

Remove Watermark Now

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

<i>FOR OFFICIAL USE ONLY</i>			
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, 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: Washingtons Movers LLC
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable Moving Company

Physical Address 8210 Mukilteo Speedway #B, Mukilteo WA 98275

Mailing Address 8210 Mukilteo Speedway #B, Mukilteo, WA 98275

Telephone Number (425) 245-2314 Fax Number () N/A

BUSINESS INFORMATION - continued

UBI #: 604122387 Email: washingtonsmovers@gmail.com

USDOT #: 3018197 (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 # 64617500

Employment Security Department registration number 000-704331-009

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 WA

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

<u>Name</u>	<u>Title</u>	<u>Stock Distribution or % of Shares</u>
Leland Vallot Washington	Owner/Member	100%

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: _____

Will be providing moving services to the pudget sound area to fill a need for reliable companies for households and businesses.

2. Briefly describe your experience in the transportation/household goods moving industry:

Have been working for moving companies for over 8 years. Have worked for two of the top companies in the greater Seattle area.

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? _____

7. Do you have, or have you ever had a business-related legal proceeding against you in Washington, or in any other state? No Yes If yes, please list below:

Type of Legal Proceeding	Date	State

*attach additional pages if necessary

8. Has any person named in this application ever been convicted of any crime involving theft, burglary, assault, sexual misconduct, identity theft, fraud, false statements, or the manufacture, sale, or distribution of a controlled substance? No Yes If yes, please list below:

Type of Conviction	Date	City/State
Assault 4	2010	Ellensburg/WA

*attach additional pages if necessary

9. Has any person named in this application, been cited for violation of state laws or Commission rules? No Yes If yes, please list below:

Violation	Date	RCW/WAC

*attach additional pages if necessary

or below, see attached business plan

FINANCIAL STATEMENT

Complete the following financial statement or attach a balance sheet, profit and loss statement, or business plan.

Assets		Liabilities	
Cash in Bank	\$	Salaries/Wages Payable	\$
Notes Receivable	\$	Accounts Payable	\$
Investments	\$	Notes Payable	\$
Other Current Assets	\$	Mortgages Payable	\$
Prepaid Expenses	\$	TOTAL LIABILITIES	\$
Land and Buildings	\$	NET WORTH	
Trucks and Trailers	\$	Preferred Stock	\$
Office Furniture	\$	Common Stock	\$
Other Equipment	\$	Retained Earnings	\$
Other Assets	\$	Capital	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$

EQUIPMENT LIST

Describe the equipment you will own or lease to provide moving services
(attach additional sheets if necessary).

Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight
1999	Izusu FTR	c84847j	4GTJ7C133XJ601223	26000 GVW

SAFETY AND OPERATIONS

CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code of Federal Regulations Part 382 and Part 40). If you operate commercial motor vehicles, your drivers must be in a Controlled Substance and Alcohol Use and Testing program. You must have an alcohol and controlled substances testing program. **Please attach evidence of your enrollment in a drug and alcohol testing program.**

SAFETY RESPONSIBILITIES

List the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State Laws and commission rules (WAC) as described below. Please refer to the WAC rules, Fact Sheets and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations

COMMERCIAL DRIVER'S LICENSE (CDL) STANDARDS REQUIREMENT AND PENALTIES (Title 49, Code of Federal Regulations Part 383). If you operate commercial motor vehicles, your drivers must have a valid CDL.

DRIVER QUALIFICATION REQUIREMENTS: (Title 49, Code of Federal Regulations Part 391). Each of your drivers must meet minimum qualification requirements. You must maintain driver qualification files for each driver.

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395). Each of your drivers must maintain hours of service logs. You must maintain true and accurate hours of service records for each driver.

INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396). You must systematically inspect, repair, and maintain all motor vehicles.

PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393). You must maintain parts and accessories in a safe condition.

LIABILITY INSURANCE REQUIREMENTS (WAC 480-15-530). You must file and maintain proof of public liability and proper damage insurance (\$300,000 minimum coverage for vehicles under 10,000 pounds GVWR and \$750,000 minimum coverage for vehicles 10,000 pounds GVWR or more)

CARGO INSURANCE REQUIREMENTS (WAC 480-15-550). You must maintain cargo insurance coverage (\$10,000 for household goods transported in motor vehicles under 10,000 pounds GVWR and \$20,000 for vehicles 10,000 pounds GVWR or more).

Name: <p style="text-align: center;">Leland Vallot Washington</p>	Position: <p style="text-align: center;">Owner/Member</p>
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OPERATIONAL RESPONSIBILITIES

Annual Reports and Regulatory Fees (WAC 480-15-480). You must annually file a report of your financial operations and pay regulatory fees.

