

**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 checked="" 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 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

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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: 7/29/05	Application #: P-79392	Motor #: 43869	Permit Issued: HG- 61975
Staff Assigned:	Insurance: tw.	Inspection:	DOL/SOS: OK/N/A tw.
Reception #: 111-0268-207-02	550.00	111-0268-202-01	111-0268-013-20

0000163

TV-051164

UBI # 602-367-285

BUSINESS INFORMATION

Name of Applicant Phillip Johnson
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable Puget Sound Delivery Guys

Physical Address 218 main st. suite 153 Kirkland, WA 98033

Mailing Address same as above

Telephone Number (206) 778-2067 Fax Number (425) 820-0639

UBI # ~~83-0385741~~ 602 367 285 Email: PSdg@verizon.net

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>NA</u>		<u>NA</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: The services we offer is delivery of household goods, to and from small businesses and from home to home.

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

10 years of moving and delivering experience.

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(must be individual, partners of a partnership, or corporation)

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Briefly describe your experience in the transportation/household goods moving industry: 10 years of moving and delivering experience.

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: _____

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# _____ 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? _____

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	\$ 12-K	Salaries/Wages Payable	\$ -Na-
Notes Receivable	\$ -Na-	Accounts Payable	\$ -Na-
Accounts Receivable	\$ -Na-	Notes Payable	\$ -Na-
Investments	\$ -Na-	Mortgages Payable	\$ -Na-
Other Current Assets	\$	Other Trucks	\$ 14000
Prepaid Expenses	\$ -Na-	TOTAL LIABILITIES	\$
Land and Buildings	\$ -Na-	NET WORTH	
Trucks and Trailers	\$ 59-K	Preferred Stock	\$ -Na-
Office Furniture	\$ -Na-	Common Stock	\$ -Na-
Other Equipment	\$ -Na-	Retained Earnings	\$ -Na-
Other Assets	\$ -Na-	Capital	\$ -
TOTAL ASSETS	\$ 73-K	TOTAL LIABILITIES & NET WORTH	\$ 50-K

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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	\$

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
2005	UD Nissan			17,999
99	Isuzu NPR		TALB4B147X700206	14,999
JNA MK50H15AHS015				

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: Phillip A. Johnson Position: Owner

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: Phillip Johnson Position: Owner

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: - Na - Position: - Na -

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: Na Position:

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: Phillip A. Johnson Position: Owner

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: Phillip Johnson Position: Owner

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: Phillip Johnson Position: Owner

MAKE IT HAPPEN

PAGE 4

Mark Halliday
360-664-1232

Revised 07/03

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Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight
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99	Isuzu NPR		JALB4B147X7002300	14,999
			JNAMC50H15AH50185	

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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: Phillip A. Johnson Position: CEO / Owner

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: Phillip A. Johnson Position: Owner

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.

Phillip A. Johnson
Print name of applicant


Signature of Applicant

7/26/05
Date & Place

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: _____ Position: _____

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.

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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.

Phillip A. Johnson
Print name of applicant

[Signature]
Signature of Applicant

7/26/05
Date & Place

.....

Country Wide Home Loans

July 23, 2005

To whom it may concern

Dear Sir or Madam:

I am writing this letter on behalf of PJ (Phillip Johnson) owner of Puget Sound Delivery Guys. I have personally employed the services of PSDG on two occasions. PSDG and staff demonstrated professionalism and a work ethic second to none. Additionally, the fees charged for the services rendered were very fair. Finally, I have referred PSDG to 3 friends. All three concurred that PJ and staff were exemplary in their work ethic and professionalism. It is my opinion that PJ and PSDG set the bar in the industry.

Sincerely,

Erik Ames
Home Loan Consultant
425.945.4031 Direct
206.351.8984 Mobile

.....

