

# HOUSEHOLD GOODS CARRIER APPLICATION

**PERMIT** 



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

	TYPE OF PAYMEN	<u> </u>	
Check Money Order	Amex Discover	Mastercard	Visa
· · · · · · · · · · · · · · · · · · ·			
Expiration Date: 04/05	<i>F</i>	Amount: <u>250.00</u>	auth*
CERTIFICATION: I, the undersigned, under pash and correct, that I am authorized to execute a on file is current and valid.			
Name (printed): Louis W Fau	wce Ja	Date: 12-4-03	
Signature:		Title: PRESideNT	
FO	R OFFICIAL USE O	NLY	A TO CONTRACTOR
Date Filed 22 03 Application # 245	Motcar: 42100	Permit Issued: HG-	<i>658</i>
Staff Assigned: Insurance:	Inspection:	DOL/SOS:	
Reception #) 111-0268-207-02 350.00 111-	0268-202-01	111-0268-013-20	

0004616

PAGE 1

TVI-032112

BUSINESS INFORMATION
Name of Applicant BFL TRANSFER TWC.  (must be individual, partners of a partnership, or corporation)
Trade Name, if applicable DBA Bother TRANSFER
Physical Address 17624 15Th AVE SE #101-B
Mailing Address <u>BoTHを11</u> , いA、980/2
Telephone Number (425) 482-1777 Fax Number (425) 398-5703
UBI#602-349-447 Email: Lou Faun @ 401. Com
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  Louis FAUNCE TR PRES /0090
V
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: Quality moving of - House Hold Goods. By Providing Sulerion customer Service
CONSUMERS Would RECONIZE THE ATTENTIVE AND CARNO -
Briefly describe your experience in the transportation/household goods moving industry:  I HAVE HEID SEVERAL UNIQUE POSTIONS IN THE LAST ALL VERRS OF MOUSEL CONCEING ALL RESPECTS OF THIS INCLUSTED, LOOKING FORWARD TO LEARNING MORE.

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 11858
Have you ever applied for and been denied a permit to operate as a motor carrier of property?  Yes If yes, please explain:
Do you currently operate interstate? No Yes If yes, please indicate your:  DOT# MC# Single State Registration Base State
Do you operate interstate as an agent of another company? No Yes If yes, what is the name of the company? <u>CARにいた いみん たらみと</u>
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 OF 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	<b>I</b>
Trucks and Trailers	\$	Preferred Stock	\$
Office Furniture	\$	Common Stock	\$
Other Equipment	\$	Retained Earnings	\$
Other Assets	\$	Capital	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$

12/18/03 Cash Basis 8:06 AM

# Bothell Transfer & Storage, Inc. Profit & Loss January 1 through December 18, 2003

c	1
č	٩
-	۰
	4
α	3
۵	
200	1
- 2	i
Ų	μ
_	۹
	4
τ	
τ	
7	

4025 Miscellaneous Fees 4015 Fuel Surcharge 4090 • Customer Insurance 4090 • Customer Insurance 4010 • Commissions 4020 • Services - In State 4030 • Moving-Un State 4040 • Moving-Un State 4040 • Moving-Un State 4060 • Truck Rental 4070 • Storage Fees 4075 • Retail Sales 4082 • Tips 4000 • Sales - Other  Total 4000 • Sales  Cost of Goods Sold 5035 • Uniforms 5019 • Customer Repairs 5013 • Equipment Rental 5014 • Truck Rentals 5015 • Supplies 5017 • Subcontracting 5018 • Commissions 5020 • Payroll • Crew 5021 • Misc. Expenses 5032 • Weights/Ferry/Parking Fees	2,765.71 4,992.07 -270.83 268,906.86 195,376.79 17,422.98 17,422.98 17,581.10 7,428.32 -58.00 2,270.74 516,886.33 516,886.33 516,886.33 10,991.56 3,898.63 10,991.56 3,080.35 3,080.35 3,080.35 2,478.81 12,824.38 16,482.99 2,397.18
5033 · Storage 5043 · Storage 5040 · Claims 5000 · Claims	2,945.42 2,410.61
5000 · Cost of Goods Sold - Other  Total 5000 · Cost of Goods Sold	291.41 274,646.60
Total COGS	274,646.60

