

TV-061820

Motor Carrier Safety Staff Recommendation

Investigator(s): Leon Macomber

Permit: HG-62626

Assignment No.: 107112

MOTCAR No.: 44788

Company name: Expert Services, LLC.
d/b/a Total Transitions

Type of assignment:

- Compliance review
- Technical assistance
- Vehicle inspection
- Other: _____

- Education
- Training
- Destination check

Date(s) of activity: June 5, 2007

Relevant company history, if any:

Findings: I performed a recheck economic and terminal safety operations check and found considerable improvement.

Recommended Action:

- No further action.
- Notify the company in writing of the findings by providing a copy of the CR or vehicle inspection report.
- Require the company to submit a compliance plan in response to the 15-day letter requirement or in response to a compliance letter.
- Send the company a compliance letter. Require a response: Yes No
- Issue administrative penalties in the amount of \$
- Issue a complaint.
- Stop company operations.

Recheck: Yes (Date: _____) No

Additional Comments: Mr. Watkins is using rental vehicles, on a daily rental basis, and does not own a vehicle. I did not perform a compliance review due to this fact. I did provide considerable technical, educational assistance

with regard to motor vehicle safety requirements, driver qualifications and hours of service requirements. I am recommending that permanent household goods authority be processed and granted.

Investigator's signature: Glenn Macomber

Initial Review by: _____ Date: _____

Final recommendation by: K. Hunter Date: 6-6-07
Concur with state recommendation
to issue permanent authority.
doc & file.
Thanks!

Date closed: 6/6/07 By: CSC

cc: Leon Macomber
Licensing

MEMORANDUM

June 6, 2007

Assignment No: 107112
Industry Code: 207

TO: Kathy Hunter, Transportation Safety Compliance Manager
FROM: Leon Macomber, MCLE Special Investigator
SUBJECT: Expert Services, LLC. HG-62626
d/b/a Total Transitions
10709 NE 144th Court
Bothell, WA. 98011
Phone: (425) 822-6878 Office
(206) 919-4806 Cell
UBI# 602-300-782
MOTCAR# 44788
P-79485

On June 5, 2007 I contacted Mr. Stan Watkins, Member of Total Transitions, at his residence 10709 NE 144th Court, Bothell, Washington, concerning a recheck of his economic and terminal safety operation.

At this time I performed an economic recheck using a Household Goods Technical Assistance and Records Review Checklist as a guide. I found considerable improvement and I am attaching a copy labeled Exhibit A.

In addition I once again gave him technical, educational assistance in the following areas:

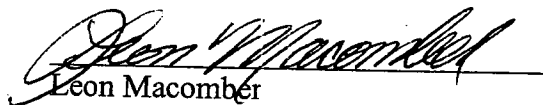
- 1) Driver Qualification File Requirements
- 2) New Hours of Service Regulations
- 3) Parts and Accessories Necessary For Safe Operations of a Motor Vehicle
- 4) Inspection, Repair and Maintenance Record Requirements
- 5) Vehicle Identification

Currently Mr. Watkins is using rental vehicles, on a daily rental basis, to perform household good movements.

Driver qualification files and hours of service records are now properly setup and maintained.

I am recommending that Mr. Watkins permanent household goods permit be processed and granted.

I am submitting this assignment for closure at this time.

A handwritten signature in cursive script, appearing to read "Leon Macomber", is written over a horizontal line.

Leon Macomber

MCLE Special Investigator

EXHIBIT

A

Washington Utilities and Transportation Commission
**Household Goods Technical Assistance and
 Records Review Checklist**

Rev. 4/01

Carrier: <u>Expert Services, LLC,</u> d/b/a: <u>Total Transitions</u>	HG- <u>62626</u>
Location: <u>10709 NE 144th Court</u> <u>Bothell, Washington 98011</u>	Assignment #: <u>107112</u>
Investigator: <u>Leon Macomber</u>	UBI #: <u>602-300-782</u>
Period of Records Checked: From <u>02/27/07</u> To: <u>06/05/07</u> Total Number of Bills: <u>7</u>	

