



WASHINGTON



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

FOR OFFICIAL USE ONLY			
Date Filed:	DOL/SOS:	ID:	Docket # 1600949
Staff Assigned:	Insurance:	Inspection:	Permit Issued HG-65028
Reception #	111-0268-207-02	111-0268-013-20	

Type of Household Goods Authority Requested – check one

H 06207
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: Advantage Relocation Experts
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable _____

Physical Address 3422 S 31st St Tacoma 9840

Mailing Address Same as physical

Telephone Number (206) 391 0204 Fax Number () _____

BUSINESS INFORMATION - continued

UBI #: 602 411 875 Email: Adv info@advancerelocationexperts.com

USDOT #: 1752146 (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 # _____

Employment Security Department registration number _____

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>Austine Thompson</u>	<u>Member</u>	<u>1000 shares</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: house hold moving helping families and individual move affordably and helping people take away the stress of moving

2. Briefly describe your experience in the transportation/household goods moving industry: I have been in the transportation & logistic industry all my life and moving household goods for over 10 years I regard myself a very experience mover

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 HG 065028

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? _____

Dotson, Michael (UTC)

From: Austine Thompson <info@advancerelocationexperts.com>
Sent: Wednesday, July 27, 2016 3:37 PM
To: Dotson, Michael (UTC)
Subject: Re: UTC reinstatement

Yes Mike the agent I work with retired so we have a new girl in the office that doesn't know the importance of filling at least a binder if the insurance renewed anyways she just started my policy had to renew and she didn't send you guys the copy on time I am trying to see if they will reimburse me with the fees since it was there fault.

Sent by Austine Thompson operations manager

> On Jul 27, 2016, at 3:24 PM, Dotson, Michael (UTC) <mdotson@utc.wa.gov> wrote:

>

> I'll get this going for you. Make sure your insurance company gives us the new filing. Also, I need something in writing stating what happened that the permit was cancelled. (changed insurance policies, paid late, etc.) You can just respond to this with that.

>

> Thanks

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> Mike Dotson

> Transportation Specialist 3

> Licensing Services

> Washington Utilities and Transportation Commission

> PH: 360-664-1223

> FAX: 360-586-1181

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> -----Original Message-----

> From: Austine Thompson [mailto:info@advancerelocationexperts.com]

> Sent: Wednesday, July 27, 2016 9:49 AM

> To: UTC DL Transportation <transportation@utc.wa.gov>

> Subject: UTC reinstatement

>

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>

> Sent by Austine Thompson operations manager

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