

TV-001820  
Fax 14 pages

WASHINGTON



RECEIVED  
NOV 27 2006  
HOUSEHOLD GOODS CARRIER PERMIT APPLICATION  
WASH. UT. & TP. COMM.



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     Mastercard     Visa    Auth # M 028957

Expiration Date: 04 / 08      Amount: \$ 550

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): Stanley Watkins      Date: Dec 11/27/2006  
 Signature: Stanley Watkins      Title: owner

**FOR OFFICIAL USE ONLY**

Date Filed: <u>12/7/06</u>	Application # <u>P-79425</u>	Motcar: <u>44788</u>	Permit Issued: HG- <u>62626</u>
Staff Assigned: <u>[Signature]</u>	Insurance: <u>0003183</u>	Inspection:	DOL/SOS: <u>[Signature]</u>
Reception #: <u>111-0268-207-02</u>	<u>550.00</u>	111-0268-202-01	111-0268-013-20

12/07/2006 17:05 FAX 3605061101

LICENSING SERVICES

001/000

**BUSINESS INFORMATION**

Name of Applicant TLC Transitions, LLC  
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable Worry-free Moving

Physical Address 10709 NE 144<sup>th</sup> Ct, Bothell, WA

Mailing Address (same) 98011

Telephone Number ( 425 ) 822-6873 Fax Number ( ) same

URI # 602-300-782 Email: Stan@tlctransitions

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**TYPE OF BUSINESS STRUCTURE**

Individual     Partnership     Corporation     Other LLC  
(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>Stanley Watkins</u>	<u>member</u>	<u>50%</u>
<u>Mary Watkins</u>	<u>member</u>	<u>50%</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 a comprehensive solution for downsizing moves in conjunction with TLC Transitions, our other trade name, which provides move management services with an emphasis on the needs of seniors

Briefly describe your experience in the transportation/household goods moving industry: we have had a move management service focussed on the needs of people downsizing, we have referred moving needs to a licensed mover,

*Refused*

**BUSINESS INFORMATION**

Name of Applicant Stan Watkins  
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable TLC Transitions

Physical Address 10709 NE 144<sup>th</sup> Ct., Bothell, WA 98011

Mailing Address (same)

Telephone Number (425) 822-6373 Fax Number (425) 216-3576

UBI # 602-300-782 Email: stan@tlectransitions

**TYPE OF BUSINESS STRUCTURE**

- Individual
- Partnership
- Corporation
- Other LLC  
(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>Stanley Watkins</u>	<u>Member</u>	<u>50%</u>
<u>Mary Watkins</u>	<u>Member</u>	<u>50%</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 a comprehensive solution for downsizing moves including sorting and consultation re. downsizing, packing, moving, unpacking and organizing new home, estate sales, dispersal of unwanted items

Briefly describe your experience in the transportation/household goods moving industry: we have had a downsizing service for 3 years, offering sorting, packing, unpacking & organizing new home estate sales and dispersal of unwanted items. We have referred moving needs to a licensed mover.

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 <i>see attached</i>			
You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available			
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>	\$

### 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
	will use	related equipment		

### 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: Stan Watkins 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: Stan Watkins 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: Stan Watkins Position: owner

**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: Stan Watkins Position: owner

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: Stan Watkins 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: Stan Watkins 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: Stan Watkins Position: owner

**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: Stan Watkins

Position: 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: Stan Watkins

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.

