

621 Woodland Square Loop SE
Lacey, WA 98503
P.O. Box 47250
Olympia, WA 98504-7250
Phone: 360-664-1222
Email: transportation@utc.wa.gov

Addendum to Application

Docket

Company

This is to document completion of missing or incomplete items in the initial application.



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: *Atlantic Transport LLC*

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: *Juan Martinez Self Employed*

Address (include street address, mailing address, city, state, zip, and county):
*404 23rd Ave SE #W2
Puyallup, WA 98372*

Phone Number: *(253) 264-9551* **Email:** *Jmartinez16osp@gmail.com*

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 family and I are hoping to find a house to move to in the near future. Possibly out of state*

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: *Myself and others in our community need a trustworthy mover. and reliable.*

Is there anything else the commission should consider when making a determination about this company's application for a household goods permit? *NO*

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

Juan Jose Martinez
Printed Name of Person Completing Form

Juan
Signature

8/10/23
Date



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HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: *Atlantic Transport LLC*

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: *Tiana Kindel*

Address (include street address, mailing address, city, state, zip, and county):
1327 23rd St. N.W. Puyallup, Wa 98371

Phone Number: *253-878-0775* Email:

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: *It will help the community to grow to have a local moving company near by.*

Is there anything else the commission should consider when making a determination about this company's application for a household goods permit? *NO*

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

Tiana Kindel

Printed Name of Person Completing Form

Tiana Kindel

Signature

8-11-23

Date

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: Atlantic Transport LLC

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Carlos Posadas

Address (include street address, mailing address, city, state, zip, and county):
32737 35th Ave SW Federal Way WA 98023

Phone Number: 206 946 5147 Email: cposadascardona@gmail.com

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: EVERY BODY NEEDS A GOOD TRUST MOVER. WE COULDN'T MOVE WITH OUT THEM.

Is there anything else the commission should consider when making a determination about this company's application for a household goods permit? NO

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

Carlos Carlos Posadas Cardona 8/11/2023
 Printed Name of Person Completing Form Signature Date