

**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   
  Mastercard   
  Visa

119455

Expiration Date: \_\_\_\_\_ Amount: 250.00

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): DEAN R JACKSON Date: 4-12-06

Signature: \_\_\_\_\_ Title: PRESIDENT

**FOR OFFICIAL USE ONLY**

Date Filed: <u>4-17-06</u>	Application #: <u>P79444</u>	Motcar: <u>44367</u>	Permit Issued: HG-
Staff Assigned: <u>[Signature]</u>	Insurance: <u>0001577</u>	Inspection:	DOL/SOS: <u>[Signature]</u>
Reception #: 111-0268-207-02	<u>250.00</u>	111-0268-202-01	111-0268-013-20

TV-060584

**BUSINESS INFORMATION**

Name of Applicant TRI-CITY UNITED, INC.  
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable LARSEN TRANSFER CO.

Physical Address 220 WELLHOUSE LOOP RICHLAND WA 99352

Mailing Address SAME AS ABOVE

Telephone Number (509) 943-9139 Fax Number (509) 946-1717

UBI # 600 643 098  Email: dean.jackson@larsentransfer.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:

<u>Name</u>	<u>Title</u>	<u>Stock Distribution or Percentage of Shares</u>
<u>DEAN R JACKSON</u>	<u>PRESIDENT</u>	<u>60%</u>
<u>DANIEL W DREES</u>	<u>SEC./TREAS.</u>	<u>40%</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 COMPETITIVE PRICES FOR EXCELLENT SERVICES FOR LOCAL, INTRASTATE, INTERSTATE, WORLDWIDE MOVING AND STORAGE. IN BUSINESS SINCE 1970 AND AN AGENT FOR UNITED VAN LINES.

Briefly describe your experience in the transportation/household goods moving industry: RAISED IN THE BUSINESS AND STARTED AT THE ENTRY LEVEL, 16 YEARS AGO. BECAME THE GENERAL MANAGER IN 1998 AND PRESIDENT OF THE CORP IN 2000 TO THE PRESENT. WE, BOTH, HAVE WORKED IN EVERY FACET OF THE INDUSTRY, FROM THE BOTTOM UP.

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: CC173 HG-173

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# 0026510 MC# 581 Single State Registration Base State WA

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

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: \_\_\_\_\_

ASSETS		LIABILITIES	
Cash in Bank	\$	Salaries/Wages Payable	\$
Notes Receivable	\$	Accounts Payable	\$
Accounts Receivable	\$	Notes Payable	\$
Investments	\$	Mortgages Payable	\$
Other Current Assets	\$	Other	\$
Prepaid Expenses	\$	<b>TOTAL LIABILITIES</b>	\$
Land and Buildings	\$	<b>NET WORTH</b>	
Trucks and Trailers	\$	Preferred Stock	\$
Office Furniture	\$	Common Stock	\$
Other Equipment	\$	Retained Earnings	\$
Other Assets	\$	Capital	\$
<b>TOTAL ASSETS</b>	\$	<b>TOTAL LIABILITIES &amp; NET WORTH</b>	\$

**FINANCIAL STATEMENT**  
*see attached*

**SAME AS ANNUAL REPORT**  
 You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available

## 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

see attachment

### 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: <b>SHAWN ESPINOSA</b>	Position: <b>OPERATIONS MANAGER</b>
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**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: <b>SHAWN ESPINOSA</b>	Position: <b>OPERATIONS MANAGER</b>
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**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: <b>SHAWN ESPINOSA</b>	Position: <b>OPERATIONS MANAGER</b>
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**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: <b>SHAWN ESPINOSA</b>	Position: <b>OPERATIONS MANAGER</b>
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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: <b>JEFFREY DEGROAF</b>	Position: <b>LONG HAIL DISPATCH</b>
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**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: <b>DEAN R JACKSON</b>	Position: <b>PRESIDENT</b>
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**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: <b>DEAN R JACKSON</b>	Position: <b>PRESIENT</b>
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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: **DEAN R JACKSON**

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: **DEAN R JACKSON**

Position: **PRESIDENT**

**DECLARATION OF APPLICANT:**

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

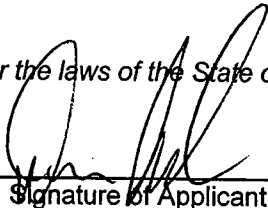
*As the applicant for a household goods permit, I understand the responsibilities of a motor carrier, and I am in compliance with all local, state, and federal regulations governing businesses, including household goods movers, in the state of Washington.*

*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.*

**DEAN R JACKSON**

Print name of applicant



Signature of Applicant

**RICHLAND, WA**

**4-12-06**

Date & Place

**ATTACHMENT B**

**Transfer or Acquisition of Control**

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

Transfer  Acquisition of Control

**TRI-CITY UNITED, INC.**

Current Name on Permit (Seller)

**LARSEN TRNASFER CO.**

Current Trade Name on Permit (Seller)

**220 WELLHOUSE LOOP RICHLAND WA 99352**

Address (Seller)

