

Completed Activity Report Motor Carrier Safety

Upload? Yes No

1. Investigator(s): TOM MCVAUGH 2. Assignment No.: 110032

3. Current Date: 2-8-10 4. Date of Activity: 2-3-10

5. Carrier Name: MAJESTIC MOVING & PACKAGING INC ✓

6. Permit: THG-63701 7. If new entrant, date of temporary authority 8-28-09

8. MOTCAR No.: ID 5663 9. Carrier is: Intrastate Only

Interstate Only

Both Intra and Interstate

10. Industry Code: 207

11. DOT No.: 1931647

12. MC No.: _____

13. **Destination Check**

Attached is a copy of the Destination Check Safety Plan.

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

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

14. **Safety Complaint**

Attach a copy of the Individual Safety Complaint Plan.

- What activity did staff complete for this safety complaint:

Compliance review

Technical assistance

Number of vehicle inspections: Level 1 _____ Level 2 _____ Level 5 _____

Unannounced terminal visit

Other (please explain): _____

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

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

16. **New Entrant– HHG**

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

17. **Individual Safety Plan Only:**

Attach a copy of the Individual Carrier Safety Plan.

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

18. **Compliance Review Data:**

- Safety Rating: Satisfactory Unsatisfactory Conditional
- Number of vehicles operated: 1
- Number of drivers operated: 1
- Total miles for prior year: 39,363
- Recordable accidents for prior year: 0
- Accident Ratio: _____

19. X Part B Violations:

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	
390		391	2	392	
395		396		397	

20. X Vehicle Inspection Data:

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

21. Vehicle Inspection Violations:

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

22. Driver Inspection Violations:

Medical Card	Medical Waiver	Hours of Service	Drivers License

23. Relevant carrier history, if any: **Carrier obtained Temporary HHG authority on 8-28-09 and attended the new entrant training class held at the commission later that year. This compliance review was to determine if permanent authority should be issued.**

24. Findings: **Carrier received a Satisfactory Safety rating upon completion of this compliance review. I RECOMMEND PERMANENT HHG AUTHORITY BE ISSUED TO THIS CARRIER.**

25. Recommended Action:

- No further action.
- Notify the company in writing of the findings by providing a copy of the CR, vehicle inspection report, safety audit or other similar document.
- Require the company to submit a compliance plan in response to the 15-day letter requirement.
- Recheck – Compliance review (Date: _____)
- Revisit to recheck a specific issue (Date: _____)
Describe: _____
- Send the company a compliance letter. Require a response: Yes No
- Issue administrative penalties in the amount of \$
- Issue a complaint.
- Stop company operations.

26. Is this carrier considered a high risk carrier as a result of this activity? **NO**

- Carrier accident ratio is higher than aggregate ratio.
- Carrier had an out-of-service ratio 25% or higher at the last vehicle inspection.
- Carrier had a defect ratio 75% or higher at the last vehicle inspection.
- Carrier received more than one conditional or unsatisfactory compliance review rating in more than one of the last four compliance reviews (or less than four if four are not completed).
- Other (please explain): _____

27. Additional Comments: **RECOMMEND PERMANENT HHG AUTHORITY BE ISSUED.**

Investigator's signature: Chun d. Mygl 2-8-10

Initial review by: [Signature] Date: 2-8-2010

Reviewer's recommendation: I Agree with recommendation for Permanent Authority - close file -

Final review by: Pratt Date: 2/8/10

Reviewer's recommendation: Agree with recommendation.

Licensing
OK to issue perm authority after 2/28/10!
Close file. Thanks Tom [Signature]


Date closed: 2/8/10 By: CAC

cc: Tom Mc Vaughn
Licensing

Company name Majestic Moving + Packaging Assignment # 110032

Staff Assigned Tom Mc Vaughn

WA UTILITIES & TRANSPORTATION COMMISSION

	US DOT # 1931647	Legal: MAJESTIC MOVING & PACKAGING INC Operating (DBA):		
MC/MX #:	State #: THG-63701	Federal Tax ID: 26-0033217 (EIN)		
Review Type: Compliance Review (CR)				
Scope:	Principal Office	Location of Review/Audit: Company facility in the U. S.		Territory:
Operation Types	Interstate	Intrastate		
Carrier:	N/A	Non-HM	Business: Corporation	
Shipper:	N/A	N/A	Gross Revenue: for year ending:	
Cargo Tank:	N/A			
Company Physical Address:				
6723 - 16TH AVENUE NW SEATTLE, WA 98117				
Contact Name: MICHELLE MARSH				
Phone numbers: (1) 206-789-5646 (2) Fax				
E-Mail Address:				
Company Mailing Address:				
6201 - 15TH AVENUE NW #560 SEATTLE, WA 98117				
Carrier Classification				
Other: INTRASTATE				
Cargo Classification				
General Freight		Household Goods		
Does carrier transport placardable quantities of HM? No				
Is an HM Permit required? N/A				
Driver Information				
	Inter	Intra	Average trip leased drivers/month: 0	
< 100 Miles:		1	Total Drivers: 1	
>= 100 Miles:			CDL Drivers: 0	
Equipment				
	Owned	Term Leased	Trip Leased	Owned
Truck	1	0	0	Term Leased
Power units used in the U.S.: 1				
Percentage of time used in the U.S.: 100				





MAJESTIC MOVING & PACKAGING INC
U.S. DOT #: 1931647

State #: THG-63701

Review Date:
02/04/2010

Part A

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

WUTC ATTN: TOM McVAUGH 360-664-1237
PO BOX 47250
OLYMPIA, WA 98504-7250

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: MICHELLE MARSH

Title: OWNER

Name:

Title:





MAJESTIC MOVING & PACKAGING INC
U.S. DOT #: 1931647

State #: THG-63701

Review Date:
02/04/2010

Part B Violations

1 STATE	Primary: 391.21(a) CFR Equivalent: 391.21(a)	Discovered 1	Checked 1	Drivers/Vehicles In Violation 1	Checked 1
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Description

Using a driver who has not completed and furnished an employment application.

