMENT: (Weight Tickets Attached)
Gross Weight _____ Lbs. Weighmaster _____ JOB CODE _____ PICKED UP BY _____
Tare Weight _____ Lbs. Weighmaster _____ PACKED BY _____
Net Weight _____ DATE _____ TRIP NO. _____ DRIVER _____ EQUIP. NO. _____

Expedited shipment: Moving at weight of _____ pounds.
Actual weight is: _____ pounds. Agreed to by customer: _____
Customer's Signature: _____

Exclusive Use: Customer requests exclusive use of vehicle by signing below:
Customer's Signature: _____

Note: The customer must indicate choices made on the items shown below by initialing the appropriate line.

PAYMENT: The customer and carrier agree that payment, at time of delivery, will be made by:
_____ cash _____ money order _____ certified check _____ credit card
_____ personal check _____ business check _____ debit card
If credit arrangements are made, bill to:
NAME: _____
ADDRESS: _____

ESTIMATES: The customer must initial the option selected:
_____ I did not request a written estimate on this shipment and understand I will be required to pay charges shown on this contract.
_____ I understand this shipment is moving under a binding estimate and that I will be required to pay the amount shown on that estimate.
_____ I understand this shipment is moving under a non-binding estimate.
NOTE: If the charges shown on this bill exceed the charges on the non-binding estimate given me by the carrier, the carrier must release the shipment to me upon payment of no more than 110% of the estimated charges and will extend credit for 30 days in which I must pay the remainder due. In no case will I be required to pay more than 115% of the estimate (plus any supplemental estimates) for mileage rated shipments nor more than 125% of the estimate (plus supplements) for hourly rated shipments.

VALUATION: The customer must initial the option selected:
_____ Basic value protection. I release this shipment to a value of 60 cents per pound per article.
_____ Depreciated Value Protection. I release this shipment to a value of \$2 per pound times the shipment weight.
or:
_____ I declare a lump sum total dollar valuation on this entire shipment of: \$ _____ and select the following option:
_____ Replacement Cost Coverage with a \$300 Deductible (Declared value must be at least \$3.50 times weight of shipment.)
_____ Replacement Cost Coverage with no deductible. (Declared value must be at least \$3.50 times weight of shipment.)

STORAGE: If shipment will be placed in storage, the customer must initial the option selected:
_____ This shipment is to be placed in storage for a period of less than 90 days (storage in transit).
_____ This shipment is to be placed in storage for more than 90 days (permanent storage).
_____ This shipment is to be placed in storage in transit for an unknown period of time. I understand that on the 91st day of storage the shipment becomes permanent storage.

LABORERS & VAN (Complete start and stop time chart below)
REG HOURS @ 8 hrs PER HOUR = CHARGES 1175.00
OVERTIME HRS @ _____ PER HOUR = CHARGES _____

Person 1: Start Time <u>8:30</u>	Stop Time <u>11:30</u>	Total Hours <u>3 hrs</u>
Person 2: Start Time <u>9:30</u>	Stop Time <u>1:30</u>	Total Hours _____
Person 3: Start Time _____	Stop Time _____	Total Hours _____
Person 4: Start Time _____	Stop Time _____	Total Hours _____

Details of packing and packing materials

Description	Quantity	Rate	Amount
Dish pack			
Cartons - Less than 3 cubic feet			
3 cubic feet			
4-1/2 cubic feet			
6 cubic feet			
6-1/2 cubic feet			
Wardrobe cartons			
Mattress cartons - crib			
Mattress cartons - twin			
Mattress cartons - double			
Mattress cartons - queen			
Mattress cartons - king			
Glass containers minimum			
Glass containers _____ cubic feet			
Boxes or crates minimum			
Boxes or crates _____ cubic feet			
Appliance packing materials			
Other: _____			
Total packing and materials charges →			

Details transportation, valuation and services provided:

Service:	
Transportation _____ mi. Wt. _____	
Trans. storage-in-transit shipment	
Warehouse to destination: _____ mi.	
Storage-in-transit, 30 days or fraction	
Warehouse handling in/out	
Storage valuation charges	
Extra stops	
Hoisting or piano handling	
Stairs, elevators, long carries	
Transportation valuation charges	
Other: <u>Fuel Surcharge</u>	<u>9.00</u>
Other: _____	
Total for transportation, valuation, services →	
TOTAL BOTH SECTIONS	
LESS AMOUNT PREPAID	
BALANCE DUE FROM CUSTOMER <u>1209.00</u>	

Receipt for goods: _____
Driver's signature: James Smith Date: 7/15/05
Damage noted: _____

Delivery receipt: _____
Customer's signature: Janine Arter Date: 07/15/05

HHG Mileage
N BND,WA to MARYSVILLE,WA

Location	Miles	County
N BND,WA		KING
MARYSVILLE,WA	52	SNOHOMISH
Total	52	