

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: Shields Transition Services

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Troy KUNAS

Address (include street address, mailing address, city, state, zip, and county):

12817 N. CRAIG ROAD
NINE MILE FALLS, WA 99026

Phone Number: 360 601 5216

Email: amustango@yahoo.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:

NOT for several years

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:

There are many individuals in need of assistance in transitional moves. As a senior my wife + I cannot handle the work needed to move.

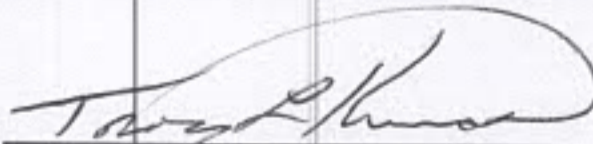
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit?

By all accounts in speaking with others, STS is a good firm that is fair and personable.

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

Troy KUNAS

Printed Name of Person Completing Form



Signature

20 Dec 21

Date

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Applicant Name: Shield Transition Services

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Jennifer Wagner, Owner, Property Management Partners

Address (include street address, mailing address, city, state, zip, and county):

6775 Rocky Point Way Nine Mile Falls WA 99026

Phone Number: 509 4351519

Email: jena@pmppokane.com

Do you currently need the services of a residential household goods moving company?

☐ No ☒ Yes If yes, please describe your current moving needs: Need furniture moved from house to shop for a remodel.

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: Need furniture moved from shop to house after remodel is done.

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:

To provide moving heavy furniture that we wouldn't be able to.

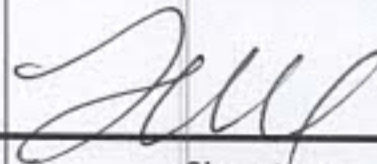
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit?

STS has been a great company to work with. They were able to fit us in during the holidays with short notice.

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

Jennifer Wagner

Printed Name of Person Completing Form



Signature

12.20.2021

Date

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Applicant Name:

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Melanie Bunnell

Address (include street address, mailing address, city, state, zip, and county):

1711 S. D Street, Spokane, WA 99224

Phone Number: (509) 362-7186

Email: myersmelanie@yahoo.com

Do you currently need the services of a residential household goods moving company?

☐ No ☒ Yes If yes, please describe your current moving needs: moving into an apartment, selling my house.

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: I will be purchasing a new home and moving.

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: Safe and quick transfer of household items, especially for people with special needs.

Is there anything else the commission should consider when making a determination about this company's application for a household goods permit?

Shields Transition Services is friendly and easy to work with

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

Melanie Bunnell

Printed Name of Person Completing Form



Signature

12/30/2021

Date