[Click here and type slogan]

Puget Sound Delivery Guys

218 Main Street, Suite 153
Kirkland, WA 98033
206-778-2067

DELIVERY REFERENCES

<u>Business</u>	<u>Contact</u>	<u>Phone Number</u>
Rattan Interiors 1191 Andover Park W. Seattle, WA 98188	Ted Butler Todd Patterson	206-575-2201
O And Company 140 Central Way Kirkland, WA 98033	Leanna Thomajan	425-803-9006
The Village Shoppe 126 Park Lane Kirkland, WA 98033	Jeri Harrison	425-827-2597
Tacoma Costco 2219 37 th St. Tacoma, WA 98409	Reese	253-475-5595
Federal Way Costco 35100 Enchanted Park Way Federal Way, WA 98003	Brian Wright	253-874-3652
Costco Home 11831 120 th Ave. NE Kirkland, WA 98034	Terri	425-825-4500

Quality Service For Your Moving and Delivery Needs

The Village Shoppe

126 Park Lane, Kirkland, WA 98033
425-827-2597

December 10, 2004

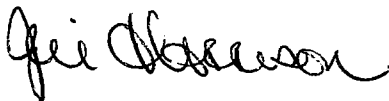
To Whom It May Concern,

I am writing this letter of recommendation for Puget Sound Delivery Guys. They have delivered furniture for The Village Shoppe for the last several months. They are very dependable, reliable, careful and available on short notice.

PJ is such a professional and so pleasant to work with. I have heard positive comments from my customers that he has delivered to.

I would highly recommend Puget Sound Delivery Guys for your next delivery or move!

Sincerely,



Jeri Harrison
The Village Shoppe

Puget Sound Delivery Guys

■ Quality Service for Your Moving and Delivery Needs ■

*218 Main St., Suite 153
Kirkland, WA 98033
206-778-2067*

REFERENCES

<u><i>Customers Name</i></u>	<u><i>Phone Number</i></u>	<u><i>Date of Move/Delivery</i></u>
Mr. & Mrs. Aims	206-992-0452	09-03-04
Shelly & Jeff Schor	425-868-6005 425-466-3945	09-27-04
Tony	425-442-8580	09-01-04
Judy Rothe	425-422-0684 425-357-8986	05-17-04
Candida & Harry S.	425-828-8925	11-20-04

COSTCO HOME

December 27, 2004

To Whom It May Concern,

This letter represents Costco Home's recommendation of Puget Sound Delivery Guys (PSD) as a furniture delivery service. PSD has been delivering furniture for Costco Home for over a year and has developed a good reputation with our staff as well as our members.

Their employees are very courteous when performing deliveries, and are dressed in a professionally presentable manner. Over the past year we have received several positive comments from our members regarding their delivery experience with PSD.

PSD is usually available to handle delivery requests of ours within a matter of days. The services they offer are competitively priced and they are flexible with regards to special delivery requests.

We at Costco Home have been pleased with the services PSD has provided our members and we will continue to use PSD for a variety of our delivery needs. We have also offered PSD's services to our members when our primary delivery companies are not able to meet their specific needs.


Sincerely,



Kyle Hofman
Distribution Manager
CostcoHome



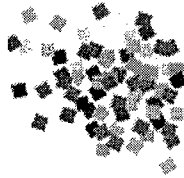
Bonnie Allen/WUTC
08/22/2005 08:21 AM

To Tina Leipski/WUTC@WUTC
cc
bcc
Subject Re: NEW HHG APPLICATION 

I have no additional information or conditions to offer on this application.

Bonnie L. Allen, Regulatory Analyst
PHONE 360-664-1226 FAX 360-586-1130
ballen@wutc.wa.gov

Washington Utilities & Transportation Commission
PO Box 47250
Olympia, WA 98504-7250
Tina Leipski/WUTC



Tina
Leipski/WUTC
08/19/2005
02:39 PM

To Licensing Services, Business Practices, Carolyn Caruso/WUTC@WUTC, Alan Dickson/WUTC@WUTC, Foster/WUTC@WUTC, Bruce Grimm/WUTC@WUTC, M Halliday/WUTC@WUTC, Leon Macomber/WUTC@WUTC, Tom McVaugh/WUTC@WUTC, Sharon Paulsen/WUTC@WUTC, Bonnie Allen/WUTC@WUTC
cc Carolyn Caruso/WUTC@WUTC
Subject NEW HHG APPLICATION

We have an application for permit to transport household goods in the State of Washington from:

PHILLIP JOHNSON
D/B/A PUGET SOUND DELIVERY GUYS
218 Main St. Suite 153
Kirkland, WA 98033

This is a Sole Proprietor.

COMPLIANCE: Nothing was found in the Compliance database nor in the Safer system.

If you have any concerns or need more information regarding this carrier, just let me know.

Thanks!!! Tina