ATTACHMENT B

Transfer or Acquisition of Control

Applicant is seeking one of the following - please check I Transfer	cone:
•	LLC.
Banwar Transfer Current Name on Permit (Seller) Banwar Transfer	
Current Trade Name on Permit (Seller)	W. TUKUNU, WA 98188.
Address (Seller) HG- 6743	(206) 8/2-22/8
Permit Number	Phone Number (Seller)
Does the transfer of this permit fall under the provision complete Attachment C.	ns of WAC 480-15-260? □ No XYes If yes, please
Have all fines or penalties owed to the commission be	en paid? □ No XYes
Has the closing annual report been filed with the comm	nission? No XYes
A customer may file a loss or damage claim for up to damage lawsuit for up to two years following a move. customers for loss or damage that occurred on moves	nine months following a move and may file a loss or . Who will be responsible for handling claims filed by taking place prior to the sale and transfer or acquisition?
	OF AUTHORITY
I, the seller, have sold or otherwise released interest in following:	n my household goods permit number HG-607418 the
Abner Banwer, Brooks &	Banwer,
Name of Buyer SAV Sun Inc DB	A BANWERTNAMSFER,
Trade Name of Buyer	
We, as offplicants, hereby jointly declare and affirm	that all information is true to the best of our knowledge. [26-07 — Seattle, A.]
Seller's Signature	Date and Location
(Musteur puntner	12-7-07 Date and Location
Buyer's Signature	Mana with man-man

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HOUSEHOLD GOODS CARRIERS

ANNUAL REPORTLOSING REPO

BanwerTrans Correct name and address, if different than shown Full name and address of Company

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION YEAR ENDED DECEMBER 31

Inquiries concerning this Annual Report should be addressed to:

NAME Shirer	Banuser		TITLE: /	Nanagin	, member.
NAME: Abres S ADDRESS: 21230 CITY: DESVIO TELEPHONE 200	45 Pl. SO.				
CITY: DESMO	inos,	STATE:	WA.	_zip: 98	198.
TELEPHONE 200	0)571-0117.F	AX:		E-MAIL:	•
The company must notify the C	ommission, in wri	ting, of any	changes	to the abo	ve information.
YPE OF PAYMENT - DO NOT SEND CASH I	N THE MAIL			For Comm	ission Use Only
Check Money OrderAMEX	Visa MasterCard		Credit Care	d Authorization	#:
redit Card Number: tonth/Year		Expiration	n Date		
Ondividual			_		68.224
ERTIFICATION: I, the undersigned, under per xecute on behalf of the applicant; and that I a	enalty for false statement, or gree to pay the above total	ertify that the in amount accord	formation is tri ing to card iss	ue, valid and cor uer agreement.	rect, that I am authorized to
Name (Printed):		_	Title:		
signature:			Date:		
		ımişşion Üse Or			
Reception Number	001-111-02-68-207-11:			_ Ref. No	:
001-111-02-68-207-01:					

1

Web Site: www.wutc.wa.gov

CERTIFICATION	
I certify that I,	d the to each

SCHEDULE 1

Washington Unified Business Identifier (UBI) No.: 007 707 103

(If you do not know your UBI No. please contact the Department of Licensing at 360-664-1400)