WAC Rule	WAC Rule Reference	Findings	Number Checked	Number in Violation
480-15-	Does the company have current accounts with: Labor & Industries Employment Security Secretary of State Dept. of Revenue	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	4	—
110	Address/Phone Number - Are the carrier's address and phone number those listed in Commission records?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	—
360	Permits - Is original kept in main office?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
480	Annual Report/Regulatory Fees - Has the carrier filed the most recent annual report? Was the annual report filed on or before May 1 st ? If not, were late fees and interest included? Does the carrier correctly calculate and submit regulatory fees?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	N/A NOT DUE UNTIL MAY 1ST, 2008	
530	Insurance - Does the carrier have current public liability and property damage insurance? Does it match the information on file with the Commission? Liability and property damage insurance information: Company: <u>United Financial Casualty Co.</u> Policy: <u># CA05537504</u> Liability Limits: <u># 7,500,000</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	—
550	Cargo Insurance - Does the carrier have adequate cargo insurance? Cargo Insurance information: Company: <u>Lloyd's of London</u> Policy: <u>BCM 23634</u> Limits: <u># 20,000</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	—

590/600	Leasing - <i>Short Term/Daily</i> Does the carrier lease equipment? If yes: Were the leases filed with and approved by the Commission? Were the terms of the lease complied with?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>Short Term</i> <i>"Each Occurrence"</i>	
610	Advertising - Is the carrier's HG or TCC permit number included in all advertisements? If no, note on "other information".	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3	

Bill of Lading

720	Bills of Lading - Is the carrier using a Uniform Household Goods Bill of Lading that meets the requirement of Tariff 15-A? Has the carrier issued a Bill of Lading for each shipment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
740	Does each Bill of Lading contain all required information?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
620	Notice to Shippers - Is the carrier providing shippers with the "Rights and Responsibilities" guide Has the notation on the Bills of Lading been signed by the shipper?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—

Tariffs - Rates & Charges

490	Does the carrier have a copy of Tariff 15-B? If yes: Is it current? Is it available to the public?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	—
	If shipper selected a valuation option, were charges computed correctly?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3	—
	Does the carrier accurately record start and stop times on the bill of lading for each job?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
	Are the charged hourly rates within the rate band?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
	Are the extra labor charges within the rate band?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
	Does the carrier charge travel time to and from job sites?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7	—
	Charging overtime is optional. If the carrier charges overtime, are the charges within the rate band? <i>Does Not Charge</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	N/A
	Has the carrier assessed hourly rates for any moves that have exceeded 35 miles from origin to destination?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7	—
	Has the carrier charged for any services not authorized under time rates? (Long carry, stairs, piano charge, etc.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7	—
	Packing Material rates - are the charges within the rate band? Does the carrier charge for materials not in the tariff? (Such as: paper, tape, padding, bubble wrap, shrink wrap, tape, etc.) Has the carrier provided packing material to the shipper at no cost? <i>50% Used Material Charge</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2	—
	Does the carrier use the Rand McNally mileage guide to determine mileage for tariff purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	None Yet	
	Is mileage computed correctly?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
750	Determination of weights - has the carrier weighed all shipments that have exceeded 35 miles from origin to destination? Are empty and loaded weight tickets maintained with the bill of lading?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Does the carrier use correct tariff mileage/weight charges?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11

	Packing Material rates - are the charges within the rate band? Does the carrier charge for materials not in the tariff? (Such as: paper, tape, padding, bubble wrap, shrink wrap, tape, etc.) Has the carrier provided packing material to the shipper at no cost?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>None Yet</i>	<i>11</i>	<i>11</i>
	Storage-in Transit - Has the carrier improperly classified or converted and storage-in-transit into long term storage?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Does the carrier use correct rates for movements into and/or out of storage-in-transit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Have shipments properly classified as storage-in-transit been charged long term storage rates?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Has the carrier provided temporary storage-in-vehicle? If yes: Are the charges within the rate band? Did the carrier obtain the shipper's authorizing signature?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Are charges for stairs, elevators, and long carry calculated within the rate band?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Are extra stop(s) charges calculated within the rate band?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Are piano/organ charges calculated within the rate band?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	
	Has the carrier charged for "Expedited Service"? If yes: Did the carrier obtain the shippers' authorizing signature?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>11</i>	<i>11</i>	