**HG-173**

**800-336-9139**

**509-943-9139**

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-173 to the following:

**TRI-CITY UNITED, INC.**

Name of Buyer

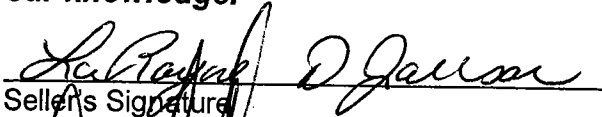
**DEAN R JACKSON**

**LARSEN TRANSFER CO.**

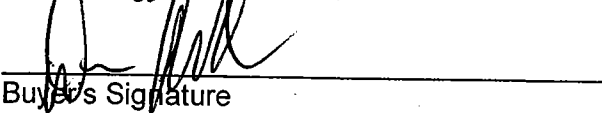
Trade Name of Buyer

**DEAN R JACKSON**

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

  
Seller's Signature

4-12-06 RICHLAND WA  
Date & Location

  
Buyer's Signature

4-12-06 RICHLAND WA  
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:  
MAJOR STOCKHOLDERS SEMI-RETIRED FIVE YEARS AGO AND COMPLETELY RETIRED IN 2005.
  - 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:  
ALL EMPLOYEES HAVE REMAINED IN PLACE (OPERATIONS, SAFETY DIRECTOR, SALES, ACCOUNTING, DRIVERS, MOVERS, ETC.)

Vehicles

LARSEN TRANSFER EQUIPMENT LIST

<u>UNIT#</u>	<u>MAKE</u>	<u>YEAR</u>	<u>MODEL</u>	<u>SERIAL #</u>	<u>PLATE #</u>
<u>TRACTORS</u>					
347706	INTL	1992	3 AXLE	1HSRDDRRONH437534	YACS446
361706	INTL	1996	3 AXLE	1HSRDALR5TH217181	YADP296
347702	FRGT	1994	3 AXLE	1FUPBCXB8RL745827	YACS433
349702	INTL	1984	3 AXLE	1HSRDWGR9EHB12690	YAD216
<u>TRAILERS</u>					
304706	KNTY	1980	44' DRP	59299	HP09989
315706	MIMIK	1981	40' FLAT	MTCO171	HP29605
316706	FRUE	1966	27' DRP	VCG381101	HP09577
404706	KNTY	1990	48' ELC	1KKVE4824LL086832	AS71001
405706	KNTY	1993	48' ELC	1KKVE4829PL094401	HR66551
406706	KNTY	1998	51' ELC	1KKVE5129WL111437	935229
309702	MATL	1989	48' MAX	1RMAXX481K1004534	HP41501
336702	FRUE	1966	27' DRP	VVG381102	HP09578
405702	KNTY	2000	51' ELC	1KKVE5122YL202570	934361
406702	KNTY	1980	44' ELC	60126	HR09990
<u>TRUCKS</u>					
803706	INTL	1991	L GATE	1HTHBBEN9MH383511	YAPM760
80706	FORD	1992	VAN	1FTCA1448NZB48252	110GZK
82706	TOYOTA	1988	P VAN	JT5RN75UXJ009181	A78727R
83706	FORD	2004	4X4 PU	1FTPW14554KB01540	A56016V
84706	DODGE	1999	4X4 PU	1B7KF23W7XJ528125	A57354F
81702	TOYOTA	1988	P VAN	JT5RN75U5J0019329	541ASK
801702	INTL	1985	L GATE	1HTLDUXP9FHA15561	510630
<u>FORKLIFTS</u>					
706	TOYOTA	2001	5000 LB	71263	N/A
702	CLARK	1989	5000 LB	G138MC-0171-6821	N/A
<u>OWNER OPERATORS</u>					
348702	FRGH	1997	3 AXLE	1FUP52YBUP80L346	MO BASE
363706	VOLVO	2000	3 XLE	4V4ND3TLOYN245059	MO BASE
362706	FRGH	1996	3 AXLE	2FUPCXYB1TA738122	OR BASE



You are not required to complete Schedule 2 if you are reporting "0" revenue or if you are a "small business" as defined in Schedule 1 on page 3 of this report.