12/18/03 Cash Basis 8:06 AM

# Bothell Transfer & Storage, Inc. Profit & Loss January 1 through December 18, 2003

Jan 1 - Dec 18, 03

242,239.73	1,413 4,440 911	se 6,765.00 598.24 1,472.19 1,275.00 3,096.78 3,469.00 3,469.00 183.50 22,340.83	25,993.33 1,871.28 0.00 1,871.28	4,837.	5,878.25
	pense Bad Debt 6110 - Automobile Expense 6112 - Insurance 6113 - Maint. & Repr 6114 - Taxes/License	Total 6110 - Automobile Expense 6120 - Bank Service Charges 6130 - Credit Card Fee 6160 - Dues and Subscriptions 6170 - Office Equip-Rental 6175 - Office Equipment (-250.00) 6180 - Insurance 6570 - Medical Expenses 6180 - Insurance 6180 - Insurance 6180 - Insurance	Total 6180 · Insurance 6200 · Interest Expense 6210 · Finance/Late Charges 6220 · Loan Interest Total 6200 · Interest Expense	6230 · Licenses and Permits 6235 · Advertising 6240 · Miscellaneous 6250 · Postage and Delivery 6260 · Printing and Reproduction 6270 · Professional Fees 6280 · Legal Fees 6650 · Accounting	Total 6270 · Professional Fees 6284 · Casual Labor 6285 · P/R Proc. Fee

8:06 AM 12/18/03 Cash Basis

Bothell Transfer & Storage, Inc. Profit & Loss January 1 through December 18, 2003

Jan 1 - Dec 18, 03	

6300 · Repairs/Maintenance 6330 · Equipment Repairs 6300 · Repairs/Maintenance - Other	136.13 8,879.26
Total 6300 · Repairs/Maintenance	9,015.39
6340 · Telephone 6350 · Travel/Entert-/Meetings	9,088.26
6360 · Entertainment 6370 · Meals	120.00
6380 - Loading/Travel 6350 - Travel/Entert Mostings Other	293.02
Total 6350 · Travel/Entert./Meetings	3,619.98
6390 · Utilities 6400 · Gas and Electric 6420 · Waste Disposal 6390 · Hilities - Other	1,155.48 1,502.75 60.11
Total 6390 · Utilities	2,718.34
6550 · Office Supplies	3,041.60
6820 Tableshor	00.20
6820 · Taxes - Other	1,790.40 88,863.37
Total 6820 · Taxes	90,653.77
7110 · Uncollected NSF 9020 · Unallocated	422.66 256 10
Total Expense	212,733.21
Net Ordinary Income	29,506.52
Net Income	29,506.52

# 12/18/03 Cash Basis 8:21 AM

# Bothell Transfer & Storage, Inc. Balance Sheet As of December 18, 2003

Dec 18, 03

140.67 241.54 1.16 -3,924.29 621.45	-2,919.47	4,070.99	1,000.00 4,461.79 1,319.77 1,250.00	8,031.56	1,041.10	-29,093.00 8,432.87 5,641.97 520.00 2,622.23 21,818.25 12,375.00 9,040.29 26,607.00 35,647.29	10,477.38
ASSETS Current Assets Checking/Savings 1012 · Washington Mutual 1015 · Cking/Bank of America 1020 · Sav/Bk of America 1020 · Sav/Bk of America	Total Checking/Savings Accounts Receivable 1200 - Accounts Receivable	Total Accounts Receivable	Other Current Assets 1313 · Due from John McCartney 1600 · Inventory 1710 · Refundable Deposits 1810 · Prepaid Expenses	Total Other Current Assets	Total Current Assets	Fixed Assets 2530 · Fixed Assets 2530 · Accumulated Depreciation 2511 · Computers · New 2510 · Office Equip./Furniture 2512 · Software (over 250.00) 2515 · Tools/Equip. 2520 · Truck Fleet 2524 · '94 GMC #316 2528 · '96 Intern'! #404 2529 · Lift for Truck 404/Watco 2528 · '96 Intern'! #404 - Other Total 2528 · '96 Intern'! #404	2520 · Truck Fleet - Other

## 8:21 AM 12/18/03 Cash Basis

# Bothell Transfer & Storage, Inc. Balance Sheet As of December 18, 2003

	Dec 18, 03
Total 2520 · Truck Fleet	80,317.92
Total 2500 · Fixed Assets	68,441.99
Total Fixed Assets	68,441.99
Other Assets 2550 · Intangible Assets 2551 · Accum. Amortization 2550 · Intangible Assets - Other	-309.00
Total 2550 · Intangible Assets	221.00
Total Other Assets	221.00
TOTAL ASSETS	69,704.09
LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable 2000 · Accounts Payable	41,508.12
Total Accounts Payable	41,508.12
Credit Cards 2020 • MasterCard BofA 3937 2021 • Advanta 2024 • Shell 2026 • Visa BofA 1166	3,555.92 5,939.70 -544.86 4,557.86
Total Credit Cards	13,508.62
Other Current Liabilities 2104 · Dell Financial 2010 · Seafirst LOC 2050 · Net P/R Liability 2055 · P/R Taxes	4,162.31 9,900.00 15,727.84
2056 · F/W,FICA 2057 · FUTA 2058 · SUR/SUI	-3,521.31 180.10 292.39
2059 · L&I	-1,766.93