Example

ROGER WESCOTT, TRIP DATE: 1-31-10. EMPLOYMENT APPLICATION FAILED TO CONTAIN DATE OF BIRTH, ACCIDENT INFORMATION, AND OTHER REQUIRED INFORMATION.

2 STATE	Primary: 391.23(a) CFR Equivalent: 391.23(a)	Discovered 1	Checked 1	Drivers/Vehicles In Violation 1	Checked 1
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Description

Failing to investigate driver's background.

Example

ROGER WESCOTT, TRIP DATE: 1-31-10. CARRIER FAILED TO OBTAIN AND REVIEW ORIGINAL DRIVING ABSTRACT WITHIN 30 DAYS FROM DATE OF HIRE.

Safety Fitness Rating Information:		OOS Vehicle (CR): 0	
Total Miles Operated	39,363	Number of Vehicle Inspected (CR): 0	
Recordable Accidents	0	OOS Vehicle (MCMIS): 0	
Recordable Accidents/Million Miles	0.00	Number of Vehicles Inspected (MCMIS): 1	

Your proposed safety rating is : SATISFACTORY	Rating Factors	Acute	Critical
	Factor 1:	S	0
	Factor 2:	S	0
	Factor 3:	S	0
	Factor 4:	S	0
	Factor 5:	N	0
	Factor 6:	S	-

Null
Null



WA UTILITIES & TRANSPORTATION COMMISSION



US DOT #
1931647

Legal: MAJESTIC MOVING & PACKAGING INC
Operating (DBA):

MC/MX #: **State #:** THG-63701 **Federal Tax ID:** 26-0033217 (EIN)

Review Type: Compliance Review (CR) - Receipt

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

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

Carrier: N/A Non-HM

Shipper: N/A N/A

Cargo Tank: N/A

Business: Corporation

Gross Revenue:

for year ending:

Company Physical Address:

6723 - 16TH AVENUE NW
SEATTLE, WA 98117

Contact Name: MICHELLE MARSH

Phone numbers: (1) 206-789-5646 (2)

Fax

E-Mail Address:

Company Mailing Address:

6201 - 15TH AVENUE NW #560
SEATTLE, WA 98117

Report Summary

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

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

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

WUTC ATTN: TOM McVAUGH 360-664-1237
PO BOX 47250
OLYMPIA, WA 98504-7250

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: MICHELLE MARSH

Title: OWNER

Name:

Title:

Reported By: *Tom McVaugh* **Title:** *mclt tras sp 4* **Code:** WA0531 **Date:** 2/4/2010

Received By: *Michelle Marsh* **Title:** *President*





Part B Requirements and/or Recommendations

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

2. THIS COMPLIANCE REVIEW WILL RESULT IN AN INTRASTATE SAFETY RATING. TO OBTAIN A COPY OF THIS RATING, CONTACT CAROLYN CARUSO AT 360-664-1244.

3. Within 15 days, send a letter to the WUTC describing what actions you have taken in response to this review to ensure that you are complying with the Federal Motor Carrier Safety Regulations.

ADDRESS THE LETTER TO:

WUTC
C/O TOM MCVAUGH
PO BOX 47250
OLYMPIA, WA 98504-7250

4. Ensure that all drivers are fully and properly qualified before operating in interstate and/or intrastate commerce. Maintain a complete file as required for each driver, documenting the qualification process.

5. ENSURE THAT AT LEAST ONCE A YEAR, A DRIVING RECORD CHECK (DMV CHECK) IS CONDUCTED ON DRIVERS OPERATING A COMMERCIAL MOTOR VEHICLE WITH A GVWR OF 10,001 POUNDS OR GREATER.

6. MAINTAIN AN ACCIDENT REGISTER THAT REFLECTS ONLY THOSE ACCIDENTS WHICH OCCURRED WHILE OPERATING UNDER YOUR COMPANY'S AUTHORITY. ENSURE THAT YOU MAINTAIN THE REGISTER FOR THREE (3) YEARS FROM THE DATE OF EACH RECORDABLE ACCIDENT.

7. ENSURE THAT EACH COMMERCIAL MOTOR VEHICLE IS PERIODICALLY INSPECTED ANNUALLY AND A RECORD OF THE INSPECTION IS MAINTAINED ON THE VEHICLE AND IN THE CARRIER'S RECORDS. RETAIN THE PERIODIC INSPECTION REPORT FOR A PERIOD OF 14 MONTHS.





MAJESTIC MOVING & PACKAGING INC
U.S. DOT #: 1931647

State #: THG-63701

Review Date:
02/04/2010

Part C

Reason for Review: Other PROVISIONAL
Planned Action: Compliance Monitoring
Safestat Category:

Parts Reviewed Certification:

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

Prior Reviews Prior Prosecutions

Unsat/Unfit Information

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

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule: Not Applicable

Corporate Contact: MICHELLE MARSH
Corporate Contact Title: OWNER

Special Study Information:

Remarks:

On February 4, 2010, I contacted Ms. Michelle Marsh, owner of Majestic Moving & Packaging, Inc. (Majestic), at the carrier's office located in Seattle, WA. The purpose of my contact was to conduct a safety compliance review of this carrier's provisional household goods operation.

