



HOUSEHOLD GOODS MOVING COMPANY - NEW COMPANY APPLICATION

You are required to have a permit from the commission before operating as a household goods moving (HHG) company in Washington state. You must attend commission-sponsored training prior to receiving your provisional permit. Household Goods Training information can be found [HERE](#). If you cannot wait until the next training, you may come to a commission-sponsored orientation, however, you will also be required to attend a later training. All other application requirements must be met to schedule an orientation. This application contains the following information:

- Application Form and Attachments
- Checklist
- [WAC 480-15](#) – Rules Relating to Household Goods Carriers
- [Your Guide to a Satisfactory Safety Rating](#)

Insurance Requirements

File and maintain [Public Liability and Property Damage Insurance \(Form E\)](#) with the commission covering all vehicles operating under your household goods permit. Additionally, file and maintain [Cargo Insurance \(Form H\)](#). Retain proof of insurance coverage at your office and have it available for inspection by commission staff.

Insurance minimum limits are:

| | |
|--------------------------------------|---|
| Vehicles under 10,000 GVWR | <ul style="list-style-type: none"> • \$300,000 combined single limit of public liability and property damage insurance (Form E) and • \$10,000 cargo insurance (Form H). |
| Vehicles 10,000 GVWR and more | <ul style="list-style-type: none"> • \$750,000 combined single limit of public liability and property damage insurance (Form E) and • \$20,000 cargo insurance (Form H). |

FILING YOUR APPLICATION

The Commission has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1243 or The Washington Relay Service at 7-1-1 or 1-800-833-8384.

Select **one** of the following:

- Scan/PDF your application to efileapp.utc.wa.gov and pay online at payments.utc.wa.gov
- Mail your application **with** your check or money order to the following address: UTC, PO Box 47250, Olympia, WA 98504-7250
 - PROCESSING MAILED APPLICATIONS WILL BE SIGNIFICANTLY DELAYED

ACH on-line (no service fee) or credit card on-line at payments.utc.wa.gov (2.5% or minimum of \$3.95 is charged by Official Payments for credit card processing).

DO NOT EMAIL YOUR CREDIT CARD INFORMATION



CHECKLIST

Ensure the following items are included with your Household Goods Moving application:

New Provisional Application

- Completed application and fee
- Register with **Department of Labor & Industries**
- Register with **Employment Security Department**
- Register with **Department of Revenue/Business Licensing Service** (UBI #)
- Register with **Secretary of State's Office** (if corporation or LLC)
- Completed required **Household Goods Industry Training**
- Copy of valid driver's license or government issued photo ID card for each person named in the application (upload as a separate document)
- Evidence of enrollment in a drug and alcohol testing program, or evidence that you have in place your own drug and alcohol testing program, **if your company operates commercial vehicles and has CDL drivers. See 49 CFR 382(e) and 383.5.**
- Evidence of insurance - combined single limit of public liability and property damage (Form E) and cargo insurance (Form H)
- Attachment A - Three or more completed statements of support from people in the community supporting the proposed service

**HOUSEHOLD GOODS MOVING COMPANY
 PERMIT APPLICATION**

| FOR OFFICIAL USE ONLY | | | |
|------------------------------|-----------------|--------------|--|
| Date Filed: | Company: | Docket #: | |
| Receipt ID: | Payment ID: | Amount Paid: | |
| 111-0268-207-02 | 111-0268-032-20 | | |

Type of Household Goods Authority Requested – Check One

- | | <u>Fee</u> |
|---|-------------------|
| <input checked="" type="checkbox"/> Provisional and permanent authority. The fee for provisional and then permanent authority is a one-time fee. Complete pages 3-7 and Attachment A. Note: Per RCW 81.80.075(2) , applications must be on file with the commission for at least 30 days before issuance. | \$550 |
| <input type="checkbox"/> Reinstatement of permit Must be filed within 30 days of cancellation, depending on criteria set forth in WAC 480-15-450 . Complete pages 3 and 7, and include a statement justifying the reinstatement. Business Letter format is preferred. If longer than 30 days after cancellation, you may not reapply for 12 months per WAC-480-15-302(11). | \$250 |