## 8:21 AM 12/18/03 Cash Basis

# Bothell Transfer & Storage, Inc. Balance Sheet As of December 18, 2003

Dec 18, 03	-4,815.75	-158.32 -28.928.77 7,800.00 25,970.39 2,226.67	31,884.37	86,901.11	-1,948.10 934.84 10,181.14 -31.56	9,136.32	96,037.43	89.83	89.83	-55,929.69 29,506.52	-26,333.34	69,704.09
	Total 2055 · P/R Taxes	2060 · Employee Garnishment 2100 · Payroll Liabilities 2106 · T.Paul Ioan to BTI 2107 · L.Faunce Ioan to BTI 2200 · Sales Tax Payable	Total Other Current Liabilities	Total Current Liabilities	Long Term Liabilities 2115 · Ln 1 The Associate Comm. 2120 · LN 2 The Associates Comm. 2125 · Ln 3 The Associates Comm. 2130 · LN 4 The Associates Comm	Total Long Term Liabilities	Total Liabilities	Equity 3000 · Equity 3020 · Faunce Owner Equity	Total 3000 · Equity	3500 · Retained Earnings Net Income	Total Equity	TOTAL LIABILITIES & EQUITY

### **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
94	Ford E-350	425432F	VFOKE 3767AHAS7367	12,000
94	GMC TOOKICK		16066415125514042	
96	INTERNATIONA 1	A20002 H	14TSCAAMOTH238549	
78	PETER BILT	A80994N	100384-P	50,000

#### 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: Louis Faunce Position: OPERATIONS

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: Louis FAUNCE Position: OPERATIONS

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: Louis FALLICE Position: OPERATIONS

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: hours Faurice Position: OPERATIONS

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: Louis Faunce Position: OPERATIONS

**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: Louis FAUNCE Position: OPERATIONS

CARGÓ 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: Louis FAUNCE Position: OBSECTIONS

#### **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: Louis Faunce

Position: OPSRATIONS

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, <u>but not limited to</u>: 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: Louis

FAUNCE

Position: OPERATIONS

#### **DECLARATION OF APPLICANT:**

I understand that filing this application <u>does not</u> 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.

BELTRANSFER INC.
how's w Faunce SR

Print name of applicant

Signature of Applicant

Date & Place

BUTHEIL, WA

12-4-03

# **ATTACHMENT B**

# **Transfer or Acquisition of Control**

☐ Transfer  Acquisition of Control	one:
BOTHEN TRANSFER INC	
Current Name on Permit (Seller)	
BOTHEII TRANSFER & STORAGE	
Current Trade Name on Permit (Seller)	
	1. WA. 98012
Address (Seller)	475 4100 1777
HG- //858 Permit Number	925- 482-1777 Phone Number (Seller)
Permit Number	Phone Number (Seller)
Does the transfer of this permit fall under the provisions please complete Attachment C.	of WAC 480-15-260? No (Yes)If yes,
Have all fines and/or penalties been paid? No Ye	es
Has the closing annual report been filed with the Commi	ssion? No Yes
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 Louis Fauxe The Bith Transfer	claims filed by customers for loss and/or sale and transfer or acquisition?
RELEASE OF AUT	
I, the seller, have sold or otherwise released interest in r	ny household goods permit number
and the second s	BIL TRANSFER INC
Name of Buyer  BIL TRANSFER INC.	DBA BOTHELL TRANSFER .
Trade Name of Buyer	
We, as applicants, hereby jointly declare and affirm to our knowledge.	that all information is true to the best of
Seller's Signature	/2-4-03 , BOTHEN, WA.  Date & Location
y /	2-4-03 <u>BOTHEII. WA</u> Date & Location
Buyer's Signature	Date & Location

### **ATTACHMENT C**

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

		C.	Describe the steps taken by the applicant and the current owner to ensure that safe operations and
		b.	Explain why the transfer of ownership or control is necessary to ensure the company's economic viability
		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
		other p	rship or control of a permit is being transferred to any shareholder, partner, family member, employee, or person familiar with the company's operations and the household goods moving services provided. If you this option, please complete the following:
2.	pul	blic noti	nission will grant an application for permanent authority without temporary permit operations following ce or comment if the applicant is fit, willing, and able to provide service and the application is filed to acquire control of permanent authority for the following reason (check box, if applicable):
res	olutio	same s E***Doc on, partr	ship is being transferred from one corporation to another corporation when both are wholly owned by the shareholders.  Sumentation must be included with your application. Documentation may be in the form of a corporate nership agreement, court order, death certificate, will or other proof of right to inherit, estate executor's munity property agreement or other such documentation that may support your request.
\		A partr	nership has incorporated and the partners are the majority shareholders; or
		A partr	nership has dissolved and the interest is being transferred to the majority partner;
	D	A corp	oration has dissolved and the interest is being transferred to the majority shareholder;
		An ind	ividual has added a partner, but the same individual remains the majority partner;
		An ind	ividual has incorporated, and the same individual remains the majority shareholder;
	<b>Q</b>	A sole	proprietor has died and the interest is being transferred as property of the estate;
			reholder in a corporation has died and that shareholder's interest is being transferred to a surviving spouse or more surviving shareholders;
	Q		nership has dissolved due to the death, bankruptcy, or withdrawal of a partner, and that partner's interest g transferred to one or more of the remaining partners or a spouse;
1.	fit,	willing,	nission will grant an application for permanent authority without public notice or comment if the applicant is and able to provide service and the application is filed to <u>transfer or acquire control of permanent authorit</u> the following reasons (check one, if applicable):

maintained:

