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HOUSEHOLD GOODS MOVING COMPANY
PERMIT APPLICATION

Table with 4 columns: Date Filed, DOL/SOS, ID, Docket #; Staff Assigned, Insurance, Inspection, Permit Issued THG-; Reception #, 111-0268-20702, 111-0268-013-20. Includes handwritten entries like 12/1/15, 49254, and #041566.

Type of Household Goods Authority Requested - check one Fee Required

- Provisional and permanent authority. The fee for provisional, and then permanent authority is a one-time fee. Complete pages 3-8 and Attachment A. \$ 550
Permanent authority to transfer resulting in a change in ownership or controlling interest (at least six months must be served on a temporary provisional basis). Complete pages 3-8 and Attachment B. \$ 550
Permanent authority to transfer under the exceptions in WAC 480-15-187. Complete pages 3-8 and Attachments B & C. \$ 250
Reinstatement of permit (must be filed within 30 days of cancellation, depending on criteria set forth in WAC 480-15-450). Complete pages 3-4 and include a statement justifying the reinstatement. \$ 250
Name Change - Complete pages 3-4 and Attachment D. \$ 35

BUSINESS INFORMATION

Legal Name: Corporate Moving Systems, Inc. (must be individual, partners of a partnership or corporation)

Trade Name, if applicable CMS Relocation & Logistics

Physical Address 211020 88th Pl S, Kent WA 98031

Mailing Address

Telephone Number (253) 395-5432 Fax Number (253) 437-3947

ATTACHMENT D

**CHANGE OF CORPORATE/INDIVIDUAL NAME
(WAC 480-15-400)**

This application is for name change only and must not involve a change in ownership, management, or control of the household goods operating authority.

A company must file a name change application to:

- Change a corporation's name
- Change an individual's name
(may be sole proprietor or individual in a partnership)
- Change or add a trade name

NOTE: You may not advertise to operate under the changed name until a permit is issued in the new name.

Current Name on Permit: Corporate Moving & Storage Inc.

Current Trade Name, d/b/a: _____

Address: 21620 88th Pl S., Kent WA 98031

Phone Number: 253-395-5432 Fax Number: 253-437-3947

Email Address: hlevinson@moovers.com USDOT #: 505087

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

Rick Smith, owner

I request the name on household goods permit HG- 045867 be changed to:

New Name: _____

New Trade Name, d/b/a (if applicable): CHS Relocation & Logistics

Address (if changed) _____

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

I certify that this information is true and correct, that I am authorized to execute and file this document on behalf of the applicant and that all information is current and valid.

Jami Levinson Controller 3/20/15 Kent WA
Signature and Title of Applicant Date and Location

02E271A01115001

CORPORATE MOVING SYSTEMS, INC.
CMS RELOCATION & LOGISTICS
21620 88TH PL S
KENT WA 98031-1924

001116

DETACH BEFORE POSTING



STATE OF
WASHINGTON

BUSINESS LICENSE

Domestic Profit Corporation

Unified Business ID #: 601 026 643
Business ID #: 1
Location: 2

CORPORATE MOVING SYSTEMS, INC.
CMS RELOCATION & LOGISTICS
21620 88TH PL S
KENT WA 98031 1924

TAX REGISTRATION

REGISTERED TRADE NAMES:
CMS RELOCATION & LOGISTICS

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue