



HOUSEHOLD GOODS CARRIER PERMIT APPLICATION



Type of Household Goods Authority Requested – Check one	Fee Required
<input type="checkbox"/> Emergency temporary authority (to meet an urgent need for up to thirty days) - Complete pages 1 - 5 and Attachment E	\$ 50
<input type="checkbox"/> Temporary authority (to meet a short-term need) – Complete pages 1 - 5 and Attachment A	\$ 250
<input type="checkbox"/> Permanent authority (at least six months must be served on a temporary provisional basis) – Complete pages 1 - 5 and Attachment A	\$ 550
<input type="checkbox"/> 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 B	\$ 550
<input checked="" type="checkbox"/> Permanent authority to transfer or acquire control under the exceptions in WAC 480-15-260 – Complete pages 1 - 5 and Attachments B & C	\$ 250
<input type="checkbox"/> 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
<input type="checkbox"/> Name Change – Complete page 1 and Attachment D	\$ 35
<input type="checkbox"/> Extension of authority – Complete pages 1 - 5 and Attachment A	\$ 550

TYPE OF PAYMENT

Check
 Money Order
 Amex
 Discover
 Mastercard
 Visa

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Expiration Date: _____ Amount: _____

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Name (printed): _____ Date: _____

Signature: _____ Title: _____

FOR OFFICIAL USE ONLY			
Date Filed: 9/3/03	Application #: P-79215	Motcar: 41755	Permit Issued: HG-60590
Staff Assigned: [Signature]	Insurance: [Signature]	Inspection: on file	DOL/SOS: [Signature]
Reception #: 111-0268-207-02 250.00	111-0268-202-01	111-0268-013-20	

Pacific Northwest Moving & Storage PAGE 1

TV-031414

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BUSINESS INFORMATION

Name of Applicant Diana Paula Campbell
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable Pacific Northwest Moving and Storage Company, Inc

Physical Address 0320 SW Montgomery #427 Portland, OR. 97201

Mailing Address same

Telephone Number (503) 201-4179 Fax Number (503) 205-4268

UBI # 602-297-592 Email: dianacret@msn.com
602-181-804 ok see attachment

TYPE OF BUSINESS STRUCTURE

- Individual
- Partnership
- Corporation
- Other _____
(LP, LLP, LLC)

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

Name	Title	Stock Distribution or Percentage of Shares
<u>Diana Campbell</u>	<u>President</u>	<u>51 shares</u>
<u>Roger Campbell</u>	<u>Vice-President</u>	<u>49 shares</u>

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: provide quality residential moving services at a competitive rate. Fully insured with total replacement cost to customer.

Briefly describe your experience in the transportation/household goods moving industry:

Running Pacific Northwest Moving for the past year.

Do you currently hold, or have you ever held, a permit to operate as a motor carrier of property?

No Yes If yes, please indicate your permit number: HG # 60590

Have you ever applied for and been denied a permit to operate as a motor carrier of property?

No Yes If yes, please explain: _____

Do you currently operate interstate? No Yes If yes, please indicate your:

DOT# 1031849 MC# 434102 Single State Registration Base State Wa

** under individual name*

Do you operate interstate as an agent of another company? No Yes If yes, what is the name of the company? _____

Do you have, or have you ever had a business related legal proceeding against you in Washington, or in any other state? No Yes If yes, please explain: _____

Have you ever been convicted of a Class A or B Felony? No Yes If yes, please explain: _____

Have you been cited for violation of state laws or Commission rules? No Yes If yes, please explain: _____