**SCHEDULE 2**

*Attachment*

Line No.	Item	Total Amount
<b>OPERATING REVENUES</b>		
1	Common Carrier (\$ Washington Intrastate Household Goods Revenue)	394,492
2	Contract Carrier (\$ Washington Intrastate Household Goods Revenue)	
3	Other Operating Revenues (describe): MISC. 15,948 OR. INTRA 113,622	1,609,342
4	Total Operating Revenues ICC 1,247,487. PERM STG 232,285	2,003,834
<b>OPERATING EXPENSES</b>		
<b>SALARIES AND WAGES</b>		
5	Owners, Spouses, Officers or Partners	134,024
6	Clerical and Administrative (e.g. billing, personnel, etc.)	23,905
7	Managerial/Supervisory (all not shown on line 5)	140,150
8	Drivers and Helpers	186,288
9	Mechanics and Truck Service	
10	Other Employees DRS RD EXP. 78,899 OWNERS OPERATORS 462,395	541,294
11	Total Salaries and Wages	1,025,661
<b>PAYROLL TAXES AND RELATED EXPENSES</b>		
12	Federal Social Security (FICA) Taxes (\$ Owners, Partners, Officers)	10,986
13	Federal Unemployment Taxes (\$ Owners, Partners, Officers)	
14	State Unemployment Taxes (\$ Owners, Partners, Officers)	
15	Workman's Compensation (Industrial Insurance) (\$ Owners, Partners, Officers)	
16	Other Payroll Taxes and Related Expenses (\$ Owners, Partners, Officers)	12,772
17	Total Payroll Taxes and Related Expenses (\$ Owners, Partners, Officers)	23,758
<b>PAYROLL FRINGES</b>		
18	Health and Welfare (Medical Insurance) -- employees	58,642
19	Health and Welfare (Medical Insurance) -- owners, partners, officers	
20	Pension (Include IRA's and Keough Plans) -- employees	
21	Pension (Include IRA's and Keough Plans) -- owners, partners, officers	
22	Life insurance (Include IRA's and Keough Plans) -- employees	
23	Other Payroll Fringes	
24	Total Payroll Fringes	58,642

Attachment

<b>OPERATING SUPPLIES AND EXPENSES</b>		
25	Fuel, Including Fuel Tax	
26	Oil and Lubricants	31,289
27	Repairs, Vehicle Parts and Outside Maintenance	
28	Tires and Tubes	35,237
29	Other Operating Supplies and Expenses	8,495
30	Total Operating Supplies & Expenses	97,444
<b>GENERAL SUPPLIES AND EXPENSES</b>		
31	Office Supplies, postage, etc.	34,979
32	Tariffs (WUTC/ICC/PUC, ETC.), Advertising (Yellow Pgs, ETC.) and Dues (Assoc. , ETC.)	18,495
33	Sales Commissions	24,755
34	Expense Accounts -- Officers and Supervisory Personnel (Travel, Meals, etc.)	36,880
35	Other General Supplies and Office Expenses	57,441
36	Total General Supplies & Expenses	172,550

<b>OPERATING TAXES AND LICENSES</b>		
37	State Revenue Taxes (e.g., Washington B & O, Ton-mile, etc.)	7,266
38	Vehicle Licenses and Registrations (Tonnage, Tolerance, Excise tax)	11,450
39	Federal Highway Use Tax	5,667
40	City, County, State Business Licenses	708
41	State Regulatory Fees (WUTC or PUC)	898
42	Real Estate and Personal Property Taxes	10,129
43	Other Taxes and Licenses	30,807
44	Total Operating Taxes & Licenses	66,925
<b>INSURANCE AND SAFETY</b>		
45	Public Liability and Property Damage Insurance	42,719
46	Cargo Loss and Damage Insurance and Claims Payments	21,927
47	Other Insurance (Theft, Glass, Structures and Buildings, etc.) & safety	8,064
48	Total Insurance and Safety	72,710
<b>COMMUNICATIONS &amp; UTILITIES</b>		
49	Communications Expense (Telephone, Radio, etc.)	24,064
50	Utilities (Heat, Light, Power, Water, Sewer, Garbage, etc.)	10,721
51	Other Communications and Utilities Expenses	
52	Total Communications & Utilities	34,785

Attachment

**DEPRECIATION AND AMORTIZATION**

53	Building and Structures (Terminal, Shop, etc.)	
54	Revenue Equipment (Trucks, Power Units, etc.)	
55	Other Carrier Property	
56	Leasehold Improvements	
57	Amortization	
58	Other Depreciation and Amortization	14,447
59	Total Depreciation & Amortization	54,722
		69,169

**OPERATING RENTS**

60	Equipment Rents and Purchased (Leased) Transportation -- Net	3,579
61	Building Rents	90,328
62	Computer and Office Equipment Rents	16,320
63	Other Rents	
64	Total Operating Rents	
65	(GAIN) OR LOSS ON DISPOSITION OF OPERATING ASSETS	110,227

**MISCELLANEOUS EXPENSES**

66	Legal Services	2,720
67	Accounting Services	23,671
68	Uncollectible Revenue	
69	Other Miscellaneous Expenses & Professional Fees	14,001
70	Total Miscellaneous Expenses	40,392

71	TOTAL OPERATING EXPENSES GRAND TOTAL (Total of Lines 11, 17, 24, 30, 36, 44, 48, 52, 59, 64, 65, 70)	1,847,284
72	NET CARRIER OPERATING INCOME (line 4 minus Line 71)	156,550
73	Other Income (Credit) (describe) <b>MISC 4,454      INTEREST 194</b>	4,648
74	Interest Expense	(16,481)
75	Corporate Income Tax	(12,838)
76	Other Deductions (describe) <b>LOSS ON OBSOLETE EQUIP.</b>	(11,394)
77	Income Deductions (Total of lines 74, 75, & 76 minus line 73)	(36,065)
78	NET INCOME (line 72 minus line 77) (Show loss in brackets)	120,485