Majestic is permitted by the commission to conduct intrastate household goods operations under THG-63701. Majestic was issued this temporary authority on August 28, 2009. The carrier has obtained intrastate USDOT #1931647 from the Federal Motor Carrier Safety Administration (FMCSA). Both the intrastate household goods number and the intrastate USDOT number are displayed correctly on the carrier's vehicle.

Operations are solely intrastate and usually occur within 100 air-miles of the carrier's place of business. The carrier has not conducted any interstate operations.

The carrier currently owns and operates one (1) straight truck, GVWR 26,000 pounds, and employs one (1) full time driver. The truck is insured with the Western National Assurance Company, in the combined single limit of \$750,000. I inspected the carrier's vehicle and issued the truck a current CVSA decal. Refer to Uniform Driver/Vehicle Inspection Report #1278101, attached. The carrier's safety profile listed one (1) Level #2 CVSA inspection conducted by the Washington State Patrol on October 13, 2009 at the westbound Brady scale. The carrier's driver, Mr. Roger Wescott, was cited for violation of his medical certificate.

Ms. Marsh and Mr. Wescott attended the commission's new entrant household goods training in 2009. Both are limited in their knowledge of commission safety regulations, but express a willingness to learn and comply with them. I provided additional educational and training on hours of service, driver qualifications, maintenance records, and accident record keeping.

The compliance review covered the period of August 28, 2009 through February 4, 2010. The following safety violations were noted:

CFR PART 391 - DRIVER QUALIFICATIONS:

The carrier's driver file failed to contain a complete driver application and driver background information. I provided information and the commission safety guide to Ms. Marsh and instructed her on the requirements of CFR Part 391.51. Ms. Marsh stated that she would comply with these regulations immediately.





MAJESTIC MOVING & PACKAGING INC
U.S. DOT #: 1931647

State #: THG-63701

Review Date:
02/04/2010

Part C

Upon completion of this compliance review, the carrier received a Satisfactory safety rating. As a result of this rating, I am recommending this carrier be granted permanent household goods authority.

This assignment is submitted for closing.

Upload Authorized:	Yes	No	
Authorized by:			Date:
Uploaded:	Yes	No	Failure Code:
Verified by:			Date:



WA UTILITIES & TRANSPORTATION COMMISSION



US DOT #
1931647

Legal: MAJESTIC MOVING & PACKAGING INC
Operating (DBA):

MC/MX #: **State #:** THG-63701 **Federal Tax ID:** 26-0033217 (EIN)

Review Type: Compliance Review (CR) - Receipt

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

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

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

Business: Corporation
Gross Revenue: for year ending:

Company Physical Address:

6723 - 16TH AVENUE NW
SEATTLE, WA 98117

Contact Name: MICHELLE MARSH

Phone numbers: (1) 206-789-5646 (2) **Fax**

E-Mail Address:

Company Mailing Address:

6201 - 15TH AVENUE NW #560
SEATTLE, WA 98117

Report Summary

Report	# of Pages
Part A - General	2
Part B - Violations	1
Part B - Recommendations	1
Review/Audit Receipt Page	1
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PO BOX 47250
OLYMPIA, WA 98504-7250

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Person(s) Interviewed

Name: MICHELLE MARSH

Title: OWNER

Name:

Title:

Reported By:

Title:

Code: WA0531 **Date:** 2/4/2010

Received By:

Title:



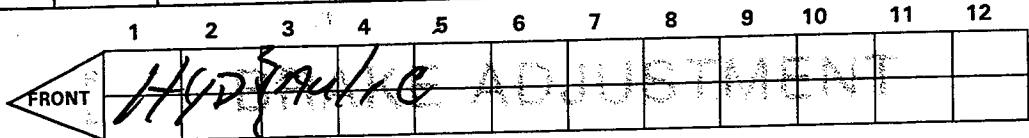
WUTC

UNIFORM DRIVER/VEHICLE INSPECTION REPORT

1278101

PERSONNEL NO. 5531 DIST / DET _____ LEVEL: 1 _____ 2 _____ 3 _____ 4 _____ 5 X

GENERAL						HAZARDOUS MATERIALS					
DATE <u>24.10</u>		TIME (MILITARY) BEGUN <u>11:00</u>		TIME (MILITARY) FINISHED <u>11:23</u>		HAZARD CLASS / DIVISION NO. _____					
LOCATION - SR/MP <u>SEATTLE</u>			SCALEHOUSE NO. <u>17</u>			CNTY CODE _____			REPORTABLE QTY? Y <input type="checkbox"/> N <input type="checkbox"/> HAZARDOUS WASTE? Y <input type="checkbox"/> N <input type="checkbox"/>		
CARRIER <u>206-789-5646</u>						PLACARD REQUIRED? Y <input type="checkbox"/> N <input type="checkbox"/> CARGO TANKS? Y <input type="checkbox"/> N <input type="checkbox"/>					
CARRIER NAME (Include DBA when applicable) <u>MAJESTIC MOVING & PACKING, Inc</u>											
ADDRESS <u>6723-16th Ave NW</u>											
CITY <u>SEATTLE</u>			STATE <u>WA</u>		ZIP CODE <u>98117</u>		INTERSTATE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		DOT NO. <u>1931647</u>		ICC NO. _____
DRIVER											
DRIVER NAME _____						LICENSE NO. _____			STATE _____		EXP. YEAR _____
DATE OF BIRTH / /			MED. CERT. Y <input type="checkbox"/> N <input type="checkbox"/>		SHIPPER NAME _____			SHIPPING NO. _____			
WAIVER Y <input type="checkbox"/> N <input type="checkbox"/>											
VEHICLE											
REGISTERED OWNER NAME/ADDRESS _____								G.V.W. <u>26,000</u>		PBT RATE _____	
UNIT	TYPE	YEAR/MAKE		CO. UNIT NO.		LICENSE NO. / VIN NO.				STATE	
1	<u>TR</u>	<u>99 Intl</u>				<u>B33535L</u>				<u>WA</u>	
2											
3											
4											