Name:	Position:
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STATE OF WASHINGTON – general laws, rules and regulations: Individuals and companies doing business in the State of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the State of Washington, such as, but not limited to the Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax; Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue, Internal Revenue Service (taxes); and Employment Security.

Name: Leland Vallot Washington	Position Owner/Member
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If you would like to receive information about new household goods carriers, check here

DECLARATION OF APPLICANT

I understand that filing this application **does not** in itself constitute authority to operate as a household goods mover.

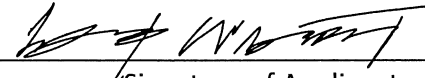
As the applicant for a household goods permit, I understand the responsibilities of a motor carrier and I am in compliance with all local, state and federal regulations governing businesses, including household goods movers, in the state of Washington.

I understand that if the commission grants my application as a new entrant I will receive temporary authority to provide service as a household goods carrier on a provisional basis for at least six months. During this time, the commission will evaluate whether I have met the criteria in WAC 480-15-305 to obtain permanent authority. I also understand that I must comply with all conditions placed on my temporary permit and that failure to do so will result in cancellation of my permit.

My employees are sufficiently trained to comply with commission rules regarding estimates, bills of lading, rates and charges and terms and conditions of household goods moves. In addition, my employees are sufficiently trained to comply with commission rules regarding vehicle operation, maintenance, and all other safety requirements. My company will provide a copy of the customer survey to each customer for whom we provide transportation service.

I understand the commission will complete a criminal background check on each person named in the application.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Leland Vallot Washington Print name of applicant	 Signature of Applicant	1/31/18 Office Date and Location
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HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: LELAND WASHINGTON

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: KYLE CARSON / BUSINESS OWNER / EASY COMPANY

Address (include street address, mailing address, city, state, zip, and county):
11038 GREENWOOD AVE N KING COUNTY
SEATTLE, WA 98133

Phone Number:

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs: I WILL BE ABLE TO FORWARD JOBS TO A COMPANY THAT ADHERES TO THE SAME HIGH STANDARDS THAT I DO. I TRUST LELAND'S STANDARD OF QUALITY IMPLICITLY.

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community: LELAND BRINGS HONESTY AND INTEGRITY TO THE MOVING INDUSTRY. HE IS FAIR, WITH A GOOD MORAL FOUNDATION. I WOULD TRUST LELAND TO MOVE A FAMILY MEMBER.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit? LELAND IS GOING TO DO A LOT OF GOOD, HONEST WORK FOR PEOPLE, AT AN AFFORDABLE PRICE. HE WILL BE AN ASSET TO THE MOVING INDUSTRY IN WASHINGTON STATE.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

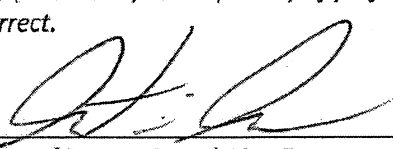

Signature of Person Completing Form

1/31/18, SEATTLE
Date and Location

HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: Leland Washington

The following must be completed by the Supporter of the applicant	
Name, Title, and Business Name:	Martin Cook, Operations manager, Seattle Movers
Address (include street address, mailing address, city, state, zip, and county):	903 N. 128th St. Seattle WA, 98133
Phone Number:	206-284-9445
Do you currently need the services of a residential household goods moving company? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe your current moving needs:	
Do you anticipate a future need for the services of a residential household goods moving company? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, please describe your future moving needs:	once he is licensed I will refer clients to him on a regular basis.
Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:	We usually book 7-10 days out. I could use more honest reliable companies to recommend.
Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?	I have known Leland for over 15 years and he is the most trust worthy men I have ever met. His hard work and customer service is top notch.
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.	
	10/9/17 Seattle Movers North yard.
Signature of Person Completing Form	Date and Location

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: Derek Williams Leland Washington

The following must be completed by the Supporter of the applicant	
Name, Title, and Business Name:	<u>Derek Williams, General Manager, Adam's Moving & Delivery Service</u>
Address (include street address, mailing address, city, state, zip, and county):	<u>16017 Aurora Ave N, Suite 200, Shoreline Wa 98133</u>
Phone Number:	<u>206-251-1725</u>
Do you currently need the services of a residential household goods moving company? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe your current moving needs:	
Do you anticipate a future need for the services of a residential household goods moving company? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe your future moving needs:	
Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:	<u>Leland Washington is very knowledgeable within the industry. His company will be a great addition to the community.</u>
Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?	<u>Leland has the experience and drive to succeed. He respects the process, and has the responsibility to stay compliant.</u>
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.	
<u>[Signature]</u> Signature of Person Completing Form	<u>10/12/2017 Seattle Wa</u> Date and Location

