

HOUSEHOLD GOODS CARRIER PERMIT APPLICATION



	Type of Household Goods Authority Requested – Check one	Fee Required
	Emergency temporary authority (to meet an urgent need for up to thirty days) - Complete pages 1 - 5 and Attachment E	\$50
٥	Temporary authority (to meet a short-term need) – Complete pages 1 - 5 and Attachment A	\$250
۵	Permanent authority (at least six months must be served on a temporary provisional basis) – Complete pages 1 - 5 and Attachment A	\$550
	Permanent authority to transfer or acquire control resulting in a change in ownership or controlling interest (at least six months must be served on a temporary provisional basis) – Complete pages 1 - 5 and Attachment C	\$550
Ä	Permanent authority to transfer or acquire control under the exceptions in WAC 480-15-260 – Complete pages 1 - 5 and Attachments B & C	\$250
	Reinstatement of permit (must be filed within 30 or 60 days of cancellation, depending on criteria set forth in WAC 480-15-460) – Complete pages 1 - 2 and include a statement justifying the reinstatement	\$250
۵	Name Change – Complete page 1 and Attachment D	\$35
	Extension of authority – Complete pages 1 - 5 and Attachment A	\$550

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Exp	iration	Date	:									. Amo	ount:_							
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Date	Filed	2/0	25	Ap	plication	<u> </u>	198	Мо	otcan	45	39	3	Perm	it Issı	ued: I	∃G-	HG	-11	874	0
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DUCINESS INFORMATION
Name of Applicant Dennis G. Vittovich (must be individual, partners of a partnership, or corporation)
Trade Name, if applicable Orca Moving Systems, L.L.C. Physical Address 950 Lakewood Drive SW #24-C 28499, WA
Physical Address 9501 Lakewood Drive SW #24-C 28499, WA
Mailing Address PO Box 98025 Tacoma, WA 98498-0025
Telephone Number (253) 512-0700 Fax Number (253) 512-0239
UBI # 602 266 744 Dennis@OrcaMoving.com
TYPE OF BUSINESS STRUCTURE
□ Individual □ Partnership □ Corporation
List the name, title, and percentage of partner's share or stock distribution for major stockholders:
Name Dennis G. Vitcovich Dwner/Manager 10090
Choose one of the following for the territory in which you wish to operate:
All counties in the State of Washington The following named counties only:
Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Househald boods Muning and Stevens. Our service will enhance customer choice, promote competition, or fill an unmet need for service: Househald boods Muning and Customer Stevenshow.
Briefly describe your experience in the transportation/household goods moving industry: Over 40 Ars gentlemel (2 hd generation)

Do you currently hold, o ☐ No 🍇 Yes If ye	r have you e es, please ind	ver held, a permit to operate as a motor carr licate your permit number:# <i>G-11876</i>	ier of property?
		denied a permit to operate as a motor carrie	er of property?
Do you currently operat DOT# 865704	e interstate? MC#_ 3 {	□ No 🌣 Yes If yes, please indicate y 81285 Single State Registration Bas	our: e State
Do you operate intersta name of the company?	te as an age	nt of another company?	If yes, what is the
		a business related legal proceeding against y Yes If yes, please explain:	
Have you ever been con	nvicted of a 0	Class A or B Felony? X No □ Yes If ye	s, please explain: _
Have you been cited for please explain:	· violation of s	state laws or Commission rules? 💢 No	☐ Yes If yes,
You may attach a		et, Profit and Loss Statement or business plan if	available
ASSET	S	LIABILITIES	
Cash in Bank	\$	Salaries/Wages Payable	\$
Notes Receivable	\$	Accounts Payable	\$
Accounts Receivable	\$	Notes Payable	\$
Investments	\$	Mortgages Payable	\$
Other Current Assets	\$	Other	\$
Prepaid Expenses	\$	TOTAL LIABILITIES	\$
Land and Buildings	\$	NET WORTH	
Trucks and Trailers	\$	Preferred Stock	\$
Office Furniture	\$	Common Stock	\$
Other Equipment	\$	Retained Earnings	\$
Other Assets	\$	Capital	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$