CFR	VIOLATIONS	D	1	2	3	4	Unit # O/S	Complied

CVSA DECAL UNIT 1 12789753 UNIT 2 _____ UNIT 3 _____ UNIT 4 _____ NOIC NO. _____

DRIVER SIGNATURE [Signature]

OFFICER SIGNATURE [Signature]

— Vehicle may not be operated until O/S defects noted above are repaired.
 — Driver may not drive until in compliance.

Provisional
THG-63701

Company

Basic Information

Id 5663
Name Majestic Moving & Packing, Inc.
DBAs
UBI 602169776
Industry 207 Household Goods Carriers
Status active - Active
Carrier Status Active as of 8/28/09

Prev. Id
Next Id
Prev. Id List
Prev. names
Prev. DBA's

Contacts and Addresses

Business Address

6723 16th Ave. NW
Seattle WA 98117

Phone 206-789-5646
Fax 206-789-5646

Mailing Address

6201 15th Ave. NW #560
Seattle WA 98107

Authorized Representatives

Rep. Names
Rep. Emails
Rep. letters:

Overall Status: Active

Intrastate Permit: Active as of 8/28/09

Status by Industry:

Michelle Marsh owner

<u>Ind</u>	<u>Status</u>	<u>Chg Date</u>
207	Active	08/28/09

RMS Filings (Most recent filing at the top.)

Compld Docket Description

Transportation Companies

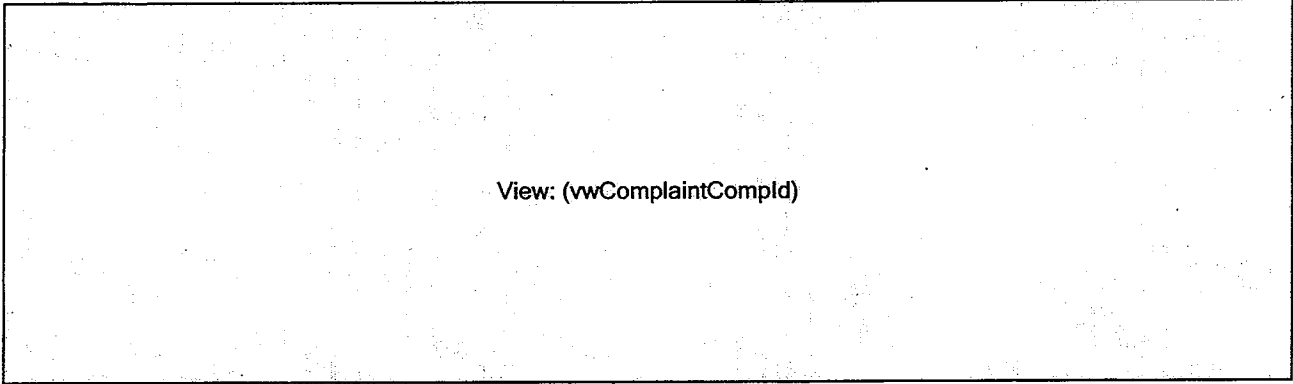
USDOT
Id

Permit and Application list:

Type	Id	Ind	Status
Permit	THG063701	207	Active
Application	091299	207	Approved

Company Business Type C
 Company USDOT Id
 Incorporation State WA
 Corporation Structure Michele Marsh - President - 100%
 Address Date

Consumer Complaints



View: (vwComplaintCompld)

<u>Form</u>	<u>Effective</u>	<u>Expires</u>	<u>UTC Exp.</u>
E	08/05/09		

<u>Form</u>	<u>Effective</u>	<u>Expires</u>	<u>UTC Exp.</u>
E	08/05/09		

WASHINGTON STATE UTILITIES AND TRANSPORTATION COMMISSION

1300 S EVERGREEN PARK DRIVE SW, PO BOX 47250

OLYMPIA, WA 98504-7250

(360) 664-1222

This certificate authorizes the following operations under the provisions of RCW Title 81

Majestic Moving & Packing, Inc.
6201 15th Ave. NW #560
Seattle, WA 98107

Permit No.
THG-63701

Household Goods and General Commodities (excluding Armored Car Service and Hazardous Materials) in the state of Washington.

The authority in this permit is temporary to allow Majestic Moving & Packing, Inc., an opportunity to provide service as a household goods carrier on a provisional basis for six months during which time the commission will evaluate whether the applicant has met the criteria for obtaining permanent authority under the provisions of WAC 480-15-330.

The authority granted in this permit is only effective while the applicant complies with the terms and conditions of Docket TV-091299 and only until such time as the commission, by further order grants, denies, or, dismisses the application for permanent authority in Application TV-091299, or otherwise cancels the authority granted.

This permit shall automatically terminate upon either the entry of a commission order granting or approving withdrawal of Application TV-091299 for permanent household goods carrier authority, or in case Application TV-091299 is denied, dismissed, or the relief sought under Application TV-091299 is limited in any way by commission order, upon the expiration of the last day for seeking review of the commission order or a later date fixed by order of a reviewing court.