SMALL BUSINESS No Yes Small Business means any business entity, including a sole proprietorship, corporation, partnership, or other legal entity, owned and operated independently from all other businesses, that has the				
purpose of making a profit, and has <u>fifty or fewer employees</u> .				
TYPE OF MOTOR CARRIER Individual Partnership Corporation, Other (LP, LLP, LLC) etc.) List the name, title, and percentage of partner's share or stock distribution for major stockholders. If LLC, list members and percentage of ownership. Name: Procent/Shares/Stock/Ownership: Percent/Shares/Stock/Ownership: Title: Percent/Shares/Stock/Ownership: Title: Percent/Shares/Stock/Ownership: Title: Percent/Shares/Stock/Ownership: Percent/Shares/Stock/Ownership: Title: Percent/Shares/Stock/Ownership: Percent/Share				
Safety Director Name:	Telephone Number:			
Claims Manager Name:	Telephone Number:			
Drivers employed during the year:				
Total vehicles operated during the year:	-			
Total Vehicles Owned: Total	Vehicles Leased:			
Total Vehicles Under 10,000 lbs (gvw rating):				
Did you have any Recordable Ac cidents in 2006?	Yes 🗡 No			
If yes, how many recordable accidents?	tate and intrastate operations)			
Recordable Accident Definition: An occurrence involving a commercial motor vehicle on a public road in intrastate or interstate commerce which results in one or more of the following:				
 A fatality, Injury to a person requiring immediate treatment away from the scene of the accident, or disabling damage to a vehicle requiring it to be towed fr om the accident scene. 				
TERMINAL FACILITIES				
Do you operate terminals at locations other than the primary address of record? Yes No If yes, list (or attach a list) the address of each terminal located in Washington State:				
STORAGE FACILITIES				
Do you operate your own storage facilities? Yes No If yes, list (or attach a list) the address of each warehouse located in W ashington State:				

INTERSTATE OPERATIONS
Do you have interstate operating authority? Ares No If yes, what is your MC#: 442973 and DOT#: 1293041
Do you operate as the agent of an interstate carrier? Yes No If yes, what is the name of the carrier?
HOUSEHOLD GOODS MOVES
Total number of household go ods moves completed during the year:
Number of household goods moves completed in Washington (intrastate):
Total number of written estimates issued during the year:
Number of written estimates in Washington (intrastate):
Total number of Loss and/or Damage Claims received during the year:
Number of Loss and/or Damage Claims for Washington (intrastate):
INSURANCE .
Public Liability and Property Damage Insurance Company Name:
Policy Number:
CARGO INSURANCE
Cargo Insurance Company Name:
Cargo Insurance Policy Number:

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

Line No.	ltem	Total Amount
	OPERATING REVENUES	
1	Common Carrier (\$ Washington Intrastate Household Goods Revenue)	4
2	Contract Carrier (\$ Washington Intrastate Household Goods Revenue)	ΙΫ́
3	Other Operating Revenues (describe)	
· 4	Total Operating Revenues	
	OPERATING EXPENSES	<u></u>
	SALARIES AND WAGES	
5	Owners, Spouses, Officers or Partners	18-
6	Clerical and Administrative (e.g. billing, personnel, etc.)	1
7	Managerial/Supervisory (all not shown on line 5)	1-1
8	Drivers and Helpers	
9	Mechanics and Truck Service	
10	Other Employees	
11	Total Salaries and Wages	2
_	PAYROLL TAXES AND RELATED EXPENSES	·
12	Federal Social Security (FICA) Taxes (\$ Owners, Partners, Officers)	-60
13	Federal Unemployment Taxes (\$ Owners, Partners, Officers)	<u> </u>
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)	
17	Total Payroll Taxes and Related Expenses (\$ Owners, Partners, Officers)	Â
	PAYROLL FRINGES	
18	Health and Welfare (Medical Insurance) employees	1
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	A

	OPERATING SUPPLIES AND EXPENSES	···
25	Fuel, Including Fuel Tax	A
26	Oil and Lubricants	
27	Repairs, Vehicle Parts and Outside Maintenance	
28	Tires and Tubes	
29	Other Operating Supplies and Expenses	
30	Total Operating Supplies & Expenses	
'	GENERAL SUPPLIES AND EXPENSES	
31	Office Supplies, postage, etc.	
32	Tariffs (WUTC/ICC/PUC, ETC.), Advertising (Yellow Pgs, ETC.) and Dues (Assoc., ETC.)	
33 .	Sales Commissions	
34	Expense Accounts Officers and Supervisory Personnel (Travel, Meals, etc.)	
35	Other General Supplies and Office Expenses	
36	Total General Supplies & Expenses	20