		EQUIPME	NT LIST	
Describ	be the equipment that	at will be used (attach	additional sheets if ne	cessary). Vehicles must
			al Vehicle Safety Alliar	
•	your application may		,	' '
Year	Make	License Number	Vehicle ID	Gross Vehicle Weight
		4	Number	
	1			
	THOU	NUI		
	00 11			
		SAFETY AND (OPERATIONS	
In each	of the categories show	wn below, list the persor	n and position responsibl	e for understanding and
				/ashington State Laws and
			nd publication "Your Guid	
Satisfac	ctory Safety Rating" fo			your specific operations.
		SAFETY RESP		
				e of Federal Regulations
	, ,	rates a vehicle that mee	ets the definition of a com	nmercial motor vehicle
	ve a valid CDL.			
Name:			Position: Operation	
			9, Code of Federal Reg	
		•	its and each company m	ust maintain driver
qualifica	ation files for each driv			
Name:			Position:	
			Federal Regulations Pa	
	n logs and each comp	any must maintain true a	and accurate hours of se	ervice records for each
driver.		· · · · · · · · · · · · · · · · · · ·		
	Same		Position:	
			STING (Title 49, Code o	
			rcial motor vehicle requi	
		ohol Testing program th	nat complies with the FM	CSR in 49 CFR Part 382
	CFR Part 40.			
Name:			Position:	
Each co	ompany will have in pla	ace a system for comply	ing with FMCSR governi	ng alcohol and controlled
substan	ices testing requireme	nt (49 CFR Part 382 and	d 49 CFR Part 40)	
VEHICL	LE INSPECTION, REP	PAIR, AND MAINTENAN	ICE (Title 49, Code of F	ederal Regulations Part
396) Co	mpanies must ensure	that each motor vehicle	e operated is regularly ins	spected, repaired, and
maintaiı	ned.			
Name:	same		Position:	
INSURA	NNCE REQUIREMENT	TS (WAC 480-15-530) A	All companies must file a	nd maintain proof of public
liability a	and property damage i	insurance covering vehi	cles operated. (\$300,00	0 minimum coverage for
vehicles	s under 10,000 pounds	GVWR and \$750,000 i	minimum coverage for ve	ehicles 10,000 pounds
	or more)			
Name:	Same		Position:	
	<u> </u>	IREMENTS (WAC 480-	15-550) All companies m	ust maintain cargo
				eles under 10,000 pounds
	• • •	les 10,000 pounds GVV	•	
	same		Position:	

OPERATIONAL RESPONSIBILITIES

ANNUAL REPORTS and REGULATORY FEES (WAC 480-15-480) Companies must annually file a report of their financial operations and pay regulatory fees.

Name Dennis G. Vitcovich

Position: Owner/Manager

STATE OF WASHINGTON - general laws, rules and regulations: Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the state of Washington, such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.

Name: Dennis

Position: ()\Nne

DECLARATION OF APPLICANT:

I understand that filing this application does not in itself constitute authority to operate as a household goods mover.

As the applicant for a household goods permit, I understand the responsibilities of a motor carrier, and I am in compliance with all local, state, and federal regulations governing businesses, including household goods movers, in the state of Washington.

I understand that if the Commission grants my application as a new entrant I will be granted temporary authority to provide service as a household goods carrier on a provisional basis for at least six months. During this time, the Commission will evaluate whether I have met the criteria in WAC 480-15-330 to obtain permanent authority. I also understand that I must comply with all conditions placed on my temporary permit and that failure to do so will result in cancellation of my permit.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Print name of applicant

Signature of Applicant

Date & Place

ATTACHMENT B

Transfer or Acquisition of Control

Applicant is seeking one of the following - please check Transfer Acquisition of Control	one:
Dennis G. Vitovich	
Ourrent Name on Permit (Seller) Dennis G. Vitcovich d.b.a. Orca M	ovina Systems
Current Trade Name on Permit (Seller) 9 PO Box 98025, Tacoma WA 98	498-0025
Address (Seller) HG- 11 9.7 6	253-512-0700
Permit Number	Phone Number (Seller)
Does the transfer of this permit fall under the provisions yes, please complete Attachment C.	of WAC 480-15-260? □ No XYes If
Have all fines and/or penalties been paid? □ No	
Has the closing annual report been filed with the Comm	ission? No Yes Not applicab Same tax id. #
A customer may file a loss or damage claim for up to nin years for a lawsuit. Who will be responsible for handling damage that occurred on moves taking place prior to the	ne months following a move, and up to two g claims filed by customers for loss and/or
RELEASE OF AUT	THORITY
I, the seller, have sold or otherwise released interest in HG- <u>II976</u> to the following:	my household goods permit number
Orca Moving Systems, L.L.C.	
Name of Buyer Orca Moving Systems	
Trade Name of Buyer	
We as applicants, hereby jointly declare and affirm	that all information is true to the best of
our knowledge.	7/1/03 Lakewood, WA Date & Location 1/1/03 Lakewood, WA
Buyer's Signature	1/1/03 Lake Wood, WA Date & Location