TV-091299

08-28-09

WASHINGTON UTILITIES AND TRANSPORTATION
COMMISSION



By _____



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

Majestic Moving & Packing, Inc.
6201 15th Ave. NW #560
Seattle WA 98107

August 18, 2009

Notice of Deficient Household Goods Application

Return this document with the completed/corrected items listed below for prompt processing of your application for operating authority.

- X Your application is missing Page 7. I have attached a blank copy for you to complete and return to our office. You can either mail it back or fax it to 360-664-1181.
- X You need to have a USDOT number. You can obtain one online at www.fmcsa.dot.gov/online-registration or you can contact (360)596-3816 or (360)596-3810 for assistance.
- X We have received your Form E insurance filing but we still need to verify your cargo insurance. Your insurance company can submit a Form H for verification.

Who do I contact if I have questions?

You may call me at 360-664-1170 or e-mail at tleipski@utc.wa.gov. Our fax number is 360-586-1181.


Sincerely,

Tina Leipski
Licensing Services

Enclosure

Carrier Company Id and Name		Filing Received Date
5663 - Majestic Moving & Packing, Inc.		08/18/2009
Insurance Company Id and Name		Effective Date
607 - WESTERN NATIONAL ASSURANCE COMPANY		08/05/2009
Policy ID	Form Type	Cancel Received Date
CPP1011220	Form E	
Filing Source	Surplus Line Affidavit	Expiration Date
E-mail	No	
Expiration Action	Insurance Filing ID	UTC Expiration Date

Multiple Filing	Filing Resolved
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
User Name	Resolved Date
Filing Description	

Cite Letter
Insurance Filing
 - Form E - majestic.doc
Insurance Filings Attachment Text
<p>Form E</p> <p style="text-align: center;">UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE</p> <p>Filed with Washington Utilities and Transportation Commission (hereinafter called Commission)</p>

This is to certify, that the Western National Assurance Company (hereinafter called Company)

of 9706 4th Ave NE Ste 200 Seattle WA 98115

has issued to Majestic Moving & Packing Inc of 6723 16th Ave NW Seattle WA 98117

a policy or policies of insurance effective from 08/05/09 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

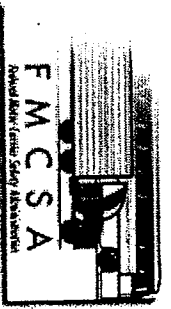
Countersigned at 9706 4th Ave NE Ste 200, Seattle, WA 98115

this 17th day of August, 2009

Insurance Company File No. CPP 1011220 Janet K Thode
(Policy Number) (Authorized Company Representative)

Date-time	Permit Id	Log Reason	User
08/28/09 14:07	THG063701	New 091299 approved.	Tina Leipski
08/28/09 14:06	THG063701	☞ Certificate issued in 091299.	Tina Leipski
08/28/09 14:06	THG063701	Certificate served in 091299.	Tina Leipski
08/28/09 14:06	THG063701	New permit created by 091299.	Tina Leipski
08/28/09 14:06	THG063701	Status updated by 091299.	Tina Leipski
08/28/09 14:06	THG063701	Authority text updated by 091299.	Tina Leipski
08/28/09 12:44	THG063701	New 091299 approved.	Tina Leipski
08/28/09 12:43	THG063701	☞ Certificate issued in 091299.	Tina Leipski
08/28/09 12:43	THG063701	Certificate served in 091299.	Tina Leipski
08/28/09 12:43	THG063701	New permit created by 091299.	Tina Leipski
08/28/09 12:43	THG063701	Authority text updated by 091299.	Tina Leipski
08/28/09 12:43	THG063701	Status updated by 091299.	Tina Leipski
08/18/09 07:27		☞ Cite letter sent	Tina Leipski

5663 Majestic Moving & Packing, Inc.



Company Safety Profile

Selection Criteria:
Crash Sum Date: 02/01/2008 To 02/01/2010
Crash Detail Date: 02/01/2009 To 02/01/2010
Insp Sum Date: 02/01/2008 To 02/01/2010
Insp Detail Date: 02/01/2009 To 02/01/2010
Inspection: All

The information contained in this Profile represents all the usable data that has been reported to the Federal Motor Carrier Safety Administration through the requirements of State and Federal programs.

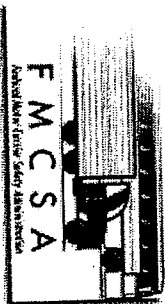
NOTICE

This document is disseminated under the sponsorship of the Department of Transportation in the interest of information exchange. The United States government assumes no liability for its components or use thereof.

QUESTIONS

Inspection and Crash data in the Profile are sent to the Federal Motor Carrier Safety Administration by State Enforcement agencies. Only State Enforcement Agencies can resolve concerns about missing or inaccurate Inspection or Crash information. The contact in each state is listed at the end of the Profile. To resolve any other questions about the content of this document, please call or write to:

Vivian Oliver, Transportation Specialist
(202) 366-4023
USDOT/FMCSA, MC-RIS
1200 New Jersey Ave., S.E.
Washington, D. C. 20590



MCMIS

Motor Carrier Management
Information System

Company Safety Profile

Selection Criteria:
Crash Sum Date: 02/01/2008 To 02/01/2010
Crash Detail Date: 02/01/2009 To 02/01/2010
Insp Sum Date: 02/01/2008 To 02/01/2010
Insp Detail Date: 02/01/2009 To 02/01/2010
Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC
Doing Business As:
USDOT #: 1931647
Report 1

Carrier Operations and Safety Ratings

Physical Address: 6723 16TH AVE NW
SEATTLE, WA 98117
(206) 789-5646
County Name: KING
Mailing Address: 6201 15TH AVE NW #560
SEATTLE, WA 98107