#### CORPORATE RESOLUTION

# **BOTHELL TRANSFER, INC.**

The undersigned, being the sole, officer, director and shareholder of **BOTHELL TRANSFER**, **INC.**, does hereby make the following corporate resolutions to the same extent and effect as if the same were enacted at a duly held meeting of the corporation's officers directors and shareholders. Said resolutions being as follows:

RESOLVED: It is hereby resolved that Louis William Faunce, Jr., as the sole officer and director of Bothell Transfer, Inc., is hereby authorized to take all actions reasonably necessary to apply for and perfect the transfer of that certain Household Goods Carriers Permit issued to Bothell Transfer, Inc., by the Washington Utilities and Transportation Commission to B&L Transfer, Inc., (UBI 602-349-447) which corporation is wholly owned by Louis William Faunce, Jr.,

#### And it is further:

RESOLVED: That Louis William Faunce, Jr., as the sole officer, director and shareholder of Bothell Transfer, Inc., is hereby authorized is hereby authorized to release and/or assign the following trade names registered to Bothell Transfer, Inc. to B&L Transfer, Inc.:

Bothell Transfer Moving & Storage Bothell Transfer & Storage Bothell Transfer

Consent hereby given to the above stated resolutions the 17th day of December 2003.

Quis William Faunce, Jr.

President, Director, and Shareholder

Bothell Transfer, Inc.

# LAW OFFICES NATHAN JAMES NEIMAN

15655 NE 85th Street, Suite 4 Redmond, Washington 98052-3563

> Telephone (425) 881-3680 Facsimile (425) 881-1457

November 25, 2003

Teri Wallace Washington Utility Transportation Commission P.O. Box 47250 Olympia, Washington 98504-7250 Fax: 360-586-1181

RE: Inquiry Concerning Transfer of Household Goods Carrier Permit

Dear Ms. Wallace:

This letter follows our November 24, 2003 telephone discussion concerning a corporate client I represent. The purpose of my call and this letter is to inquire concerning the transfer of my client's household goods carriers authority from corporation XXX, Inc. to YYY, Inc.

My client, XXX, Inc., presently holds a valid permit for the transportation of household goods pursuant to WAC 480-15. XXX, Inc. is fully owned by a marital community. There are no other shareholders. The husband serves as the only officer and director of XXX, Inc.

My client desires to dissolve XXX, Inc. by December 31, 2003. Under their proposed plan a new corporation, YYY, Inc. would be created in December and, upon the successful transfer of the Permit, YYY, Inc. would commence business January 1, 2004. Although YYY, Inc would be a newly registered Washington corporation, in all respects; it would be owned and managed precisely as XXX, Inc. was owned and managed. Stated differently: The marital community owning XXX, Inc. would own YYY, Inc. The husband, who is the current president of XXX, INC., would be the president of YYY, Inc. The husband serves as the only director of XXX, Inc. he would become the new directors of YYY, Inc.

All of the assets and registered trade names owned by XXX, Inc. would be transferred to YYY, Inc.

This appears to fall precisely within exception (i) of WAC 480-15-260 which states:

Ms. Wallace November 25, 2003 Page 2 of 2

'We will grant an application for permanent authority without public notice or comment if:

(i) Ownership is being transferred from one corporation to another corporation when both are wholly owned by the same shareholders.'

Before we undertake the reorganization outlined above, we solicit your initial impression as to whether the plan of action outlined above falls within the exception presented at WAC 480-15-260 (i) or some other exception. We also request instruction concerning the procedure to be followed to transfer the permit from XXX, Inc. to YYY, Inc.

Sincerely,

NATHAW JAMES NEIMAN

NJN:jw

Cc: Client

Cc: Ed Rich, CPA

Advance Copy Via Facsimile

(November 2003- Faunce 11.25)