ATTACHMENT C

TRANSFER OR ACQUISITION OF PERMANENT HOUSEHOLD GOODS AUTHORITY UNDER EXCEPTIONS IN WAC 480-15-260

1.	fit,	e Commission will grant an application for permanent authority without public notice or comment if the appl willing, and able to provide service and the application is filed to transfer or acquire control of permanent at one of the following reasons (check one, if applicable):	icant is uthority
		A partnership has dissolved due to the death, bankruptcy, or withdrawal of a partner, and that partner's int being transferred to one or more of the remaining partners or a spouse;	erest is
\		A shareholder in a corporation has died and that shareholder's interest is being transferred to a surviving or one or more surviving shareholders;	spouse
	_ Х	A sole proprietor has died and the interest is being transferred as property of the estate; **Corganization** and LLC.** An individual has ***recorporated** and the same individual remains the majority shareholder;	
•	_	An individual has added a partner, but the same individual remains the majority partner;	
		A corporation has dissolved and the interest is being transferred to the majority shareholder;	\
		A partnership has dissolved and the interest is being transferred to the majority partner;	
		A partnership has incorporated and the partners are the majority shareholders; or	
		Ownership is being transferred from one corporation to another corporation when both are wholly owned became shareholders.	y the
resc	lutic	E***Documentation must be included with your application. Documentation may be in the form of a corporation, partnership agreement, court order, death certificate, will or other proof of right to inherit, estate executors and community property agreement or other such documentation that may support your request.	
2.	pul	e Commission will grant an application for permanent authority without temporary permit operations following blic notice or comment if the applicant is fit, willing, and able to provide service and the application is filed to nsfer or acquire control of permanent authority for the following reason (check box, if applicable):	
	X	Ownership or control of a permit is being transferred to any shareholder, partner, family member, employed other person familiar with the company's operations and the household goods moving services provided, check this option, please complete the following:	
		a. Has the permit been actively used by the current owner to provide household goods moving servic during the last twelve-month period?	es
		b. Explain why the transfer of ownership or control is necessary to ensure the company's economic value of the sole owner.	iability:
		c. Describe the steps taken by the applicant and the current owner to ensure that safe operations and continuity of service to the customers are maintained:	

2:49 PM 07/01/03 Cash Basis

Orca Moving Systems Profit & Loss

January 1 through June 1, 2003

	Jan 1 - Jun 1, 03
Ordinary Income/Expense	
Income	
Finance Charges	-39.08
Booking Commission	9,414.98
Commission Packing	10,130.55
Destination Services	125,938.69
Drayage Services	73,514.71
Labor Services	4,142.51 14,281.39
Misc. Services	•
Origin Services	111,772.36
Port Services	103,046.44 87,608.27
Storage Services	- • • • • • • •
Uncategorized Income	424.49
Total Income	540,235.31
Cost of Goods Sold	
Claims Expense	9,970.19
Warehouse Supplies	1,278.56
Travel	872.56
Direct Labor-ER Burdon	
Direct Labor-SS/Med _ER Paid	8,547.77
Direct Labor-L&I ER Paid	19,894.39
Direct Labor-IRA- ER Match	1,257.00
Direct Labor-Insurance-ER Paid	8,630.77
Direct Labor-FUTA Paid	543.02
Direct Labor-SUTA Paid	2,977.05
Total Direct Labor-ER Burdon	41,850.00
Direct Labor	
Direct Labor-L&I-EE Paid	2,891.48
Direct Labor-SS/Med-EE Paid	8,547.77
Direct Labor-Fed WT	14,327.29
Direct Labor-IRA-EE portion	1,425.00
Direct Labor-Insurance-EE Paid	4,601.80
DNet-Direct Labor	91,638.04
Total Direct Labor	123,431.38
Lumpers-Casual Labor Cost of Goods Sold Truck Rental	19,267.78
Fleet Trailers	5,587.95
Hyster Fork Lift Rental	1.654.56
Penske Truck Rental	7,771.90
Ryder Trucks	37,430.92
Total Truck Rental	52,445.33
Packing Material	16,083.53 5,920.46
Outside Services	5,920.46 18,599.49
Fuel	1,058.27
Claims DOT- Licenses-Permits	221.44
Total Cost of Goods Sold	94,328.52
Total COGS	290,998.99
Gross Profit	249,236.32