EIN: 260033217
Status: ACTIVE
Class: PRIVATE PROPERTY
Carrier Type: CARRIER
Carrier Operation: INTRASTATE NON-HAZMAT
Shipper Operation: HOUSEHOLD GOODS
Cargo:
Hazmat C:
Hazmat S:
Drivers: 1 Power Units: 1 Truck 1 Bus Units: 0
MCS-150 Date: 08/28/2009
New Entrant: NEVER IN NEW ENTRANT PROGRAM

Safety Audit: NO SAFETY AUDIT FOR THIS COMPANY
Safety Rating: Rating Date: Review/Audit Date:

Review/Rating History:	Review Type	Review Date	Rating	Conducted By	Code	Reason Not Rated
NO REVIEW/RATING HISTORY FOR THIS COMPANY						

Mileage from Motor Carrier Identification Report (Form MCS-150):
Mileage Year: Carrier Reported Mileage:

Out of Service Records:	OOS Date	Rescind Date	OOS Reason	OOS Reason Desc
NO OOS RECORDS FOR THIS COMPANY				

Insurance Information:
NO INSURANCE INFORMATION FOR THIS COMPANY



Company Safety Profile

Selection Criteria:
 Crash Sum Date: 02/01/2008 To 02/01/2010
 Crash Detail Date: 02/01/2009 To 02/01/2010
 Insp Sum Date: 02/01/2008 To 02/01/2010
 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC
 Doing Business As:
 USDOT #: 1931647
 Report 6

Inspections Summary

Driver includes Inspection Levels 1, 2, 3 and 6.
 Vehicle includes Inspection Levels 1, 2, 5 and 6.
 HM (Hazardous Materials) includes all inspections where vehicle carries Hazardous Materials.

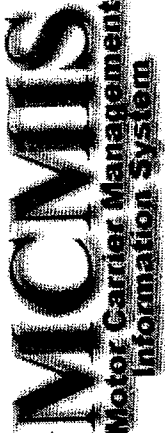
Average # of OOS Viol Per Insp = Average number Out-of-Service Violations per Inspection.

% OOS Inspections = Percentage of Inspections with 1 or more Out-of-Service Violations.

Categories Driver, Vehicle and HM may not add to the All column because two or more of these types of Violations may occur on the same Inspection.

Year	Number of Inspections				Number of OOS Inspections				% OOS Inspections			
	Driver	Vehicle	HM	All	Driver	Vehicle	HM	All	Driver	Vehicle	HM	All
02/02/2009 TO 02/01/2010	2	1	0	2	0	0	0	0	0%	0%	0%	0%
02/01/2008 TO 02/01/2009	0	0	0	0	0	0	0	0	0%	0%	0%	0%
Total:	2	1	0	2	0	0	0	0	0%	0%	0%	0%

Year	Number of OOS Violations				Average # of OOS Violations			
	Driver	Vehicle	HM	All	Driver	Vehicle	HM	All
02/02/2009 TO 02/01/2010	0	0	0	0	0.0	0.0	0.0	0.0
02/01/2008 TO 02/01/2009	0	0	0	0	0.0	0.0	0.0	0.0
Total:	0	0	0	0	0.0	0.0	0.0	0.0



Company Safety Profile

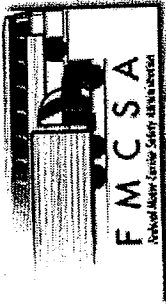
Selection Criteria: 02/01/2008 To 02/01/2010
 Crash Sum Date: 02/01/2009 To 02/01/2010
 Crash Detail Date: 02/01/2008 To 02/01/2010
 Insp Sum Date: 02/01/2008 To 02/01/2010
 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC
 Doing Business As:
 USDOT #: 1931647
 Report 7

**Inspection Characteristics
 Number and Percent of Violations by Type**

Type	Num of Viol	%
DRIVER		
MEDCRT	2	50
FLSLOG	0	0
LOGVIO	0	0
10/15	0	0
15/20	0	0
60/70	0	0
OTHOS	0	0
DSQDRV	0	0
DRUGS	0	0
ALCOHL	0	0
SEATBT	0	0
TRFENF	0	0
RADAR	0	0
OTHDRV	0	0
CTLDEV	1	25
2CLOSE	0	0
LANCHG	0	0
IMPAS	0	0
RECDRV	0	0
SPEDNG	0	0
IMPTRN	0	0
SIZWGT	0	0
RTOWAY	0	0
STAHOS	0	0
BRKADJ	0	0
BRKOTH	0	0
COUPLR	0	0
FUEL	0	0
FRAMES	0	0
VEHICLE		

Type	Num of Viol	%
DRIVER		
MEDCRT	0	0
FLSLOG	0	0
LOGVIO	0	0
10/15	0	0
15/20	0	0
60/70	0	0
OTHOS	0	0
DSQDRV	0	0
DRUGS	0	0
ALCOHL	0	0
SEATBT	0	0
TRFENF	0	0
RADAR	0	0
OTHDRV	0	0
CTLDEV	0	0
2CLOSE	0	0
LANCHG	0	0
IMPAS	0	0
RECDRV	0	0
SPEDNG	0	0
IMPTRN	0	0
SIZWGT	0	0
RTOWAY	0	0
STAHOS	0	0
BRKADJ	0	0
BRKOTH	0	0
COUPLR	0	0
FUEL	0	0
FRAMES	0	0
VEHICLE		



Company Safety Profile

Selection Criteria: 02/01/2008 To 02/01/2010
Crash Sum Date: 02/01/2009 To 02/01/2010
Crash Detail Date: 02/01/2008 To 02/01/2010
Insp Sum Date: 02/01/2008 To 02/01/2010
Insp Detail Date: 02/01/2009 To 02/01/2010
Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC

