



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

#037811

HOUSEHOLD GOODS MOVING COMPANY
PERMIT APPLICATION

FOR OFFICIAL USE ONLY			
Date Filed: 7/1/16	DOL/SOS:	ID: 17388	Docket #
Staff Assigned	Insurance	Inspection	Permit Issued THG 6/21/30
Reception #	111-0268-207-02	111-0268-013-20	

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, Attachment B, and a closing annual report from current company \$ 550
- Permanent authority to transfer under the exceptions in WAC 480-15-187. Complete pages 3-8, Attachments B & C, and a closing annual report from current company \$ 250
- Reinstatement of permit (must be filed within 30 days of cancellation, depending on criteria set forth in WAC 480-15-450). Complete pages 3-5 and include a statement justifying the reinstatement. \$ 250
- Name Change – Complete pages 3-5 and Attachment D. \$ 35

BUSINESS INFORMATION

Legal Name: SAFE To Go Movers LLC.
(must be individual, partners or partnership or corporation)

Trade Name, if applicable: James & John Movers.

Physical Address: 8012 153rd St. Ct. E. Puyallup WA. 98375.

Mailing Address: 8012 153rd St. Ct. E. Puyallup WA. 98375.

Telephone Number () 206.981.9367 Fax Number () _____

BUSINESS INFORMATION - continued

UBI #: 603 464 571 Email: Safetogomovers@gmail.com

USDOT #: 2634986 (If you currently don't have one, go online at www.fmcsca.dot.gov/online-registration to apply or call 360-596-3812 for assistance.)

Department of Labor & Industries Worker's Comp account # 557, 514 - 00

Employment Security Department registration number 000-163828-00-5

Is your business registered with the Department of Revenue? No Yes

TYPE OF BUSINESS STRUCTURE

Individual Partnership Corporation Other (LP, LLP, LLC) State of Incorporation _____

List the name, title and percentage of partner's share or stock distribution for major stockholders:

Name	Title	Stock Distribution or % of Shares
<u>James Mwanagi</u>	<u>General Manager/Owner</u>	<u>100%</u>

Must provide a copy of a valid driver's license or government-issued photo identification card for each person named in the application.

1. Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: loading, transportation and unloading of house hold goods - Reorganize customer's furniture & belongings. Would love to help families w/ their moving needs esp during peak seasons of summer & as needed.

2. Briefly describe your experience in the transportation/household goods moving industry: In total, I have 67 years in the moving industry. I have extensive experience in packing, giving estimates, loading & unloading, and filing paperwork. It's an industry I derive pleasure & satisfaction helping & serving families -

3. 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 _____

4. Have you ever applied for and been denied a permit to operate as a motor carrier of property in Washington? No Yes If yes, please explain _____

5. Do you currently operate interstate? No Yes If yes, please indicate your MC# _____

6. Do you operate interstate as an agent of another company? No Yes
If yes, what is the name of the company? _____

ATTACHMENT B

**Transfer of Household Goods Authority
Per WAC 480-15-187**

Current Name on Permit (Seller): Safe To Go Movers.
Current Trade Name on Permit (Seller): _____
Address (Seller): 8012 153rd St. Ct. E. Puyallup Wa. 98375.
HG Permit Number: THG 066130 Phone Number (Seller): 206-981-9367.

Does the transfer of this permit fall under the provisions of WAC-480-15-187(2) or (3)?
 No Yes If yes, please complete Attachment C.

Have all fines or penalties owed to the commission been paid? No Yes
Has the closing annual report been filed? Yes

Note: A company transferring operations must submit an annual report for that portion of the year in which the company operated.

A customer may file a loss or damage claim for up to nine months following a move and may file a loss or damage lawsuit for up to two years following a move. Who will be responsible for handling claims filed by customers for loss or damage that occurred on moves taking place prior to the sale and transfer? Safe To Go Movers LLC.