	OPERATING TAXES AND LICENSES	
37	State Revenue Taxes (e.g., Washington B & O, Ton-mile, etc.)	I A
38	Vehicle Licenses and Registrations (Tonnage, Tolerance, Excise tax)	
39	Federal Highway Use Tax	
40	City, County, State Business Licenses	
41	State Regulatory Fees (WUT C or PUC)	
42	Real Estate and Personal Property Taxes	
43	Other Taxes and Licenses	10
44	Total Operating Taxes & Licenses	-0
	INSURANCE AND SAFETY	
45	Public Liability and Property Damage Insurance	-0
46	Cargo Loss and Damage Insurance and Claim s Payments	
47	Other Insurance (Theft, Glass, Structures and Buildings, etc.) & safety	
48	Total Insurance and Safety	0
	COMMUNICATIONS & UTILITIES	
49	Communications Expense (Telephone, Radio, etc.)	9
50	Utilities (Heat, Light, Power, Water, Sewer, Garb age, etc.)	
51	Other Communications and Utilities Expenses	
52	Total Communications & Utilities	6
	A CONTRACTOR OF THE CONTRACTOR	

	DEPRECIATION AND AMORTIZATION	
53	Building and Structures (Terminal, Shop, etc.)	A
54	Revenue Equipment (Trucks, Power Units, etc.)	
55	Other Carrier Property	
56	Leasehold Improvements	
57	Amortization	
58	Other Depreciation and Amortization	1
59	Total Depreciation & Amortization	8
•	OPERATING RENTS	
60	Equipment Rents and Purchased (Leased) Transportation - Net	A
61	Building Rents	
62	Computer and Office Equipment Rents	
63	Other Rents	
64	Total Operating Rents	A
65	(GAIN) OR LOSS ON DISPOSITION OF OPERATING ASSETS	10
	MISCELLANEOUS EXPENSES	
66	Legal Services	18
67	Accounting Services	
68	Uncollectible Revenue	
69	Other Miscellaneous Expenses & Professional Fees	
70	Total Miscellaneous Expenses	8
71	TOTAL OPERATING EXPENSES GRAND TOTAL (Total of Lines 11, 17, 24, 30, 36, 44, 48, 52, 59, 64, 65, 70)	20
72	NET CARRIER OPERATING INCOME (line 4 minus Line 71)	
73.	Other Income (Credit) (describe)	
74	Interest Expense	
75	Corporate Income Tax	
76	Other Deductions (describe)	11
77	Income Deductions (Total of lines 74, 75, & 76 minus line 73)	
78	NET INCOME (line 72 minus line 77) (Show loss in brackets)	IA

REGULATORY FEE CALCULATION SCHEDULE

closing Aport. 2007

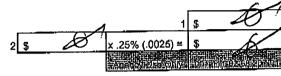
Company Name	Banwer	transfa	llc
Company warre_			

Annual Report Year 2006

In accordance with RCW 81.24.010 and 81.80.321 "Regulatory Fees", the Commission requires Household Goods companies to file reports of gross intrastate operating revenue and pay fees on that revenue. Every company subject to regulation shall file with the Commission a statement under oath showing its gross intrastate operating revenue from operations for the preceding year and pay to the Commission a fee as instructed below. There is no minimum fee.

All Washington intrastate carriers of Household Goods must complete and file this report. If you did not have revenue from the intrastate transportation of Household Goods indicate "0" on line 1

- 1 Total Gross Intrastate Operating Revenue **
- 2 Total Regulatory Fees owed (enter amount from line 1)



Complete Lines 3 through 6 if filing after May 1

- 3 Penalties on Regulatory Fees filed after May 1
- 3a Total Penalties on Regulatory Fees owed enter amount from line 2
- 4 Interest on Regulatory Fees filed after May 1
- 4a Amount from line 2 ______ x Number of months past May _____
- 5 Total Penalties and Interest owed (add lines 3a and 4a)

	<u>/</u>	3	
3a \$	x 2 % (.02) =	\$	26
,		4	
x 1% (.01) =	4:	a \$	B
.		5 \$	D

6 \$

⁶ Total Regulatory, Penalty and Interest Fees Due (add lines 2 and 5)

^{**} Note: Gross Washington intrastate operating revenue is defined as all revenue collected for the year from rates under Washington Utilities and Transportation Commission Tariffs 15A and 16B. The revenues subject to the Commission's regulatory fees are gross Washington intrastate operating revenues before deductions for uncollectables, unbillables or the payment of state and federal taxes, i.e. "Gross Revenues" means before any deductions from Revenue Receipts.