



1300 S. Evergreen Park D
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

FOR OFFICIAL USE ONLY			
Date Filed:	DOL/SOS:	ID:	Docket #:-
Staff Assigned	Insurance	Inspection	Permit Issued THG-
Reception #	111-0268-207-02	Receipt ID	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 and Attachment B \$ 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 3-4 and include a statement justifying the reinstatement \$ 35
- Name Change – Complete pages 3-4 and Attachment D

BUSINESS INFORMATION

Legal Name: ~~Move for Less LLC~~ *Two Men & a Moving Van LLC*

Physical Address: 240 sw 325th pl Federal way
WA
98023 _____

Mailing Address: 240 sw 325th pl Federal way
WA
98023 _____

Telephone Number: 2068222612

BUSINESS INFORMATION - continued

UBI #: ~~603615985~~ 602173351

USDOT #: ~~2910237~~ 307377A

Department of Labor & Industries Worker's Comp Acct? Account #

Employment Security Department registration number? ESD #

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>
<u>Yuriy Deyneka</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.**

Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:

We will provide better than exceptional service with an experienced work force and be as competitive as we can.

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

My workforce that I plan to hire and I have all worked in the moving industry for 8 years, and know all the aspects of it.

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 THG067981

Have you ever applied for and been denied a permit to operate as a motor carrier of property in Washington?

X No Yes If yes, please explain _____

Do you currently operate interstate? **X No** Yes If yes, please indicate your MC# _____

Do you operate interstate as an agent of another company? **X No** Yes

If yes, what is the name of the company? _____

ATTACHMENT D

**ONLY FILL OUT IF CHANGING NAME
CHANGE OF CORPORATE/INDIVIDUAL NAME
(WAC 480-15-400)**

This application is for name change only and must not involve a change in ownership, management, or control of the household goods operating authority.

A company must file a name change application to:

- Change a corporation's name
- Change an individual's name
(may be sole proprietor or individual in a partnership)
- Change or add a trade name

NOTE: You **may not** advertise to operate under the changed name until a permit is issued in the new name.

Current Name on Permit: TWO MEN AND AMOVING VAN LLC

Current Trade Name, d/b/a: ~~MOVE FOR LESS LLC~~

Address: 240 sw 325th pl Federal way WA 98023

Phone Number: 2068222512 Fax Number: 8885038568

Email Address: tmaamv@gmail.com USDOT #: 3073774

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

I request the name on household goods permit 67a8l be changed to:

New Name: _____

New Trade Name, d/b/a (if applicable): i want to add DBA MOVE FOR LESS

Address (if changed) _____

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

I certify that this information is true and correct, that I am authorized to execute and file this document on behalf of the applicant and that all information is current and valid.

J. Deynska
Signature and Title of Applicant

Federal way 03/20/19
Date and Location