RELEASE OF AUTHORITY

I, the seller, have sold or otherwise released interest in my household goods permit number HG- 066130 to the following:

Name of Buyer: Safe-To-Go-Movers LLC.
Trade Name of Buyer: James & John Movers.

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

[Signature] (Safe To Go Movers) Jan. 2nd 2015 Puyallup. Wa.
Seller's Signature Date and Location

[Signature] (Safe To Go Movers LLC) Jan 2nd 2015 Puyallup. Wa.
Buyer's Signature Date and Location

ATTACHMENT C

**TRANSFER OF PERMANENT HOUSEHOLD GOODS AUTHORITY
UNDER EXCEPTIONS IN WAC 480-15-187(2) or (3)**

1. The commission will grant an application to transfer existing permanent authority, without requiring a provisional permit, 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 any 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 a spouse or to one or more remaining partners;
 - 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, the sole proprietor devised or bequeathed the company by will, and the applicant is seeking transfer of the permit in accordance with the bequest or devise set forth in the will.
 - 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.

Documentation supporting the checked box above must be included with your application. You may submit 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 requiring a provisional permit after the application has been published on the application docket subject to comment for thirty days if the applicant is fit, willing, and able to provide service, the applicant has filed to transfer control of permanent authority, and all the following conditions exist:
- Ownership 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 twelve-month period prior to the application? No Yes
 - b. Provide a certified statement from the applicant and the current owner explaining why the transfer is necessary to ensure the company's economic viability:
 - c. Provide a certified statement from the applicant and the current owner describing the steps taken by the parties to ensure that safe operations and continuity of service to customers is maintained.

UNITED STATES OF AMERICA

The State of  Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF FORMATION

to

SAFE-TO-GO-MOVERS, LLC

a/an WA Limited Liability Company. Charter documents are effective on the date indicated below.

Date: 10/31/2015

UBI Number: 603-556-384



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 11/3/2015

Leipski, Tina (UTC)

From: Dotson, Michael (UTC)
Sent: Monday, January 04, 2016 10:36 AM
To: Leipski, Tina (UTC)
Subject: FW: HHG Transfer
Attachments: New Doc 28.pdf

From: James Mwangi [mailto:safetogomovers@gmail.com]
Sent: Monday, January 04, 2016 10:20 AM
To: Dotson, Michael (UTC) <mdotson@utc.wa.gov>; transportatio@utc.wa.gov
Subject: Tranfer Docs.

Hallo Mike,

I am hoping that you had a Merry Christmas as I wish you a very Happy New Year 2016. Here attached, I have managed to put the document for the transfer from the Sole Proprietor to an LLC as requested. Hope this helps solve this issue as I thank you for your patience with me and for the help. I look forward to talking to you when I get back in town early next week.

Sincerely,

James
Safe-To-Go Movers
Office: 253 447 0293
Cell: 206 981 9367
Email: james@safetogomovers.com
Website: www.safetogomovers.com

This is a "printer friendly" page. Please use the "print" option in your browser to print this screen.



Washington, State of - Utilities & Transportation Commission

Utilities & Transportation Commission POS

Confirmation Number: 037811
Payment Date: Monday, January 4, 2016
Payment Time: 02:52PM PT

Payer Information

First Name: James Mwangi
Street Address: 8012 153rd St Ct E
Town/City: Puyallup, WA 98375
Country: United States
Daytime Phone Number: (206) 981 - 9367
E-mail Address: safetogomovers@gmail.com
Company Name-If not a Company, provide name of Payee: Safe To Go Movers LLC
Payment Menu : Application Fees
Payment Menu - Additional Payment:
Application Types (If Applicable): Household Goods

Card Information

Card Type: Visa
Card Number: *****2872
Expiration Date: 05/2018
Card Verification Number: ****

Payment Information

Payment Type: Utilities & Transportation Commission POS
Payment Amount: \$250.00
Convenience Fee: \$6.25
Total Payment: \$256.25

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