



UTILITIES AND TRANSPORTATION  
COMMISSION

1300 S. Evergreen Park Drive SW  
P.O. Box 47250  
Olympia, WA 98504-7250  
Phone: 360-664-1222  
Fax: 360-586-1181  
TTY: 360-586-8203  
or  
1-800-416-5289  
email: transportation@utc.wa.gov

**HOUSEHOLD GOODS MOVING COMPANY  
PERMIT APPLICATION**

# 016474

FOR OFFICIAL USE ONLY			
Date Filed: 7/10/15	DOL/SOS: [Signature]	ID: 5926	Docket #-
Staff Assigned: [Signature]	Insurance: [Signature]	Inspection	Permit Issued THG: [Signature]
Reception #	111-0268-207-02	111-0268-013-20	HCY 64060

**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 rules set forth in WAC 480-15-450). Complete pages 3-5 and include a statement justifying the reinstatement. \$ 250
- Name Change – Complete pages 3-5 and Attachment D. \$ 35

**BUSINESS INFORMATION**

Legal Name: PMC MOVING LLC  
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable \_\_\_\_\_

Physical Address 14928 19TH AVE W, LYNNWOOD, WA 98087

Mailing Address \_\_\_\_\_

Telephone Number (206) 446-3009 Fax Number ( ) \_\_\_\_\_

RECEIVED

JUL 15 2015

WHITFIELD'S

## Amber Gargan

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**From:** Montine Haynes <montine-haynes@leavitt.com> on behalf of Leavitt Group Commercial Lines <clc-mail@leavitt.com>  
**Sent:** Thursday, July 16, 2015 7:10 AM  
**To:** Amber Gargan  
**Subject:** RE: CTO1396062 PMC MOVING LLC  
**Attachments:** PMC Moving Permit Application.pdf

Please see the attached from the Insured. Thank you. If you could let me know when this is fixed I would appreciate it.



Leavitt Group Northwest

**Montine Haynes**  
*Customer Agent*

3425 Broadway | Everett, WA 98201  
Phone: 866.298.0570 | Fax: 866.688.5709 | [clcnorthwest@leavitt.com](mailto:clcnorthwest@leavitt.com)

**Policy deliverance will be in electronic format. Our focus is to ensure we are servicing your business in the most effective and efficient manner as possible, and this new streamlined process will enable the prompt delivery of policies. In addition, this procedural change will support our mutual efforts to sustain the environment.**

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**From:** Amber Gargan [<mailto:agargan@gsusuperior.com>]  
**Sent:** Monday, July 13, 2015 9:23 AM  
**To:** Montine Haynes  
**Subject:** CTO1396062 PMC MOVING LLC

Hi Montine-

I am working with the UTC to finish the filings reinstatement for the above stated insured. We are paying for the fee as it was an oversight on our end, we will however need the attached application completed and returned to me so that I can get it up to the UTC to finish the reinstatement. If you could please help me out with this I would appreciate it! Thank you.

Amber Gargan  
Transportation Underwriter  
Superior Underwriters - Primex Ins Brokers #0748192 - GSU Insurance Services  
Divisions of GRONINGER & CO., INC.  
PO Box 97024, Redmond, WA 98073 - (425)-643-5200 x-4219  
[agargan@gsusuperior.com](mailto:agargan@gsusuperior.com) [www.superiorunderwriters.com](http://www.superiorunderwriters.com)

\*\*\*\*\*PLEASE NOTE\*\*\*\*\*

This email message and any documents accompanying this transmission may contain privileged and/or confidential information and is intended solely for the addressee(s) named above. If you are not the intended addressee/recipient, you are hereby notified that any use of, disclosure, copying, distribution, or reliance on the

Form E  
**UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY  
DAMAGE LIABILITY CERTIFICATE OF INSURANCE**  
(Executed in Triplicate)

\$0  
\$0

REINSTATE

Filed with WA Utilities & Trans. Comm. (hereinafter called Commission)  
(Name of Commission)

This is to certify, that the National Casualty Company  
(Name of Company)  
(hereinafter called Company) of 8877 N. Gainey Center Drive, Scottsdale, AZ 85258  
(Home Office Address of Company)

has issued to PMC MOVING LLC of 14928 19TH AVE W, LYNNWOOD, WA 98087  
(Name of Motor Carrier) (Address of Motor Carrier)

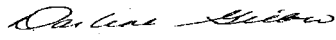
a policy or policies of insurance effective from June 26, 2015 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 8877 N. Gainey Center Drive Scottsdale AZ 85258  
(Street Address) (City) (State) (Zip Code)

this 07 day of July 2015

Insurance Company File No. CTO1396062  
(Policy Number)   
(Authorized Company Representative)

**FORM K  
UNIFORM NOTICE OF CANCELLATION OF  
MOTOR CARRIER INSURANCE POLICIES**

Check Type Cancelled:

BI and PD

Cargo

Garage

(hereinafter called Commission)

Filed with WA Utilities & Trans. Comm.

(Name of Commission)

This is to advise that under the terms of a policy or policies issued to:

PMC MOVING LLC

(Name of Motor Carrier)

of 14928 19TH AVE W, LYNNWOOD, WA 98087

(Address of Motor Carrier)

by National Casualty Company

(Name of Company)

of 8877 N. Gainey Center Drive, Scottsdale, AZ 85258

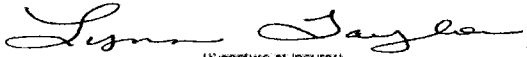
(Address)

said policy or policies, including any and all endorsements forming a part thereof or certificates issued in connection therewith, is (are)

hereby cancelled effective as of the 22 day of September, 2015, 12:01 A.M. standard time at the address of the Insured as stated in said policy or policies provided such date is not less than thirty (30) days after the actual receipt of this notice by the Commission.

Insurance Company File No. CTO1396062

(Policy Number)

  
(Signature of Insurer)