FINANCIAL STATEMENT

You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available

ASSETS		LIABILITIES	
Cash in Bank	\$ <u>4000</u>	Salaries/Wages Payable	\$ <u>20,000</u>
Notes Receivable	\$ <u>0</u>	Accounts Payable	\$ <u>0</u>
Accounts Receivable	\$ <u>0</u>	Notes Payable	\$ <u>0</u>
Investments	\$ <u>0</u>	Mortgages Payable	\$ <u>0</u>
Other Current Assets	\$ <u>10,000</u>	Other	\$ <u>0</u>
Prepaid Expenses	\$ <u>0</u>	TOTAL LIABILITIES	\$ <u>0</u>
Land and Buildings	\$ <u>0</u>	NET WORTH	
Trucks and Trailers	\$ <u>30,000</u>	Preferred Stock	\$ <u>0</u>
Office Furniture	\$ <u>5,000</u>	Common Stock	\$ <u>0</u>
Other Equipment	\$ <u>6,000</u>	Retained Earnings	\$ <u>0</u>
Other Assets	\$ <u>2,000</u>	Capital	\$ <u>4,000</u>
TOTAL ASSETS	\$ <u>63,000</u>	TOTAL LIABILITIES & NET WORTH	\$ <u>24,000</u>

EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheets if necessary). Vehicles must pass inspection and be issued a valid Commercial Vehicle Safety Alliance inspection decal before your application may be granted.

Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight
1982	INTL VA	EH1742		
1992	INTL TR	T530230	IHTAA17B4CHB1721	(26,000)
			IHTSCALM1WH399590	(26,000)
1996	GMC TR VA	T488080 XUN241	16DRG3143TF502051	(14,000)
1986	GMC TR	T488080	16DG7D1BX6V517350	(26,000)

SAFETY AND OPERATIONS

In each of the categories shown below, list the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State Laws and rules. Please refer to the WAC rules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVERS LICENSE (CDL) REQUIREMENTS (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle must have a valid CDL.

Name: Diana Campbell Position: President

DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: Diana Campbell Position: President

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: Diana Campbell Position: President

CONTROLLED SUBSTANCES AND ALCOHOL TESTING (Title 49, Code of Federal Regulations Part 382 & Part 40) Any person who drives a commercial motor vehicle requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Name: Diana Campbell Position: President

Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirement (49 CFR Part 382 and 49 CFR Part 40)

VEHICLE INSPECTION, REPAIR, AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Companies must ensure that each motor vehicle operated is regularly inspected, repaired, and maintained.

Name: Roger Campbell Position: Vice - President

INSURANCE REQUIREMENTS (WAC 480-15-530) All companies must file and maintain proof of public liability and property damage insurance covering vehicles operated. (\$300,000 minimum coverage for vehicles under 10,000 pounds GVWR and \$750,000 minimum coverage for vehicles 10,000 pounds GVWR or more)

Name: Diana Campbell Position: President

CARGO INSURANCE REQUIREMENTS (WAC 480-15-550) All companies must maintain cargo insurance coverage. (\$10,000 for household goods transported in motor vehicles under 10,000 pounds GVWR and \$20,000 for vehicles 10,000 pounds GVWR or more)

Name: Diana Campbell Position: President

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: Diana Campbell Position: President

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: Diana Campbell Position: President

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.

Diana Campbell
Print name of applicant

Diana Campbell
Signature of Applicant

8-24-03
Date & Place

ATTACHMENT B

Transfer or Acquisition of Control

Applicant is seeking one of the following - please check one:

Transfer Acquisition of Control

Diana Paula Campbell
 Current Name on Permit (Seller)

Pacific Northwest Moving + Storage Company
 Current Trade Name on Permit (Seller)

0320 SW Montgomery # 427 Portland OR 97201
 Address (Seller)

HG- 60590 503-201-4179
 Permit Number Phone Number (Seller)

Does the transfer of this permit fall under the provisions of WAC 480-15-260? No Yes If yes, please complete Attachment C.

Have all fines and/or penalties been paid? No Yes

Has the closing annual report been filed with the Commission? No Yes

A customer may file a loss or damage claim for up to nine months following a move, and up to two years for a lawsuit. Who will be responsible for handling claims filed by customers for loss and/or damage that occurred on moves taking place prior to the sale and transfer or acquisition?