Stanley Watkins

Print name of applicant

Stanley Watkins

Signature of Applicant

Sept 15, 2006  
Bozelli, Washington

Date & Place

SW

~~Dec~~ Nov. 27, 2006

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11/27/06

Accrual Basis

**TLC Transitions**  
**Balance Sheet**  
 As of November 27, 2006

	Nov 27, 06
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
1110 · Bank of America Checking	113.82
1120 · Bank of America Savings	231.48
1130 · Petty Cash	11.90
<b>Total Checking/Savings</b>	357.20
<b>Accounts Receivable</b>	
1200 · Accounts Receivable	760.97
<b>Total Accounts Receivable</b>	760.97
<b>Other Current Assets</b>	
1320 · Inventory Asset	795.90
<b>Total Other Current Assets</b>	795.90
<b>Total Current Assets</b>	1,914.07
<b>Fixed Assets</b>	
1420 · Ford Pickup	
1421 · Original Cost	7,673.54
1422 · Depreciation	-26.00
<b>Total 1420 · Ford Pickup</b>	7,647.54
<b>Total Fixed Assets</b>	7,647.54
<b>TOTAL ASSETS</b>	9,561.61
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Accounts Payable</b>	
2000 · Accounts Payable	895.08
<b>Total Accounts Payable</b>	895.08
<b>Credit Cards</b>	
2020 · American Express	572.50
2030 · Advanta Credit Card	11,578.75
2040 · Bank of America Line of Credit	2,876.64
<b>Total Credit Cards</b>	15,027.89
<b>Other Current Liabilities</b>	
2100 · Payroll Liabilities	
2110 · Federal Taxes (941)	260.61
2120 · Federal Unemployment (940)	71.98
2130 · WA Unemployment	10.53
2140 · WA Worker's Compensation	64.91
<b>Total 2100 · Payroll Liabilities</b>	408.03
<b>Total Other Current Liabilities</b>	408.03
<b>Total Current Liabilities</b>	16,331.00
<b>Long Term Liabilities</b>	
2210 · Ford Ranger Loan	5,358.36
<b>Total Long Term Liabilities</b>	5,358.36
<b>Total Liabilities</b>	21,689.36
<b>Equity</b>	
3100 · Opening Bal Equity	9.49
3200 · Retained Earnings	21,293.86

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Accrual Basis

**TLC Transitions**  
**Balance Sheet**  
As of November 27, 2006

	<u>Nov 27, 06</u>
3300 · Partners Equity	
3310 · Partners Draws	-34,596.91
3320 · Partners Investments	-1,815.22
Total 3300 · Partners Equity	<u>-36,412.13</u>
Net Income	<u>2,981.03</u>
Total Equity	<u>-12,127.75</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b><u>9,561.61</u></b>



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11/27/06

Accrual Basis

**TLC Transitions**  
**Profit & Loss**  
 January 1 through November 27, 2006

	Jan 1 - Nov 27, 06
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
4200 · Referral Income (520)	3,272.03
4350 · Markup	65.86
4500 · Packing Material Income	
4560 · Use of packing materials (517)	2,204.70
4550 · Sale of Packing Material (531)	1,316.90
<b>Total 4500 · Packing Material Income</b>	<b>3,521.60</b>
4600 · Item Sales	
4620 · Estate Sale Service	900.00
4630 · Commission Sales Revenue	0.00
4640 · Commission sales admin. fee	17.70
<b>Total 4600 · Item Sales</b>	<b>917.70</b>
4700 · Services	
4711 · Move Coordination (511)	2,680.00
4712 · Packing (512)	14,412.50
4713 · Moving (513)	3,318.80
4714 · Resettling (514)	10,385.00
4715 · Final Touches (515)	191.25
4780 · Travel	2,825.00
4790 · Van Use	1,470.00
<b>Total 4700 · Services</b>	<b>35,282.55</b>
4800 · Discounts	-1,994.90
4999 · Uncategorized Income	151.13
<b>Total Income</b>	<b>41,215.97</b>
<b>Cost of Goods Sold</b>	
5000 · Cost of Goods Sold	
5500 · Packing Material Purchase	608.22
5000 · Cost of Goods Sold - Other	684.84
<b>Total 5000 · Cost of Goods Sold</b>	<b>1,293.06</b>
<b>Total COGS</b>	<b>1,293.06</b>
<b>Gross Profit</b>	<b>39,922.91</b>
<b>Expense</b>	
6100 · Cost of Jobs	
6110 · Outside Moving Services (617)	1,586.21
6120 · Wages	9,035.19
6122 · Contract Labor	434.00
6125 · Employee expense reimbursement	366.25
6130 · Payroll Tax Expense	1,302.18
6160 · Reimbursable Expense	7.22
6170 · Non-reimbursable Expense	39.85
<b>Total 6100 · Cost of Jobs</b>	<b>12,770.90</b>
6200 · Business development	
6210 · Advertising (605)	2,904.46
6220 · Recruiting	50.00
6230 · Professional Development	293.86
6240 · Dues and Subscriptions	60.00
6270 · Marketing literature	307.00
6280 · Marketing professionals	2,149.00
<b>Total 6200 · Business development</b>	<b>5,764.32</b>