ACORD CEDI					
ACORD CERT  Acordia Northwe 520 Pike Street, Seattle, WA 98  INSURED BOTHELL TRANS 17624 15TH AV BOTHELL V	IFICATE OF LIA	BILITY	SURAN	CE	DATE (MM/DD/Y
	206-701-500	THIS	ERTIFICATE IS	ISSUED AS A MATTER	The second secon
Acordia Northwe	est, Inc.	HOLDE	R THIS CEPTI	EICATE MIGHTS UPUN	THE CERTIFICA
520 Pike Street,		ALTER	THE COVERAC	BE AFFORDED BY THE	POLICIES BELOY
Seattle, WA 98	101		\$156.1510 BY BY BY \$1.20	RS AFFORDING COVER	what the property of the state of the state of the state of
BOTHELL TRANS	SFER, INC.	INSURER A:	Security In	s. Co. of Hartford	
17624 15TH AV	E SE, #101-B	INSURER B:	endin pang begin		
BOTHELL V	VA 98012	INSURER C:			
		INSURER D:		Are a second	
COVERAGES		INSURER E:	1 74. A		
THE POLICIES OF INSURANCE LIST	TED BELOW HAVE BEEN ISSUED TO DINDITION OF ANY CONTRACT OR	THE INSURED NAMED	APOVE FOR THE	BOLLOW STATE OF THE STATE OF TH	
MAY PERTAIN, THE INSURANCE A POLICIES. AGGREGATE LIMITS SHO	DELOW HAVE BEEN ISSUED TO DNDITION OF ANY CONTRACT OR IFFORDED BY THE POLICIES DESCRI DWN MAY HAVE BEEN REDUCED BY	OTHER DOCUMENT V BED HEREIN IS SUBJE	VITH RESPECT TO	POLICY PERIOD INDICATED WHICH THIS CERTIFICATI ERMS. FXCLUSIONS AND C	. NOTWITHSTANDII
INSR TYPE OF INSURANCE					CONDITIONS OF SUC
A GENERAL LIABILITY	MS 041-1145	POLICY EFFECTIVE DATE (MM/DD/Y	POLICY EXPIRATION DATE (MM/DD/Y	ON LIN	MITS
X COMMERCIAL GENERAL LIABILITY	/	2/08/03	2/08/04	EACH OCCURRENCE	\$ 1000000
CLAIMS MADE X OCCU	R			FIRE DAMAGE (Any one fire)	100000
	_			MED EXP (Any one person)	\$ 5000
X STOP GAP				PERSONAL & ADV INJURY	\$ 1000000
GEN'L AGGREGATE LIMIT APPLIES PER				GENERAL AGGREGATE	\$ 2000000
X POLICY PRO-				PRODUCTS - COMP/OP AGG	1000000
A AUTOMOBILE LIABILITY	MS 041-1145	2/08/03	2/08/04		
X ANY AUTO ALL OWNED AUTOS	HIRED AUTO PHYS.	2,00,00	2/08/04	COMBINED SINGLE LIMIT (Ea accident)	\$ 1000000
SCHEDULED AUTOS HIRED AUTOS	DAMAGE: \$50,000 LIMIT; INCLUDESS			BODILY INJURY (Per person)	\$
NON-OWNED AUTOS	SP. PERILS W/\$250			BODILY INJURY	
X TRLR INTCH	DED & COLLISION	'ADT		(Per accident)	\$
\$25K LIMIT	W/\$1,000 DEDUCT.	<b>UPY</b>		PROPERTY DAMAGE (Per accident)	
GARAGE LIABILITY			<del> </del>	<del></del>	ļ <u> </u>
ANY AUTO	1			AUTO ONLY - EA ACCIDENT	
EVOSCO HAZII			1.	OTHER THAN EA ACC	
OCCUR CLAIMS MADE				AGG EACH OCCURRENCE	
OCCUR CLAIMS MADE				AGGREGATE	
DEDUCTIBLE					
RETENTION \$					\$
WORKERS COMPENSATION AND	NO 054 004				*
EMPLOYERS' LIABILITY	MS 051-0019	2/08/03	2/08/04	X WC STATU- OTH-	<u> </u>
				EL EAGUAGOS TOTAL	\$ 1000000
			, e	E.L. DISEASE - EA EMPLOYEE	
OTHER	MS 041-1145			EL DIOTAGE TOTAL	\$ 1000000
CARGO COVERAGE	1110 041-1145	2/08/03	2/08/04		
WHSE LEGAL LIAB.				\$100K/SHIPMT;\$200K	AGG.IN TRAN
SCRIPTION OF OPERATIONS/LOCATIONS/VEHI	CLES/EXCLUSIONS ADDED BY ENDORSEME	NT/SPECIAL PROVISIONS		\$100K LIMIT @ COVERI	ED LOCATION
INSURED ENDORSEME	3 INTEREST IS DESCRIBED ON A	TTACHED ADDITIO	NAL	,	
OONED ENDONSEME	INT. JHWL			, ,	
		•			
			* - * * * * * * * * * * * * * * * * * *		
PTICOATE HOLDE		<u> </u>			
RTIFICATE HOLDER ADDIT	IONAL INSURED; INSURER LETTER:	CANCELLATIO	)N		
	-			TD DOLLARS AND	
		DATE THEREOF	THE ISSUING INCUR-	ED POLICIES BE CANCELLED BEF	ORE THE EXPIRATION
-		NOTICE TO THE C	ERTIFICATE HOLDER	WILL ENDEAVOR TO MAIL	45 DAYS WRITTEN
•		IMPOSE NO OBLIC	SATION OR LIABILITY	NAMED TO THE LEFT, BUT FAILI OF ANY KIND UPON THE INSU	URE TO DO SO SHALL
		THE PROPERTY AND A STATE OF		WITH KIND UPON THE INSU	RER, ITS AGENTS OR
I		AUTHORIZED REPRE	SENTATIVE /		
ORD 25 6 (7/07)		1 Patri	cky Hu	MILL	

