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.

# Fluid Motions Moving LLC Profit & Loss

January through December 2022

	Jan - Dec 22
Ordinary Income/Expense Income	
Reoccuring Cust.	256.00
Total Income	256.00
Expense	
Bank Service Charges	55.00
Business Insurance Expense	1,431.02
Merch fee/Direct withdrawl	9.26
Merchant deposit fees	39.46
Paper Service Fee	30.00
Professional Fees	1,010.00
Telephone Expense	600.00
Total Expense	3,174.74
Net Ordinary Income	-2,918.74
Other Income/Expense Other Income	
Funds added by owner	33.76
Total Other Income	33.76
Net Other Income	33.76
Net Income	-2,884.98



## **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: Desired Carter
The following must be completed by the Supporter of the applicant
Name, Title, and Business Name:  Sose-Ray Wilder (CSR/Facility House Reeper) UHAUL
Address (include street address, mailing address, city, state, zip, and county): 6403 MLけ JE Wy South Section NA 98118
Phone Number: (706) (B) -8387 Email: Wilde & Jose Raul 87@icland, 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:  Eventually Will Be Moving Into My own place And 3hoffing Asonnel for Such Quality Services.
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:  I believe This Family will be Fully capable of Providing Superior Services To The community (S) For which They will be providing their Services
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit? This Family Has Alseady been Excelent to Many of one customers with Transporting their belongings, Furthermore with this Family being given this opportunity I believe Everyone Including Them will Benefit greaty from such services.
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.
Tose-Rand Wilder Printed Name of Person Completing Form Signature Date



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Appreciate Cortor		
	,	
The following must be completed by the Supporter of the applicant		
Name, Title, and Business Name:  no itchell owers, uBox employee, uhan!.  Address (include street address, mailing address, city, state, zip, and county):  2965 40th Ave NE Tacong, wA, 9842		
Address (include street address, mailing address, city, state, zip, and county):		
2965 40th Ave NE 1000009, WA, 98432		
Phone Number: 253-232-4381 Email: mitchellowens97@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:		
(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:  Desiree Carter and her feemily are hard working, Loyal,  and hatest people. I take pleasure in helping them out when  they arrive at my work location. Granting this family a permit  they arrive at my work location. Granting this family a permit		
and hotelst people. I take pleasure in helping family a permit		
Is there anything else the commission should consider when making a determination about this company's	muning	
application for a household goods permit?		
Leartify (or declare) under penalty of parity under the laws of the state of Washington that the foregoing is true		
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.		
Mitchell overs		
Printed Name of Person Completing Form Signature Date 10/25/23	1	



## **ATTACHMENT A**

### HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: Desiree Carter
The following must be completed by the Supporter of the applicant
Name, Title, and Business Name: 5th, Stevens, Gentral Manager, When Othella In
Address (include street address, mailing address, city, state, zip, and county):  6403 MUC JF WAY 3  Seattle, WA 9818
Phone Number: (204 \ 723 - 1485 Email:
Do you currently need the services of a residential household goods moving company?  No Yes If yes, please describe your current moving needs:  However, my customers do, their needs anse weekly
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:  Movey indemide Chydomers in the upcommy years  who need to him published Moves
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:  OUR CUSTOMERS have the abolity to have Production movers
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit?  ALWAYS COMPLETES THE ASSIGNED SODS  ALWAYS WORKS SAFELY
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.  John Signature  Date