Estimates

640	Is the company aware that verbal estimates are not allowed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>7</i>	<i>—</i>	
630-690	Does the carrier issue written estimates? If yes: Are written estimates based on a written inventory (cube sheet)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Do written estimates include all required information?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Does the carrier provide written estimates without visually inspecting the goods at the origin?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Binding Estimates - Does the carrier issue binding estimates? If yes: Is required documentation attached to binding estimates? Has carrier failed to honor any binding estimates? Have any binding estimates exceeded the highest legal tariff rate?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Has the carrier issued any supplemental estimates on binding estimates? If yes: Is a signed supplemental estimate attached to the original estimate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Have all written estimates been signed by the customer?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Does the carrier retain all written estimates of moves they have conducted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>4</i>	<i>—</i>	
	Has the carrier issued any Supplemental Estimates? If yes: Do supplemental estimates show what additional services were requested by the customer that would cause the increase? Is a signed supplemental estimate attached to the original estimate?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>—</i>	<i>—</i>	
	Has the carrier refused to agree to release a shipment upon payment of 110% of a written and any supplemental estimates?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	If the goods were released upon payment of 110% of a written estimate, has the customer been allowed 30 days to pay the balance?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

	Has the carrier collected more than 25% over the written non-binding estimate (plus any supplemental estimate) for time charges on hourly moves, or collected more than 15% over the estimate for accessorial or other services?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4	—
	Has the carrier collected more than 15% over a written non-binding estimate (plus any supplemental estimate) for mileage rated moves?	<input type="checkbox"/> Yes <input type="checkbox"/> No	None yet	
	Has the carrier underestimated any shipments? If yes, How many were underestimated _____ How many total moves did company conduct _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4	—
	Does carrier understand that if they choose not to issue written estimates, they can not provide service by offering to meet or beat another company's estimate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Claims

800-870	Does the carrier maintain a Complaints and Claims Register? If yes: Does the register include all required information?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	—
	Have all complaints been recorded in the register?	<input type="checkbox"/> Yes <input type="checkbox"/> No	None yet	
	Are all complaints and claims consecutively numbered?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Have all claims for loss and damage filed within 9 months of delivery date been recorded and processed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Are all claim record documents retained for 6 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Are complaint records maintained in office for 3 years after resolution or shipment date?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Does the carrier notify the customer in writing, within 10 days, that claim or complaint was received?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Does the carrier investigate the claim quickly?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Does the carrier advise customer of resolution? Advisement is: Written <input type="checkbox"/> Verbal <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	Does the carrier pay, refuse, or offer a compromise on a claim within 120 days?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	If claim is not settled within 120 days, does carrier the continue to inform claimant every 60 days?	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	11
	If a customer is not satisfied with the carrier's resolution, is the customer referred to the Commission? Does the carrier provide the customer with the Commission's toll-free line to Consumer Affairs?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	11	11

Operations

190	Permit - Is carrier operating within the scope of the permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
300	Temporary Permit - Is carrier in compliance with conditions attached to its temporary authority?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
390	Carrier Name - Is the carrier operating under its permitted name or an approved d/b/a?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
430-450	Suspension/Cancellation - Has the carrier's permit been suspended or canceled during the time frame of this records check?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If yes: Did the carrier operate during the suspension or cancellation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Lined area for notes or comments.

If you have any questions, or would like further technical assistance, please contact:

John Macomber
Investigator

(360) 664-1236
Telephone

(360) 586-1150
FAX

I, as a representative of this company, acknowledge receipt of this records review form and understand the findings as stated herein.

X Stanley Williams
Received By

Managing Member 06/05/07
Title Date