ACORD 25-S (7/97)

Page: 1 Document Name: untitled

MASTER LICENSE SERVICE

12/22/03

INQR UTL024P1

BUSINESS ENTITY INQUIRY

10:21:41

UBI: 602 349 447 001

State of Inc: WA

Loc Status: A

\_\_\_\_\_

Type: PROFIT CORPORATION Date of Inc: 12 11 2003 Corp Status: A

Owner Name: B & L TRANSFER, INC.

Reg. Agent: LOUIS FAUNCE

Reg. Address: 22825 15TH AVE SE

BOTHELL WA 98021

Exp. Date: 12 31 2004

Total Shares authzd:

Total Shares issued:

Firm Name :

Loc:

Mail:

Phone:

RFI: No NSF: No

Registered Tradenames for this UBI? No

Location First Activity:

RFP: No Withhold: No

Last License Issue:

TRANSFER: {Press <ENTER> for Endorsements List}

Enter-PF1---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---

GLIST APLST UBIQ SERV TRDU INQA

INQR MMENU

Date: 12/22/2003 Time: 10:22:01 AM

Page: 1 Document Name: untitled

MASTER LICENSE SERVICE 12/22/03
INQR UTL024P1 BUSINESS ENTITY INQUIRY 10:34:42

UBI: 602 349 447 001 Loc Status: A

Type: PROFIT CORPORATION

\_\_\_\_\_\_

Owner Name: B & L TRANSFER, INC.

Firm Name :

Page: 1

Endorsements Unit Account # Stat Date Expires

PROFIT CORPORATION 30338198 A 12 17 2003 12 31 2004

TRANSFER: \_\_\_\_ End of Endorsement List

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---

GLIST APLST UBIQ SERV TRDU INQA

INQR MMENU

Date: 12/22/2003 Time: 10:34:47 AM



#### **Corporations Menu**

Corporations

Corporations Home

 ${\bf \boxplus}$  Registration

Renewal

Corporations Search

Master License Service

Uniform Code

Main Menu

Home Page

Address Confidentiality

**Apostilles** 

Archives

Charities

Contact Us

Corporations

Digital Signatures

Elections & Voting

International Trade

Library

Medals of Merit & Valor

**News Releases** 

Oral History

Productivity Board

State Flag

State Seal

Washington History

Corporations Division - Registration Data Search

#### **B & L TRANSFER, INC.**

**UBI Number** 

602 349 447

Category

Regular Corporation

Profit/Nonprofit

Profit

Active/Inactive

Active

State of Incorporation

WA

Date of Incorporation

12/11/2003

License Expiration Date 12/31/2004

### Registered Agent Information

**Agent Name** 

LOUIS FAUNCE

**Address** 

22825 15TH AVE SE

City

BOTHELL

**State** 

WA

ZIP

98021

#### **Special Address Information**

**Address** 

City

State

Zip

Return to Search List

#### Disclaimer

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

FORM STATE OF WASHINGTON VOUCHER DISTRIBUTION (REV. 1/91)

(1.21. 1771)						
VENDOR NAME AND ADDRESS	AGENCY NUMBER LOCATION					
B & L TRANSFER, INC. C/O LOUIS FAUNCE, JR.		AGENCY P.R. OR AUTHORIZ REFUND	ATION NUMBER			
17624 15TH AVE SE #101-B BOTHELL, WA 98012	I AGENCY NAME AND LOCATION					
		1300 S. EVERGREEN P P.O. BOX 47250 OLYMPIA, WA 98504-	PK DRIVE S.W.			
FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (FOR REPORTING PERSONAL SERVICE)	ES CONTRACT PAYMENTS TO I.R.S.)	RECEIVED BY BUSINESS OFFICE	DATE RECEIVED			
		DOSINESS OF FICE				

USE SPACE BELOW AS A WORKSHEET TO DEVELOP OR EXPLAIN THE GOODS OR SERVICES PURCHASED

STAPLE INVOICES ON BACK

REVENUE REFUND \$250.00 due to DUPLICATION OF HHG APPLICATION.

