

**HOUSEHOLD GOODS MOVING COMPANY
 PERMIT APPLICATION**

FOR OFFICIAL USE ONLY			
Date Filed:	DOL/SOS:	ID:	Docket #
Staff Assigned	Insurance	Inspection	Permit Issued THG-
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 as well as a closing annual report. **\$ 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 3-5 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.

Trade Name, if applicable: JAMES & JOHN MOVERS

Physical Address: 8012 153RD ST. E. E. PUYALLUP 98375

Mailing Address: 8012 153RD ST. E. E. PUYALLUP 98375

Telephone Number (206) 981-9367 Fax Number (NA)

Email: ajelogomovers@gmail.com

BUSINESS INFORMATION - continued

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

UBI #: 603-464-571 USDOT #: 2634986

If you currently do not have a USDOT number, go online at www.fmcsca.dot.gov/online-registration to apply or call 360-596-3812 for assistance.

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

Employment Security Department (ESD) registration # 000-163828-00-5

If you will not be setting up an account with L&I or ESD because you do not have employees, please explain how you plan to obtain workers. Per WAC 480-15-555, a criminal background check must be completed on each person you intend to hire. If you intend to hire day labor from a temp agency, they must perform the criminal background check. Refer also to WAC 480-15-302 and 305.

TYPE OF BUSINESS STRUCTURE

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

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 Mwanishi</u>	<u>GENERAL MANAGER</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 & unloading of house hold goods. Would love to help families with their moving needs especially during peak season in summer.

2. Briefly describe your experience in the transportation/household goods moving industry: In total I have 7 years in the moving industry. I have extensive experience on packing, loading, giving estimates; etc. It's an industry I derive pleasure in helping customers/families rather than

JUSTIFICATION FOR REINSTATEMENT

On August 22nd, UTC requested that Safe To Go Movers, LLC furnish them with an acceptable proof of Insurance by Sept. 21st.

On Sept 18th, Safe To Go Movers, LLC representing Insurance agent sent out copy of the same to the UTC.

On Sept 26th, following receipt of Permit Cancellation, on Sept 25th through regular mail, I promptly contacted the Commission & learned the POI was not received until the 25th of Sept. Owing to the weekend causing cancellation of Permit.