RELEASE OF AUTHORITY

I, the seller, have sold or otherwise released interest in my household goods permit number HG-60590 to the following:

Diana Paula Campbell
 Name of Buyer

Pacific Northwest Moving and Storage Storage Company, Inc
 Trade Name of Buyer

We, as applicants, hereby jointly declare and affirm that all information is true to the best of our knowledge.

Diana Campbell
 Seller's Signature

8-22-03
 Date & Location

Diana Campbell
 Buyer's Signature

8-22-03
 Date & Location

ATTACHMENT C

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

1. The Commission will grant an application for permanent authority without public notice or comment if the applicant is fit, willing, and able to provide service and the application is filed to transfer or acquire control of permanent authority for one of the following reasons (check one, if applicable):
- A partnership has dissolved due to the death, bankruptcy, or withdrawal of a partner, and that partner's interest is being transferred to one or more of the remaining partners or a spouse;
 - A shareholder in a corporation has died and that shareholder's interest is being transferred to a surviving spouse or one or more surviving shareholders;
 - A sole proprietor has died and the interest is being transferred as property of the estate;
 - An individual has incorporated, 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 by the same shareholders.

NOTE Documentation must be included with your application. Documentation may be in the form of a corporate resolution, partnership agreement, court order, death certificate, will or other proof of right to inherit, estate executor's statement, community property agreement or other such documentation that may support your request.

2. The Commission will grant an application for permanent authority without temporary permit operations following public notice or comment if the applicant is fit, willing, and able to provide service and the application is filed to transfer or acquire control of permanent authority for the following reason (check box, if applicable):
- Ownership or control of a permit is being transferred to any shareholder, partner, family member, employee, or other person familiar with the company's operations and the household goods moving services provided. If you check this option, please complete the following:
 - a. Has the permit been actively used by the current owner to provide household goods moving services during the last twelve-month period? No Yes
 - b. Explain why the transfer of ownership or control is necessary to ensure the company's economic viability:

 - 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: _____

RECEIVED

SEP 02 2003

WASH. UT. & TP. COMM.

SPECIAL MEETING OF THE SHAREHOLDERS

OF

PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.

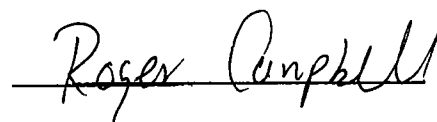
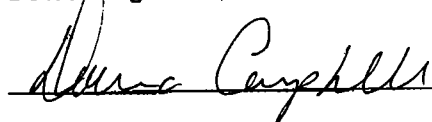
Pursuant to a call by Diana Paula Campbell, President of Corporation and in accordance with the provisions of the Bylaws of Pacific Northwest Moving & Storage Company, Inc., a special meeting of the shareholders of Pacific Northwest Moving & Storage Company, Inc., was held on August 19, 2003 for the sole purpose of correcting an error in the issuance of the shares of stock in the company. Diana Paula Campbell, Roger J. S. Campbell and the attorney for the corporation, Daryl M. Pulley were present.

After discussion among those present, it was determined that an error was made in the initial Consent to Corporate Action by Shareholders of the company and specifically in the last paragraph concerning the issuance of stock. It was confirmed by both shareholders that it was the intent of the shareholders that Diana Paula Campbell receive 51 shares of the company in exchange for five hundred and ten dollars and Roger J. S. Campbell receive 49 shares of the company in exchange for four hundred and ninety dollars.

Now therefore, it was resolved to correct the corporate records to reflect that Diana Paula Campbell agreed to purchase 51 shares of stock for the price per share stated in the Amended Subscription Agreement (\$10.00 per share) and upon the payment of the subscription price in full and the return of the Subscription Agreement and share of stock that were issued in error, the appropriate officer of the corporation is hereby authorized to issue and deliver a corrected certificate for 51 shares of the corporation in the name of Diana Paula Campbell, which stock is fully paid and nonassessible.

