



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	

- | <u>Type of Household Goods Authority Requested – check one</u> | <u>Fee Required</u> |
|---|----------------------------|
| <input type="checkbox"/> <u>Provisional and permanent authority.</u> The fee for provisional, and then permanent authority is a one-time fee. Complete pages 3-8 and Attachment A. | \$ 550 |
| <input type="checkbox"/> <u>Permanent authority to transfer</u> 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 |
| <input type="checkbox"/> <u>Permanent authority to transfer</u> under the exceptions in <u>WAC 480-15-187.</u> Complete pages 3-8 and Attachments B & C. | \$ 250 |
| <input checked="" type="checkbox"/> <u>Reinstatement of permit</u> (must be filed within 30 days of cancellation, depending on criteria set forth in <u>WAC 480-15-450</u>). Complete pages 3-5 and include a statement justifying the reinstatement. | \$ 250 |
| <input type="checkbox"/> <u>Name Change</u> – Complete pages 3-5 and Attachment D. | \$ 35 |

BUSINESS INFORMATION

Legal Name: 3Z Movers LLC

Trade Name, if applicable _____

Physical Address 14428 88th Ave NE, Kirkland, WA, 98034

Mailing Address 14428 88th Ave NE, Kirkland, WA, 98034

Telephone Number (206) 486-2462 Fax Number () _____

Email: 3zmovers@gmail.com

BUSINESS INFORMATION - continued

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

UBI #: 603 331 454

USDOT #: 1986948

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 # 270,706-00

Employment Security Department (ESD) registration # 000-492484-00-3

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:

<u>Name</u>	<u>Title</u>	<u>Stock Distribution or % of Shares</u>
<u>Boubacar Zida</u>	<u>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: Household goods moving services, disassembly and assembly of furniture, packing and moving for local moves only.

2. Briefly describe your experience in the transportation/household goods moving industry: We have previously been permitted and are looking to reinstate our permit.

Boubacar Zida
14428 88th Ave NE
Kirkland, WA, 98034
July 30, 2018

Washington Utilities and Transportation Commission
PO Box 47250
Olympia, WA, 98504

Dear Washington Utilities and Transportation Commission:

I am writing in regards to the reinstatement of my household goods moving permit.

We were unable to get our insurance company to provide proof of cargo coverage to the UTC using the Form H. It was the lack of this proof of coverage that caused us to lose our permit. We did have active cargo coverage and will include the Form H we received after the permit cancellation with this application.

Please consider reinstating my permit given that I have provided the Form H and proof we had coverage in good standing.

Sincerely,

Boubacar Zida

A handwritten signature in black ink, appearing to be 'Boubacar Zida', written in a cursive style with a large, sweeping flourish at the end.