Household Goods Permit #: (T)HG -



Section 1 - BUSINESS INFORMATION

Legal Name: **Rich & Associates, LLC**

Trade Name, if applicable:

Physical Address: **328 NW 198th Street, Shoreline, WA 98177**

Mailing Address: **328 NW 198th Street, Shoreline, WA 98177**

Telephone Number: **206-880-8013** Email: **clearawaybyrich@gmail.com**

Contact Name: **Darrel Rich**

USDOT#: **4268030** If you do not have a USDOT number, go on-line at <https://cms8.fmcsa.dot.gov/registration> to apply or call 360-596-3812 for assistance.

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

Business License/UBI#: **605565989**

Department of **Labor & Industries** (L&I) Worker's Comp Account #: **N/A**

Employment Security Department (ESD) registration #: **N/A**

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](#).

I will be performing the work related to this business.

Type of Business

Individual Partnership Corporation Other (LP, LLP, LLC)

State of Incorporation

Washington

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

| Name | Title | Stock Distribution/% of Shares |
|--------------------|--------------|--------------------------------|
| Darrel Rich | Owner | 100 |
| | | |
| | | |
| | | |

Provide a copy of a valid driver's license or government-issued photo identification card for each person named in the application. Upload or email as a separate attachment. Application processing will not begin until the commission/Licensing has received this.



Section 2 - APPLICATION QUESTIONNAIRE

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:

I will be performing clear out services of household goods through contracts with DSHS.

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

I worked my way through college working for a moving company.

3. Do you currently hold, or have you ever held, a Household Goods permit in Washington?

No Yes If yes, please indicate your permit number:

4. Have you ever applied for and been denied a Household Goods permit in Washington?

No Yes If yes, please explain:

5. Do you currently operate interstate? No Yes

If yes, please indicate your MC#:

6. If you have interstate authority, have you registered for Unified Carrier Registration? No Yes

7. Do you operate interstate as an agent of another company? No Yes

If yes, what is the name of the company?

8. Have you completed commission-sponsored training? No Yes If "yes" date:

9. Will you be employing CDL drivers? No Yes

If "yes", you must attach evidence of enrollment in a drug and alcohol testing program.

Please answer the following questions completely. If there are multiple persons listed in this application with legal proceedings or criminal convictions to declare, provide documentation on a separate attachment.

10. Does any person named in this application have, or has ever had a business-related legal proceeding against you in Washington state, or in any other state? No Yes If "yes" please list below*:

| Type of Legal Proceeding | Date | State |
|--------------------------|------|-------|
| | | |
| | | |

*attach additional pages if necessary



11. 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 | State |
|--------------------|------|-------|
| | | |
| | | |

*attach additional pages if necessary

12. Has any person named in this application been: 1) convicted of a criminal offense in Washington state, 2) found to have committed a civil offense in Washington state, or 3) found to have violated Commission rules?

No Yes If yes, please list below*:

| Violation | Date of conviction | RCW/WAC |
|-----------|--------------------|---------|
| | | |
| | | |

*attach additional pages if necessary

13. If you would like to receive information about new household goods carriers, check here

| Section 3 - FINANCIAL STATEMENT | | | |
|--|------------------|--|------------------|
| Complete the following or attach a balance sheet, profit and loss statement, or business plan. | | | |
| Assets | | Liabilities | |
| Cash in Bank | \$ 2,000 | Salaries/Wages Payable | |
| Notes Received | | Accounts Payable | |
| Investments | | Notes Payable | |
| Other Current Assets | | Mortgages Payable | |
| Prepaid Expenses | | Total Liabilities | |
| Land and Buildings | | Net Worth | \$ 12,000 |
| Trucks and Trailers | \$ 10,000 | Preferred Stock | |
| Office Furniture | | Common Stock | |
| Other Equipment | | Retained Earnings | |
| Other Assets | | Capital | |
| TOTAL ASSETS | \$ 12,000 | TOTAL LIABILITIES AND NET WORTH | \$ 12,000 |

| Section 4 - EQUIPMENT LIST | | | | |
|---|-------------|----------------|-------------------|------|
| List the equipment you own or lease to provide moving services (attach additional sheets if necessary). You must own or have a long-term lease for any vehicle you operate, you may not rent vehicles on a job-by-job basis. | | | | |
| Year | Make | License Number | Vehicle ID (VIN) | GVW |
| 1993 | Ford Ranger | B89119N | 1FTCR14X4PPA24514 | 4740 |
| | | | | |
| | | | | |
| | | | | |

*attach additional pages if necessary



Section 5 – SAFETY

Identify the person and position responsible for understanding and complying with the **Federal Motor Carrier Safety Regulations** (FMCSR), Washington state laws (RCW) 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.