Now therefore, it was resolved to correct the corporate records to reflect that Roger J. S. Campbell agreed to purchase 49 shares of stock for the price per share stated in the Amended Subscription Agreement (\$10.00 per share) and upon the payment of the subscription price in full and the return of the Subscription Agreement and shares of stock that were issued in error, the appropriate officer of the corporation is hereby authorized to issue and deliver a corrected certificate for 49 shares of the corporation in the name of Roger J. S. Campbell, which stock is fully paid and nonassessible.

Dated: August 19, 2003



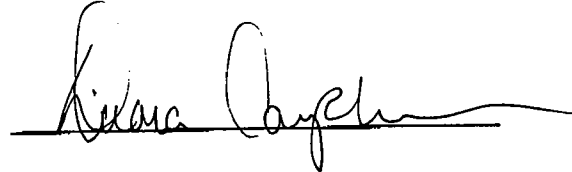
AMENDED SUBSCRIPTION AGREEMENT
PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.

Roger J. S. Campbell hereby subscribes to forty nine shares of common stock of the above Corporation and transfer to the Corporation in exchange for four hundred ninety and 00/100 dollars.



AMENDED SUBSCRIPTION AGREEMENT
PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.

Diana Paula Campbell hereby subscribes to fifty one shares of common stock of the above Corporation and transfer to the Corporation in exchange for five hundred ten and 00/100 dollars.



A handwritten signature in black ink, appearing to read "Diana Campbell", is written over a solid horizontal line.

UBI Number: 602 297 592

PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.

Your Initial Annual Report is due on September 18, 2003.

Keep this sheet as a reminder of the due date for filing your initial annual report.

Please see the enclosed letter for more information.

PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.
c/o RON GOLDEN
8221 NE HAZEL DELL AVE
VANCOUVER WA 98665

DR02085

Pacific Northwest Moving & Storage Company, INC.
0320 SW Montgomery #427
Portland, Oregon 97201
Phone: 503-201-4179
Fax: 503-205-4268

Send to: WUTC/Licensing	From: Diana Campbell
Attention: Tina Leipski	Date: 9-9-03
Office location:	Office location:
Fax number: 360-586-1118	Phone number: 503-201-4179

Urgent Reply ASAP Please comment Please review For your information

Total pages, including cover: 3

Comments:

The new UBI number requested; I will check back with you on the new MC# when I find out. Thank you . Diana Campbell



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Corporations

Corporations Division - Registration Data Search

PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.

UBI Number 602 297 592
Category Regular Corporation
Profit/Nonprofit Profit
Active/Inactive Active
State of Incorporation WA
Date of Incorporation 05/21/2003
License Expiration Date 05/31/2004

Registered Agent Information

Agent Name RON GOLDEN
Address 8221 NE HAZEL DELL AVE
City VANCOUVER
State WA
ZIP 98665

Special Address Information

Address
City
State
Zip

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Disclaimer

Information in the Secretary of State's Online Corporations Database is updated Monday through Friday by 5:00 a.m. Pacific Standard Time (state holidays excluded). Neither the State of Washington nor any agency, officer, or employee of the State of Washington warrants the accuracy, reliability, or timeliness of any information in the Public Access System and is not liable for any losses caused by such reliance on the accuracy, reliability, or timeliness of such information. While every effort is made to ensure the accuracy of this information, portions may be incorrect or not current. Any person or entity who relies on information obtained from the System does so at his or her own risk.

FROM: Washington Utilities and Transportation Commission
Transportation Operations
PO Box 47250 Phone: (360) 664-1222
Olympia, WA 98504-7250 Fax: (360) 586-1118

Date: 09-04-2003 Staff: Tina Leipski

TO: P079215
PACIFIC NORTHWEST MOVING & STORAGE COMPANY, INC.
0320 SW MONTGOMERY #427
PORTLAND, OR 97201

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

X According to the Department of Licensing, the UBI number you listed (602-181-804) is still under a Sole Proprietor. This needs to be updated to reflect your Corporation. Also noted, your federal authority (MC# 434102) is still registered under Diana Campbell and not under your corporation. Please let me know when you have corrected these issues so we can continue to process your application. Any questions, give me a call at (360) 664-1170. Thanks! Tina