

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: MOTIVATED MOVERS

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: JOE PUETZ

Address (include street address, mailing address, city, state, zip, and county):
2215 N. 145TH ST

Phone Number: 206-375-9316

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:
WE WILL BE MOVING SHORTLY

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
ITS A LOYAL AND DEDICATED COMPANY THAT WILL BE AROUND

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
They are Great!

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

[Signature]
Signature of Person Completing Form

1/4/09
Date and Location

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Applicant Name: MOTIVATED MOVERS

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: John Puetz

Address (include street address, mailing address, city, state, zip, and county): 428 NW 196th PL Shoreline, WA 98177

Phone Number: 206 459 3464

Do you currently need the services of a residential household goods moving company? No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company? No Yes If yes, please describe your future moving needs:

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community: Used this company previous with positive experience will use this company again in the future

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit? Good company with positive future

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signature of Person Completing Form Date and Location 1-2-09

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HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: Motivated Movers

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Marlon Wasker

Address (include street address, mailing address, city, state, zip, and county):
W729 Shoreline Park Drive NW Seattle WA 98127

Phone Number: 206-330-3386

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
No Yes If yes, please describe your future moving needs:
My girlfriend will move out together in the future and would use Motivated Movers

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:
and I know many people that can use his services and my friends and family can

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
I've never meet such a kind hearted company that cares about the customer and not their selves as much as motivated Movers

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

[Signature] _____
Signature of Person Completing Form
1-2-04 _____
Date and Location