RECEPTION OR FIELD RECEIPT NO. 4678 DATED 12-19-03

TOTAL REFUND

\$250.00

R Tima	Tipa Leipski TELEPHONE NUMBER 664-1170			DATE 12/22	DATE 12/22/03		PROVAL	$\langle \langle \cdot \rangle \rangle$	ilt	DATE /22/0.						
DOC. DA	ATE		PMT DUE	DATE	CURRENT DOC	CURRENT DOC. NO.		REF. DOC.	NO.	VENDOR NUMBER		VENDOR MESSAGE		USE TAX	UBI NUMBER	
REF DOC SUF	TRANS CODE	M O D	FUND	MASTER IN APPN INDEX	IDEX PROGRAM INDEX	SUB	SUB SUB OBJECT	ORG INDEX	WORK CLASS ALLOC	COUNTY BUDGET UNIT	CITY/ TOWN MOS	PROJECT	SUB PROJ	PROJ PHAS	THUOMA	INVOICE NUMBER
_	198		111			02	68	,							\$	REFUND
			<u> </u>													
				-									-			
ACCO	UNTING A	PPROV	AL FOR PA	YMENT						DATE WARRAI TOTAL			WARRANT TOTAL	WARRANT NUMBER		



# HOUSEHOLD GOODS CARRIER 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
	Temporary authority (to meet a short-term need) – Complete pages 1 - 5 and Attachment A	\$ 250
	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 B	\$ 550
×	Permanent authority to transfer or acquire control under the exceptions in WAC 480-15-260 – Complete pages 1 - 5 and Attachments B & C	\$ 250
٥	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
	Name Change – Complete page 1 and Attachment D	\$ 35
	Extension of authority – Complete pages 1 - 5 and Attachment A	\$ \$50

		TYPE OF	PAYMENT	<i></i>	<u> </u>
Check	Money Order	Amex	Discover	Mastercald	Visa
Expiration Date:  CERTIFICATION: I, and correct, that I a	the undersigned, in authorized to ex	under penalty for fa	Amou	ertify that the follo	wing information is true at, and that all information
Name (printed):		FAUNCE -		e: 12-4-0] : Presiden	
	<del></del>	FOR OFFICE	AL USE ONL	<u>Y</u>	
Date Filed:	Application #:	Motcar:		ermit Issued: HG	-
Staff Assigned:	Insurance:	Inspection	D.	OL/SOS:	
Reception #: 111-0268-207-02	250.00	111-0268-202-0	1	111-0268-0	13-20
	00046	78 N	PAGE 1	ated fi	U Sevised 07/03