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Accrual Basis

**TLC Transitions**  
**Profit & Loss**  
 January 1 through November 27, 2006

	Jan 1 - Nov 27, 06
<b>6300 · Office Expenses (630)</b>	
6320 · Office Supplies	834.82
6340 · Telephone, Mobile, Internet	4,092.95
6350 · Postage and Delivery	131.30
6360 · Printing and Reproduction	53.35
6390 · Computer Software	318.67
<b>Total 6300 · Office Expenses (630)</b>	5,431.09
<b>6400 · Vehicle Expense (620)</b>	
6410 · Dodge Caravan	
6411 · Fuel Dodge	72.79
<b>Total 6410 · Dodge Caravan</b>	72.79
6450 · Ford van	
6451 · Fuel Ford Van	94.82
6452 · Maintenance Ford Van	61.14
6453 · License Ford Van	4.00
6454 · Ford Van Insurance	302.70
<b>Total 6450 · Ford van</b>	462.66
6460 · Ford Ranger Pickup	
6461 · Fuel Ford Pickup	1,067.58
6462 · Maintenance Ford Pickup	551.30
6463 · License Ford Ranger	64.00
6464 · Ford Ranger Insurance	1,319.10
<b>Total 6460 · Ford Ranger Pickup</b>	3,001.98
6490 · Rental Vehicle	
6492 · Fuel	113.97
6491 · Rental Charges	1,102.52
<b>Total 6490 · Rental Vehicle</b>	1,216.49
<b>Total 6400 · Vehicle Expense (620)</b>	4,753.92
<b>6510 · Insurance</b>	
6511 · Liability Insurance	834.42
6514 · Bonding	100.00
6516 · Cargo Insurance	877.60
6515 · Vehicle Insurance	562.94
<b>Total 6510 · Insurance</b>	2,374.96
<b>6520 · Professional Fees</b>	
6522 · Accounting	139.89
<b>Total 6520 · Professional Fees</b>	139.89
<b>6610 · Travel, Meals, Ent., Gifts</b>	
6612 · Meals	205.00
6613 · Travel	492.58
6616 · Parking	1.50
<b>Total 6610 · Travel, Meals, Ent., Gifts</b>	699.08
<b>6700 · Taxes, licenses, permits</b>	
6720 · State B & O Tax	607.55
6750 · Licenses and Permits	59.00
<b>Total 6700 · Taxes, licenses, permits</b>	666.55
<b>6800 · Financing Expense</b>	
6810 · Interest Expense (603)	
6811 · Finance Charge	461.34
6812 · Loan Interest	474.45
<b>Total 6810 · Interest Expense (603)</b>	935.79
6840 · Bank Service Charges	252.71
6860 · Credit Card Commission and Fees	308.46
<b>Total 6800 · Financing Expense</b>	1,496.96

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11/27/06

Accrual Basis

**TLC Transitions**  
**Profit & Loss**  
 January 1 through November 27, 2006

	Jan 1 - Nov 27, 06
6910 · Contributions	20.00
6930 · Bad Debts/Write Off	44.75
6999 · Miscellaneous	153.27
<b>Total Expense</b>	<b>34,315.69</b>
<b>Net Ordinary Income</b>	5,607.22
<b>Other Income/Expense</b>	
<b>Other Income</b>	
7010 · Interest Income (551)	0.67
7020 · Other Income (517)	
7022 · NASMM reimbursements	874.33
7020 · Other Income (517) - Other	-2,428.05
<b>Total 7020 · Other Income (517)</b>	<b>-1,553.72</b>
<b>Total Other Income</b>	-1,553.05
<b>Other Expense</b>	
8010 · Other Expenses	
8011 · NASMM Expense	1,073.14
<b>Total 8010 · Other Expenses</b>	<b>1,073.14</b>
<b>Total Other Expense</b>	1,073.14
<b>Net Other Income</b>	<b>-2,626.19</b>
<b>Net Income</b>	<b>2,981.03</b>

