

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: Stallin Deliveries

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Jacques Barro

Address (include street address, mailing address, city, state, zip, and county):
175919 Eason ave Bothell, WA 98041

Phone Number:

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:
Move of household goods

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
The company has great competitive price and they care

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
They have a good work ethic and excellent customer service

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Jacques Barro 3/31/2017 Bothell, wa
Signature of Person Completing Form Date and Location

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: *Station Moving*

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: *FABRIZIO REGOLI*

Address (include street address, mailing address, city, state, zip, and county):
13426 GREENWOOD AVE. N., APT 408 SELLER, WA 98933

Phone Number: *(206) 617-0850*

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community: *competitive price, very nice people, very professional.*

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
Overall, great experience

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct

[Signature]
Signature of Person Completing Form

03/22/2017 *13426 Greenwood Ave N.*
Date and Location *Apt. 408 Seller WA - 98933*



ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: Stallion Moving Service

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Pastor David Ouedraogo

Address (include street address, mailing address, city, state, zip, and county):
1027 170th PL NE Bellevue, WA 98008

Phone Number: (425) 443-7813

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:
Moving Services for some of my congregation members

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
This business works with my local church - This will help with my church members.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
This team is professional and dedicated.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.
Daniel Ouedraogo 4/1/17 Bellevue
Signature of Person Completing Form (Date and Location)