Doing Business As:

USDOT #: 1931647

Report 7

Inspection Characteristics
Number and Percent of Violations by Type

Table with 3 columns: Type, Num of Viol, % for period 02/02/2009 TO 02/01/2010. Rows include VEHICLE, HAZMAT, INVALID, Total: 4, 100%

Table with 3 columns: Type, Num of Viol, % for period 02/01/2008 TO 02/01/2009. Rows include VEHICLE, HAZMAT, INVALID, Total: 0, 100%



Company Safety Profile

Selection Criteria:
 Crash Sum Date: 02/01/2008 To 02/01/2010
 Crash Detail Date: 02/01/2009 To 02/01/2010
 Insp Sum Date: 02/01/2008 To 02/01/2010
 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC

Doing Business As:

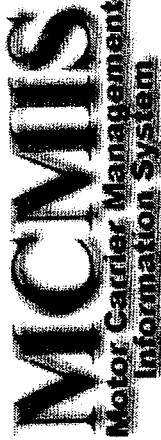
USDOT #: 1931647

Report 7

Inspection Characteristics - Descriptions

Code	Description
DRIVER VIOLATIONS	
MEDCRT	MEDICAL CERTIFICATE
CTLDEV	FAILURE TO OBEY TRAFFIC CONTROL DEVICE
LOGVIO	NO LOG BOOK, LOG NOT CURRENT, GENERAL LOG VIOLATIONS
10/15	10/15 HOURS
15/20	15/20 HOURS
60/70	60/70/80 HOURS
OTHOS	ALL OTHER HOURS-OF-SERVICE
DSQDRV	DISQUALIFIED DRIVERS
DRUGS	DRUGS
ALCOHL	ALCOHOL
SEATBT	SEAT BELT
TRFENF	TRAFFIC ENFORCEMENT
RADAR	RADAR DETECTORS
OTHDRV	ALL OTHER DRIVER VIOLATIONS
FLSLOG	FALSE LOG BOOK
RTOWAY	FAILURE TO YIELD RIGHT OF WAY
SIZWGT	SIZE AND WEIGHT
IMPTRN	IMPROPER TURNS
SPEEDNG	SPEEDING
RECDRV	RECKLESS DRIVING
IMPPAS	IMPROPER PASSING
LANCHG	IMPROPER LANE CHANGE
2CLOSE	FOLLOWING TOO CLOSE
STAHOS	STATE/LOCAL HOURS OF SERVICE

Code	Description
VEHICLE VIOLATIONS	
LDSECR	LOAD SECUREMENT
WINDSHL	WINDSHIELD
BRKADJ	BRAKES, OUT OF ADJUSTMENT
EXHST	EXHAUST DISCHARGE



Company Safety Profile

Selection Criteria:
 Crash Sum Date: 02/01/2008 To 02/01/2010
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 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC

Doing Business As:

USDOT #: 1931647

Report 7

Inspection Characteristics - Descriptions

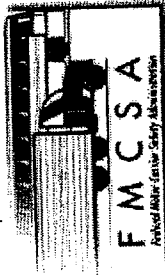
Code	Description
EMREQP	EMERGENCY EQUIPMENT
PERINS	PERIODIC INSPECTION
OTHER	ALL OTHER VEHICLE DEFECTS
WHEELS	WHEELS, STUDS, CLAMPS, ETC.
TIRES	TIRES
SUSPEN	SUSPENSION
LIGHTS	LIGHTING
FRAMES	FRAMES
FUEL	FUEL SYSTEMS
COUPLR	COUPLING DEVICES
BRKOTH	BRAKES, ALL OTHERS
STERNG	STEERING MECHANISM

HAZMAT VIOLATIONS

Code	Description
HBRACE	IMPROPER BLOCKING AND BRACING
HPAPRS	SHIPPING PAPER
HPLCRD	IMPROPER PLACARDING
HIMSHIP	ACCEPTING SHIPMENT IMPROPERLY MARKED
HOTHR	ALL OTHER HM VIOLATIONS
HTEST	NO RETEST AND INSPECTION (CARGO TANK)
HSHTOF	NO REMOTE SHUTOFF CONTROL
HSPEC	USE OF NON-SPECIFICATION CONTAINER
EMGRES	EMERGENCY RESPONSE

INVALID VIOLATIONS

Code	Description
UNKNOWN	UNKNOWN



Company Safety Profile

Selection Criteria: 02/01/2008 To 02/01/2010
 Crash Sum Date: 02/01/2009 To 02/01/2010
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 Insp Sum Date: 02/01/2008 To 02/01/2010
 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC

Doing Business As:

USDOT #: 1931647

Report 8

**Individual Inspections - Min: 1 Year, Max: 2 Years
 (from the Date of the Carrier Profile)**

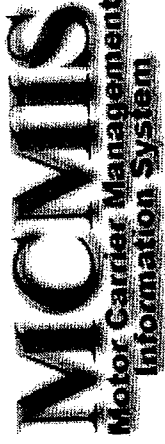
The report shows all inspections for at least one year (a year is defined as a total of 12 months of data previous to the date of the report). For a Motor Carrier involved in less than 50 inspections in the requested year - the report will show inspections for the previous year up to a maximum of 50 inspections.

Post Crash Violations are not included in SafeStat calculations.