Washingtons Movers LLC Business Plan

Leland Washington

10-9-17

WashingtonsMoversLLC@gmail.com



Opening statement

Hello, my name is Leland Washington. I intend to start a moving company in the Puget Sound area for intrastate commerce, then eventually once the company has grown enough, interstate moves. The market in the greater Seattle area has been expanding greatly in the past five or six years, and I feel like there is a need for more moving companies to handle all of the people relocating to the area. I believe with the experience that I have in the industry, I will be able to meet that demand for a local moving company with a understanding on how the industry operates.

I myself have almost nine years of experience working in this industry for some of the top local moving companies in Seattle. I have somewhere between 1500-2500 moves under my belt, and I feel like that experience is lacking from business owners in the industry these days. In my years of working for other companies, I have always felt like the industry standard could be raised, and I could be the one to provide it.



Competitor Research

The information provided bellow is what our current research of the industry surrounding the greater Seattle area has to offer.

- Seattle Movers - \$130 an hour for 2 men and a truck
- Adams Moving Service - \$125 an hour for 2 men and a truck

With the rates that are being charged these days, I feel like I can charge less than the competition while still providing quality work.

- Washingtons Movers LLC's planed hourly rate - \$115 an hour for 2 men and a truck



Seattle's Housing Market

Seattle is one of the fastest growing cities in the country. I have lived here for most of my life, and it has never been close to the way it is now. With business' like Amazon, Microsoft, and Boeing, I don't see anything changing in the next 10 years, except for the better. Seattle is becoming a hotspot for the tech industry, and the demand for movers in the area is becoming greater and greater.

"The price of single family homes in the Seattle area has soared 13.5% in the past 12 months. That's more than twice the national average of 5.9%." according to Business Insider. The moving industries business has always been a direct reflection of the housing market. With the growing rate of the greater Seattle area, I realize that even as a new moving company that the business is out there.

Plan of Action

- Advertising
- Rules and regulation compliance materials
- Certification services

With everything already purchased the total cost would be very low, and all payments would be easy to handle. With all the referrals I should be getting from other companies overbooked, I should be able to profit at least \$2000-10000 each month in my first year of operation. With cutting cost by paying for everything upfront I feel like it will be a recipe for success

We will advertise numerous ways, with the primary method being the Yelp, and word of mouth. The other method will be with advertising on the truck as well as our personal vehicles. The other unique method we came up with was offering an incentive to a few real estate brokers, every client they have that moves with us and they will receive a commission from it. We feel this is the best way to advertise and will be a recipe for success.

Cost Worksheet

- Truck -----\$10,000 (Used 24 foot box truck - already owned-)
- Materials-----\$2000 (blankets, bubble wrap, office supplies, boxes, straps, etc.. -already owned-)
- Advertising-----No money from advertising will use yelp and contacts to start
- Fees-----\$1000 Paid (D.O.T. registration, Business license, FMSCA, UTC license -have everything but UTC license (\$550) -)
- Insurance----- \$1400 down, \$583 payments a month - already set up
- Payroll----- \$30 a month

-Employee-----\$ Based on hours worked (i.e. we would only draw a wage when we performed a service for a client.)

Total cost to operate a month would be under \$1000 a month (having everything paid for already.) To profit each month would only be 1-3 jobs done, which would be easy to provide.

Final Statement

With the business plan provided, there should be no way to lose money with just a few jobs month. the initial cost doesn't exceed \$20,000, and over 90% is paid for already. I think with the experience that I have in the industry and the contacts that I have I should be able to exceed expectations and provide one of the most reliable companies in the area. With all of the contacts that I have acquired throughout my years in the industry, from real estate agents, company managers and owners in various industries that require moving services, I will be able to be very successful with this company.

Regards,
Leland Washington



Research Sources

Chris Mortis, Business Insider


<http://www.businessinsider.com/seattle-is-the-hottest-real-estate-market-in-the-country-2017-9>



Appendix A



WA
USA
WASHINGTON DRIVER LICENSE




33169682E1326

4d LIC# [REDACTED]
1 VALLOT WASHINGTON
2 LELAND T

15 Sex M 16 Hgt 5-11
17 Wgt 220 18 Eyes BRN
9 Class 90 End NONE
12 Restrictions *

4a Iss 03-08-2016
4b Exp 05-24-2021

DONOR



Rev 06/16/2010