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 if your company has commercial vehicles and employs CDL drivers.**

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: Darrel Rich | Position: Owner |
|--------------------------|------------------------|

Section 6 - OPERATIONAL RESPONSIBILITIES

Identify the person and position responsible for understanding and complying with the requirements of each category shown below.

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

| | |
|--------------------------|------------------------|
| Name: Darrel Rich | Position: Owner |
|--------------------------|------------------------|

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 & 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: Darrel Rich | Position: Owner |
|--------------------------|------------------------|

Section 7 - DECLARATION OF APPLICANT

INITIAL

DR

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

DR

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.

DR

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.

DR

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.

DR

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

DR

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.

Applicant Name: **Darrel Rich**

Date: **08/26/2024**

Section 8 - ADDITIONAL REQUIRED ATTACHMENTS



For New Applications: provide three “*attachment A - HOUSEHOLD GOODS STATEMENT OF SUPPORT*” forms. Forms may be typed or hand-written.



For Reinstatement of Permit: provide a personal statement justifying the reinstatement. Business letter format preferred.

August 2, 2024

To Whom it may concern,

I am writing to you as a personal reference for Darrel Rich.

I have known Darrel for 32 years. In that time, he has always been a trustworthy friend.

Over the years we have helped each other, and our friends to move countless times. I am always impressed with Darrel's ability to organize a move and maximize the space in a truck.

Thank you,

Monica Mace

206-229-3012 (cell)

5738 38th Ave NE

Seattle, WA 98105

July 29, 2024

I have known Darrel Rich as part of the community for over 10 years. From a community standpoint he has volunteered his time coaching kids, raising money for the schools and being a board member at the local swim and tennis club. He is always available to lend a helping hand. He helped clear out my father in laws house, requiring multiple trips to the dump. He is honest, hard working and dependable. I support him in any business endeavor.

Bruce Nelson
425-351-5744
9905 242nd PI SW
Edmonds, WA 98020

August 14, 2024

From the Office of Ed Adams

Letter of Recommendation of Darrel Rich

To: Whom it May Concern

I would like to provide a personal and professional endorsement for Darrel Rich. I have known Darrel for the past 15 years and have found him to be reliable and very trustworthy. My dealings with Darrel have included both personal and professional situations. From volunteer work for youth sports to appointed and elected board of directors roles within the community. Darrel and I have shared and switched roles to where we have each work for and supervised each other and there has never been any issues.

While Darrel and I were involved in the youth sports programs together, I found Darrel to be resourceful and forward thinking. Darrel showed that he was able to complete projects in a timely and professional manner without the need for specific direction. Darrel and I spent a considerable amount of time, in 2011, setting up and planning a season ending swim meet that included 16 different teams, 300+ youth swimmers, 50+ coaches, 100+ volunteers and more than 1,000 family support members that is still talked about within the league, Greater Seattle Summer Swim League, as the gold standard for what a post season meet should look and operate like. From the planning stages through the set-up, to the day of and days following the one day event, Darrel's efforts were completely invaluable.

In closing, I would again like to recommend Darrel in his endeavors to establish this opportunity. I very much look forward to having more conversations about the qualities that Darrel would bring to your organization. Darrel has many abilities and he regularly puts them on display. His reliability, dependability and availability are just a few of them.

Please feel free to contact me with any questions.

Sincerely,

Ed Adams

Academics Manager

PSEJATC

Renton, WA

Ed Adams

Electrical Administrator (ADAMSEJ916B2)

General Electrical (ADAMSEJ099CB)