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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: GS MOVING SERVICES LLC

Trade Name, if applicable DBA: ECO-MOVERS DBA: THE BIG GUYS HOME DELIVERY

Physical Address 1200 W NICKERSON ST SEATTLE WA 98119

Mailing Address SAME AS ABOVE

Telephone Number (206) 992-5523 Fax Number () N/A

Email: ECOMOVERS@HOTMAIL.COM

BUSINESS INFORMATION - continued

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

UBI #: 604-374-615 USDOT #: 3227005

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 # 170,572-02

Employment Security Department (ESD) registration # _____

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>GRANT KORZETZ</u>	<u>PRESIDENT</u>	<u>70%</u>
<u>SIMON KHORRAMI</u>	<u>MEMBER</u>	<u>30%</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
- CURRENT PERMIT HOLDER : HG063849 - PUGET SERVICES LLC

2. Briefly describe your experience in the transportation/household goods moving industry:
GRANT KORZETZ - 10 YEARS AS OWNER/PRESIDENT OF ECO-MOVERS
SIMON KHORRAMI - 20 YEARS AS PRESIDENT OF THE BIG GUYS HOME DELIVERY

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 #063849

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? NATIONAL VAN LINES

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

*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

FINANCIAL STATEMENT

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

Assets		Liabilities	
Cash in Bank	\$ 100,000	Salaries/Wages Payable	\$ 0
Notes Receivable	\$ 0	Accounts Payable	\$ 0
Investments	\$ 0	Notes Payable	\$ 0
Other Current Assets	\$ 0	Mortgages Payable	\$ 0
Prepaid Expenses	\$ 0	TOTAL LIABILITIES	\$
Land and Buildings	\$ 0	NET WORTH	
Trucks and Trailers	\$ 250,000	Preferred Stock	\$ 3,000,000
Office Furniture	\$ 10,000	Common Stock	\$
Other Equipment	\$ 25,000	Retained Earnings	\$
Other Assets	\$ 0	Capital	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$ 3,000,000

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

SEE ATTACHED

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:

GRANT KORJETZ

Position:

PRESIDENT

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.

ATTACHMENT B

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

Current Name on Permit (Seller): PUGET SERVICES LLC
Current Trade Name on Permit (Seller): ECO-MOVERS
Address (Seller): 1200 W NICKERSON ST SEATTLE WA 98119
HG Permit Number: 063849 Phone Number (Seller): (206) 992-5523

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

A closing annual report must be filed with the commission by the current company.



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? GRANT KORZETZ

RELEASE OF AUTHORITY

I, the seller, have sold or otherwise released interest in my household goods permit number HG-063849 to the following:

Name of Buyer: GS MOVING SERVICES
Trade Name of Buyer: ECO-MOVERS

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

 _____ Seller's Signature	<u>1-1-19</u> <u>SEATTLE WA</u> _____ Date and Location
 _____ Buyer's Signature	<u>1-1-19</u> <u>SEATTLE WA</u> _____ Date and Location

Eco Movers			Vehicle Information														
Vehicle	Make	Year	License #	Vin	Model	Style	Body	Engine	Actual Height	Max Height	Front Tire Info		Rear Tire Info		Fuel Filter	Air Filter	Oil Filter
#1	Chev	2001	B76942K	4KBB4B1R41J801097	W3500	TB	VAN	5.7 GEW	10'4	10'1	LT 215/85R16 115/112S		LT 245/75R16 120/116Q				
#2	ISUZU	2001	B53749F	4KLB4B1R31J800664	NPR	TB	VAN		10'4	10'1	LT 215/85R16 115/112S		LT 215/85R16 115/112S				
#3	Isuzu	2017	C93929M	JALC4W163H7001524	NPR	TB	Van										
#4	Isuzu	2018	C93913M	54DC4W1B0JS803025	NPR	TB	Van										
#5	INTL	2004	C97541A	1HTMMAAM24H593531	430/CC		VAN	7.6D	12'9	12'6	354/11R22.5		G164 RTD 11R22.5				Carquest 84744xd
#6	Isuzu	2006	C46859M	4KLC4B1U26J803636	NPR	TB	Van										
#7	Isuzu	2018	C93912M	54DC4W1B7JS803006	NPR	TB	Van										
#8	ISUZU	2000	C60124A	4GTJ7C133YJ700836	FTR	TB	VAN		11'4	11'1	11R22.5 /148/145m		11R22.5 /148/145m				
			B0840E-Actual plate:C27758A Registered														
#9	INTL	2004	Plate: B08385E	1HTMMAAM64H593497	430/CC		VAN	7.6D	13'2	12'11	11R22.5R1200		11R22.5/285				Carquest 84744xd
#10	INTL	2006	C07101E	1HTMMAAM36H342066	4300			7.6D	12'6	12'3	11R22.5R250		11R22.5/X2E		Carquest 86719	Carquest 88870	Carquest 84744xd
#11	INTL	2007	C07102E	1HTMMAAL27H468430	4300			7.6D	12'6	12'3			11R22.5		Carquest 86719	Carquest 88870	Carquest 84744xd
#12	ISUZU	2000		4GTJ7C135YJ700837		FTR											
#13	Isuzu	2018	C94103M	DK6S169JSG00901	NPR	TB	Van										
#14	Isuzu	1999	C46990M	4KLB4B1RXXJ001554	NPR	TB	Van										
#15	Isuzu	2008	C80310M	4KLB4B1U98J800862	NPR	TB	Van										
Van 1	Chev	2002	C31721C	1GAHG35R121247346	EXPRESS		VAN		6'11	6'8	LT245/25R16		LT245/25R16				Carquest 95060
Van 2	Chev	2000	C74577F	1GCHG35R4Y124609	EXPRESS		VAN		6'11	6'8							
Van 3	Chev	2000	C74578F	1GCHG35R511235237	EXPRESS		VAN		6'11	6'8							