



1300 S. Evergreen Park Drive SW
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Olympia, WA 98504-7250
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or
1-800-416-5289
email: transportation@utc.wa.gov

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	

762 SL

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: Josh Manion
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable "We Like To Move It, Move It!!" LLC

Physical Address 16825 48th Ave W. #105, Lynnwood, WA 98037

Mailing Address Same as Physical Address.

Telephone Number (360) 525-7654 Fax Number () _____

BUSINESS INFORMATION - continued

UBI #: 604-088-306 Email: JoshManion99@gmail.com

USDOT #: _____ (If you currently don't have one, go online at www.fmcsca.dot.gov/online-registration to apply or call 360-596-3817 for assistance.)

Department of Labor & Industries Worker's Comp account # _____

Employment Security Department registration number _____

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 _____

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

Name	Title	Stock Distribution or % of Shares
<u>Josh Manion</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: Moving Company, providing both residential and commercial moves. We offer packing services as well.

2. Briefly describe your experience in the transportation/household goods moving industry: I have worked with other moving companies for over 3 years and have done both packing and unpacking as well as loading and unloading trucks.

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? _____

Statement Justifying Reinstatement

Dear sir or madam,

I was simply out of town and missed the warnings about needing further insurance information from me.

I have provided the missing information and everything is current.

We provide an excellent service to the community and maintain a 5 star rating on most review sites.

Please reinstate my household goods moving authority so I may continue business.

All the best,
Josh Manion
Owner of "We Like To Move It, Move It!!!" LLC
360-525-7654