**ATTACHMENT A**

**HOUSEHOLD GOODS STATEMENT OF SUPPORT**

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name: Stan Watkins TLC Transitions

**The following must be completed by the Supporter of the applicant**

Name, Title, and Business Name:

Vineyard Park at Bothell Landing  
Address (include street address, mailing address, city, state, zip, and county):

10519 E Riverside Dr  
Bothell, WA 98011

Phone Number:

425.485.8900 x 11

Do you currently need the services of a residential household goods moving company?

No  Yes If yes, please describe your current moving needs:

Mover who can help w/ packing, unpacking  
& special care w/ regards to the elderly.

Do you anticipate a future need for the services of a residential household goods moving company?

No  Yes If yes, please describe your future moving needs:

We always need someone who can "do it All"  
& not just refer to others for services offered

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:

the "x" factor in knowing Seniors. Being A helpful  
mover is key & having patience.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?

most companies would  
not bother taking the time. TLC is really  
wonderful - they want to bother + do the hard work

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

[Signature]  
Signature of Person Completing Form

9/14/06 Vineyard  
Date and Location Park

**ATTACHMENT A**

**HOUSEHOLD GOODS STATEMENT OF SUPPORT**

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name: TLC Transitions, LLC

**The following must be completed by the Supporter of the applicant**

Name, Title, and Business Name: Glenn Reph, Executive Pastor, Northshore Baptist Church

Address (include street address, mailing address, city, state, zip, and county):  
10301 NE 145th St  
Bothell, WA 98011

Phone Number: 425 821-5252 x 4444

Do you currently need the services of a residential household goods moving company?  
 No  Yes If yes, please describe your current moving needs:  
We have many staff people moving in and out of our area  
We have two immediately.

Do you anticipate a future need for the services of a residential household goods moving company?  
 No  Yes If yes, please describe your future moving needs:  
Multiple congregants requiring help.

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:  
They provide a level of service not available anywhere else!

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?  
Nothing else

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Pastor Glenn Reph  
Signature of Person Completing Form

9/10/06 Bothell, WA  
Date and Location

## ATTACHMENT A

### HOUSEHOLD GOODS STATEMENT OF SUPPORT

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name:

TLC TRANSITIONS, LLC

#### The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Kellie Moeller, MADISON HOUSE RETIREMENT, MKTG. DIRECTOR

Address (include street address, mailing address, city, state, zip, and county):

12215 NE 128th ST  
KIRKLAND, WA  
98034  
~~WASH~~ KING

Phone Number:

425-821-8210

Do you currently need the services of a residential household goods moving company?

No  Yes If yes, please describe your current moving needs:

WE HAVE 147 APTS IN WHICH WE ~~WANT~~ RECOMMEND MOVING SERVICES

Do you anticipate a future need for the services of a residential household goods moving company?

No  Yes If yes, please describe your future moving needs:

WE WILL ALWAYS NEED GOOD MOVERS WHO SPECIALIZE IN SERVICES TO SENIORS

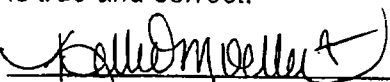
Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:

I HAVE USED THEIR SERVICES FREQUENTLY AND APPRECIATE THEIR INTEGRITY & COMMITMENT TO CUSTOMER SERVICE

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?

THEIR EXCELLENT TRACK RECORD

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

  
Signature of Person Completing Form

9/7/06 Kirkland, WA.  
Date and Location