¹ Out-of-Service Violation ² Post Crash Violation ³ Both Out-of-Service and Post Crash Violation

Level	Inspection				Carrier/Vehicle			Driver			
	Date	Time	State	Report #	Name	City	State	Driver License #	Driver Name	State	Driver DOB
2	10/13/2009	14:49	WA	W806002706	MAJESTIC MOVING & PACKING INC	SEATTLE	WA	ROGER D WESCOTT	ROGER D WESCOTT	WA	12/17/1962
	Unit #:	1	Unit Type: TR	License #:	ID-YG5167	VIN:		WESCORD384RP	Company:		
	Total	200S	0D MEDCRT	1 OTHER							
3	10/13/2009	13:23	WA	W209004950	MAJESTIC MOVING & PACKING INC	SEATTLE	WA	ROGER D WESCOTT	ROGER D WESCOTT	WA	12/17/1962
	Unit #:	1	Unit Type: TR	License #:	ID-YG5167	VIN:		WESCORD384RP	Company:		
	Total	200S	0D CTLDEV	D MEDCRT							

Selection Criteria: 02/01/2008 To 02/01/2010
Crash Sum Date: 02/01/2009 To 02/01/2010
Crash Detail Date: 02/01/2008 To 02/01/2010
Insp Sum Date: 02/01/2008 To 02/01/2010
Insp Detail Date: 02/01/2009 To 02/01/2010
Inspector: All



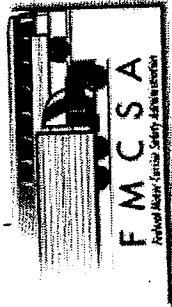
Company Safety Profile

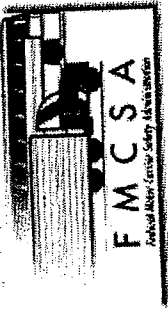
Legal Name: MAJESTIC MOVING & PACKING INC
Doing Business As:
USDOT #: 1931647
Report 10

Reports not Printed

The following Company Safety Profile reports were not printed due to insufficient data (or no data) available, or detail information was not requested:

Reports Not Printed
REPORT 2: SAFESTAT HISTORY
REPORT 3: ENFORCEMENT DATA
REPORT 4: CRASHES - 4 YEAR SUMMARY
REPORT 5: INDIVIDUAL CRASHES - MIN: 1 YEAR, MAX: 2 YEARS
REPORT 9: CARGO TANK INFORMATION (NOT REQUESTED)





Company Safety Profile

Selection Criteria:
 Crash Sum Date: 02/01/2008 To 02/01/2010
 Crash Detail Date: 02/01/2009 To 02/01/2010
 Insp Sum Date: 02/01/2008 To 02/01/2010
 Insp Detail Date: 02/01/2009 To 02/01/2010
 Inspection: All

Legal Name: MAJESTIC MOVING & PACKING INC

Doing Business As:

1931647

USDOT #:

Report 11

State Point of Contact Listing

If you have access to the Internet, please use DataQs (<http://dataqs.fmcsa.dot.gov>) to file your data challenge. This system will track the status of your request from initiation to resolution and notify you when the challenge is resolved.

State	Telephone #	State	Telephone #
ALABAMA	(334) 242-4395	NEVADA	(775) 684-4823
ALASKA	(907) 341-3206	NEW HAMPSHIRE	(603) 271-3339
AMERICAN SAMOA	(684) 699-6628	NEW JERSEY	(609) 530-8026
ARIZONA	(602) 223-2413	NEW MEXICO	(505) 827-0390
ARKANSAS	(501) 569-2421	NEW YORK	(518) 457-3406
BHUTAN	(250) 387-6724	NORTH CAROLINA	(919) 861-3186
CALIFORNIA	(916) 375-2805	NORTH DAKOTA	(701) 328-1688
COLORADO	(303) 273-1875	NORTHERN MARIANA ISLAND, SAIPAN	(670) 644-9129
CONNECTICUT	(860) 263-5446	OHIO	(614) 466-0429
DELAWARE	(302) 378-5824	OKLAHOMA	(405) 521-6108
DISTRICT OF COLUMBIA	(202) 727-1555	ONTARIO	(905) 704-2465
FLORIDA	(850) 245-7900	OREGON	(503) 378-4601
GEORGIA	(404) 624-7206	PENNSYLVANIA	(717) 346-7347
GUAM	(671) 475-1899	PUERTO RICO	(787) 756-1453
HAWAII	(808) 692-7666	RHODE ISLAND	(401) 444-1183/1140
IDAHO	(208) 884-7220	SOUTH CAROLINA	(803) 896-5509
ILLINOIS	(217) 785-3032	SOUTH DAKOTA	(605) 773-4578
INDIANA	(317) 615-7444	TENNESSEE	(615) 687-2292
IOWA	(515) 237-3138	TEXAS	(512) 424-2854
KANSAS	(785) 296-6800	US VIRGIN ISLANDS	(809) 776-5820
KENTUCKY	(502) 564-3276	UTAH	(801) 965-4255
LOUISIANA	(225) 925-6113	VERMONT	(802) 828-2078
MAINE	(207) 624-8939	VIRGINIA	(804) 674-2005
MARYLAND	(410) 582-5727	WASHINGTON	(360) 753-0337
MASSACHUSETTS	(978) 369-1004	WEST VIRGINIA	(304) 340-0453
MICHIGAN	(517) 336-6195	WISCONSIN	(608) 266-5524
MINNESOTA	(651) 405-6178	WYOMING	(307) 777-4319
MISSISSIPPI	(601) 362-3574	UNITED STATES (US) - VIVIAN OLIVER	(202) 366-4023
MISSOURI	(573) 751-4653		
MONTANA	(406) 444-3300		
NEBRASKA	(402) 471-0105		