2:49 PM 07/01/03 Cash Basis

Orca Moving Systems Profit & Loss

January 1 through June 1, 2003

	Jan 1 - Jun 1, 03
Expense	
Late Fees	981.03
Gifts-Customers	119.64
Building Maintenance	380.80
Advertising	782.32
Factoring Expense	9,550.75
Drug Testing-WTA	234.50
Bank Service Charges	1,270.71
CAR/TRUCK Maintenance	245.26
Cash Discounts	5,462.78
CLAIMS	1,987.23
Depreciation Expense Vehicle	216.52
Total Depreciation Expense	216.52
Dues and Subscriptions Employee Benefits	467.40
Tuition Reimbursement	4,623.00
Total Employee Benefits	4,623.00
Insurance Vehicle Insurance	470.96
Health Insurance	4,052.23
Commercial Insurance	16,258.16
Life Insurance	2,730.50
Total Insurance	23,511.85
Interest Expense	2,225.98
Licenses and Permits	1,043.36
Office Supplies	2,883.60
Payroll Expenses	,
ER Labor Burdon-G&A	
G&A-L&I ER Paid	1,022.27
G&A-IRA-ER Paid	2,698.50
G&A SUTA-Paid	1,533.65
G&A FUTA-Paid	279.73
Payroll Service Charge-ADP	522.10
G&A SS/Med ER Paid	7,066.35
G&A Ins.Bene-ER Paid	8,630.77 21,753.37
Total ER Labor Burdon-G&A Mgr Salaries	21,755.57
MNet-Mgr. Wages-Net Pay	56,586.63
Mgr. L&I- EE Paid	143.76
Mgr. IRA-EE portion	7,133.30
Mgr-Insurance-EE Paid	3,512.26
Mgr-SS/Med EE Paid	5,746.76
Mgr- Fed WT	10,207.81
Total Mgr Salaries	83,330.52
Admin Salaries	40.705.07
ANet-Admin Wages-Net Pay	12,705.67
Admin-L&I-EE Paid	81.27
Admin- IRA-EE portion	500.00
Admin-Insurance-EE Paid Admin-SS/Med-EE Paid	2,985.40 1,319.59
Admin-55/Med-EE Paid Admin Fed WT	1,232.92
• • • • • • • • • • • • • • • • • • • •	
Total Admin Salaries	18,824.85
Total Payroll Expenses	123,908.74
Postage and Delivery	1,652.77

^{2:49} PM 07/01/03 Cash Basis

Orca Moving Systems Profit & Loss

January 1 through June 1, 2003

	Jan 1 - Jun 1, 03
Professional Fees	
Web Hosting	26.80
Legal Fees	42.00
Total Professional Fees	68.80
Rent	
Box Storage Space	2,003.25
Trailer Parking	615.00
Copier Operating Lease	1,726.30
Credit Card Machine Rental	434.65
E.B. Bradley- Building Rent	42,896.04
Misc Equipment Rental	107.92
Pitney Bowes Machine Rental	135.16
Total Rent	47,918.32
SERVICES	
Fire Alarm Testing	182.00
Total SERVICES	182.00
TAXES	
Tacoma B&O Tax	42.30
B&O Dept of Revenue WA State	3,434.99
Total TAXES	3,477.29
Telephone	
Eschelon Telecom Inc	2,233.34
Qwest	653.13
Verizon Wireless	1,966.55
Telephone - Other	222.53
Total Telephone	5,075.55
Travel & Ent- DENNIS	
Air Fare	547.00
CAR RENTAL	272.61
Entertainment	1,198.99
Meals	408.93
Total Travel & Ent- DENNIS	2,427.53
Uncategorized Expenses	1,802.40
Utilities	1,151.17
Light and Power	360.93
Gas and Electric	2,074.43
Waste Management Expense	
Total Utilities	3,586.53
Total Expense	246,086.66
Net Ordinary Income	3,149.66
Other Income/Expense	
Other Income Interest Income	0.68
Total Other Income	0.68
	0.68
Net Other Income	
Net Income	3,150.34

7/1/2003

ORCA MOVING SYSTEMS FLEET LIST

	Unit#	Year	Make	Size	NIA	Description	ВіІІ Туре	Bill Type Rep. Value
_	583438	1998	Freightliner	2-axle	1FUYDCYB3WP934936	CLASS A	LT-Lease	
2	263714	1999	Freightliner	24-ft	1FVABSAK01HH65441	CLASS C, STRAIGHT RENT	RENT	
ω	370653	2000	International	1-axle	2HSCAAHN7YC063267	CLASS A,	LT-Lease	:
4	302873	1998	International	26-ft	1HTSDAAN3WH570441	CLASS B, STRAIGHT LT-Lease	LT-Lease	
5 1	5614123	1999	Freightliner	24-ft	1FVGHLBC5XHA11252	CLASS C, STRAIGHT RENT	RENT	
6	320002	1999	Utility Trailer	53- FT	1JJV32W2XF531239	ROLL DOOR	LEASE	
7	810054	2000	Utility Trailer	48-FT	1ALSR0281PS931301	SWING DOOR	LEASE	





Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF FORMATION

to

ORCA MOVING SYSTEMS, L.L.C.

A Washington Limited Liability Company. An application was filed for record in this office on the date indicated below

UBI Number: 602 266 744

Date: January 27, 2003



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed

Secretary of State