(must be individual, partners of a partnership, or corporation)  Trade Name, if applicable DBA. ROTHELL TRANSFER  Physical Address 17614 ST. AVE SE #701-3  Mailing Address BOTHELL, WA. 980/2  Telephone Number (425) 483-1777 Fax Number (425) 398-570.3  UBI #602-349-447 Email: Lou Favu (PA01.com  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  Louis Faulle TR PRES /0090  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: Quality Moving of The Moving of Bit Transfer  Consumers would Reconsider the transportation/household goods moving industry:  The Last All Years of Moving Corpeliac All Services of The Tradustry.	, BUSINESS INFORMATION
Trade Name, if applicable D&A. BOTNell TRANSFER  Physical Address 17614 ST AVE SE #101-B  Mailing Address BOTHEII, LJA. 980/2  Telephone Number (1/25) 1/83-1777 Fax Number (1/25) 398-5703  UBI #(CO.2-349-447 Email: Lou Faun (P. Adl. Com  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  Louis Faunce Teles Press 1009/0  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: Quality Moving Provide Consumes Statics  Consumes Would Reconse The Attention, and Caline Americal Of Bith Transfer  Briefly describe your experience in the transportation/household goods moving industry:  That Inst All Salvers of Moving Conserve of The Tradustry.  The Market of Moving Conserve of The Tradustry.	Name of Applicant BFL TRANSFER INC.  (must be individual, partners of a partnership, or corporation)
Physical Address   7624   15	
Mailing Address BOTH211, WA. 980/2  Telephone Number (#25) #82-1777 Fax Number (#25) 398-5703  UBI #602-349-447 Email: Lou Faun @ Aol . Com  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  Louis Faunce Tree Press / OO 96  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: Quality Moving Of Thouse Hold Goods. By Providing Substitute Customer Service (Onserve) would Recovize THE ATTENTIVE, And CARYGE  Briefly describe your experience in the transportation/household goods moving industry:  Hove Histed Several Wilsuz Rostrows in the Last All Years Of Moving Covering All aspects of The Todustry.	• •
Telephone Number (1/25) 1/83-1777 Fax Number (1/25) 398-5703  UBI # CO2-349-447 Email: Lou Faun (PADI COM  TYPE OF BUSINESS STRUCTURE  Individual Partnership Corporation Other (LP, 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  Louis Faunce Tree Press / OO 90  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: Quality Moving OF  House Hold Goods, By Providing Sulfation Customers Service  Consumers would Recovize The Attention And Caling —  Mittude of Beth Transfer  Briefly describe your experience in the transportation/household goods moving industry:  Thouse Of Movent Covering All aspects of the Tandustry.	Physical Address 17624 151 AVE SE -101-13
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  Louis Faurice Tr Press  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: Quality Moving of 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: Quality Moving of House Mod Goods. By Play dink Sulvetor Customers Service (Onsumes Would Reconize The Attentive and Caling The Attentive and Caling The Moving of the territory of the transfer.  Briefly describe your experience in the transportation/household goods moving industry:  That Moving Opering All aspects of this Tudustry.	Mailing Address BoTHEII, WA. 980/2
TYPE OF BUSINESS STRUCTURE  Individual Partnership Corporation Other	Telephone Number (425) 482-1777 Fax Number (425) 398-5703
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 Louis Faunce Transportation of Percentage of Shares Louis Faunce Transportation of Percentage of Shares Louis Faunce Transportation or Percentage of Shares Louis Faunce Transportation of Percentage of Shares Louis Faunce Transportation or Percentage of Shares Louis Faunce	UBI#602-349-447 Email: Lou FAUN @ AOI. COM
List the name, title, and percentage of partner's share or stock distribution for major stockholders:  Name  Title  Stock Distribution or Percentage of Shares  Louis Faunce IR  PRES  /OO 96  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:  **Quality Moving  Consemes Would Reconize The Attentive, And CARNE  Briefly describe your experience in the transportation/household goods moving industry:  **T Have Held Several Unique Recottors in The Last 2/1  Veres Of Mouse Covering All agreets of this Industry.	TYPE OF BUSINESS STRUCTURE
Name  Title  Stock Distribution or Percentage of Shares  Louis Faunce IR  PRES  PRES  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:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:  Conscire the services you wish to provide. Explain how your services will enhance customer choice, provide the services your services will enhance customer choice, provide the services your services will enhance customer choice, provide the servi	Individual Partnership Corporation Other(LP, LLP, LLC)
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:  Mouse Moid Goods, By Play dink Suleriae customer Service  Consumers would Reconize the Attentive, and carine  Attitude of Birk Transfer  Briefly describe your experience in the transportation/household goods moving industry:  Think Held Several Unique Rections in the Last all  Veres of Mouses, Course at a spects of this Industry.	
Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Quality Moving Of House Moid Goods, By Paoviding Sulenton Customer Services Consciences would Reconize the Attentive and Caling — Attitude of Bild Transfer.  Briefly describe your experience in the transportation/household goods moving industry:  I Have Held Several Unique Positions in the Last all Veres of Mousel, Covering All aspects of This Industry.	<u> </u>
Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Quality Moving of House Mould Goods. By Paoviding Superior Customer Service Conscenes would Reconize the Attentive and caling The Attentive and caling Transfer.  Briefly describe your experience in the transportation/household goods moving industry:  I Have Held Several Unique Postions in the Last all Veres of Mousel Covering All aspects of Till Industry.	
Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Quality Moving Of House Moid Goods, By Paoviding Sulenton Customer Services Consciences would Reconize the Attentive and Caling — Attitude of Bild Transfer.  Briefly describe your experience in the transportation/household goods moving industry:  I Have Held Several Unique Positions in the Last all Veres of Mousel, Covering All aspects of This Industry.	
Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Quality Moving OF - House Hold Goods. By Providing Surenies Consumes would Reconize THE ATTENTIVE, And CARING - ATTITUDE OF BILL TRANSFER.  Briefly describe your experience in the transportation/household goods moving industry:  I Have Held Several Unique Postions in the Last all Veres of Mousel. Covering All aspects of This Industry.	Choose one of the following for the territory in which you wish to operate:
promote competition, or fill an unmet need for service: Quality Moving of - HOUSE HOLD GOODS, BY PROVIDENT SUPERIOR CUSTOMER SERVICE CONSCINES Would Reconize THE ATTENTIVE, AND CARNO - ATTITUDE OF BELL TRANSFER.  Briefly describe your experience in the transportation/household goods moving industry:  I HAVE HELD SEVERAL UNIQUE POSTIONS IN The LAST A/ VEARS OF MOUSEL COURTING ALL ASPECTS OF THIS INDUSTRY.	
CONSCIMERS WOULD RECONIZE THE ATTENTIVE, AND CARING - ATTITUDE OF B' & TRANSFER.  Briefly describe your experience in the transportation/household goods moving industry:  I HAVE HELD SEVERAL UNIQUE POSTIONS IN THE LAST A/ VEARS OF MOUSEL COURSEING ALL ASPECTS OF THIS INDUSTRY.	promote competition, or fill an unmet need for service: Quality Moving of
Briefly describe your experience in the transportation/household goods moving industry:  I Have Held Several Unique Postions in the Last all Vears of Mouse Coures as All aspects of this Industry.	
I HAVE HELD SEVERAL UNIQUE POSTIONS IN THE LAST OF YEARS OF MOUSE COVERING ALL ASPECTS OF THIS INCLUSTED.	
	I HAUE HELD SEVERAL UNIQUE POSTIONS IN The LAST 21
lanking formand to hearning mors -	VEARS OF MOUSE COURTING ALL RSPECTS OF THIS INCLUSTED.