



HOUSEHOLD GOODS CARRIER APPLICATION

PERMIT



Type of Household Goods Authority Requested – Check one	Fee Required
<input type="checkbox"/> Emergency temporary authority (to meet an urgent need for up to thirty days) - Complete pages 1 - 5 and Attachment E	\$ 50
<input type="checkbox"/> Temporary authority (to meet a short-term need) – Complete pages 1 - 5 and Attachment A	\$ 250
<input checked="" type="checkbox"/> Permanent authority (at least six months must be served on a temporary provisional basis) – Complete pages 1 - 5 and Attachment A	\$ 550
<input type="checkbox"/> Permanent authority to transfer or acquire control resulting in a change in ownership or controlling interest (at least six months must be served on a temporary provisional basis) – Complete pages 1 - 5 and Attachment B	\$ 550
<input type="checkbox"/> Permanent authority to transfer or acquire control under the exceptions in WAC 480-15-260 – Complete pages 1 - 5 and Attachments B & C	\$ 250
<input type="checkbox"/> Reinstatement of permit (must be filed within 30 or 60 days of cancellation, depending on criteria set forth in WAC 480-15-460) – Complete pages 1 - 2 and include a statement justifying the reinstatement	\$ 250
<input type="checkbox"/> Name Change – Complete page 1 and Attachment D	\$ 35
<input type="checkbox"/> Extension of authority – Complete pages 1 - 5 and Attachment A	\$ 550

TYPE OF PAYMENT											
<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Amex	<input type="checkbox"/> Discover	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa						

Expiration Date: _____ Amount: _____

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Name (printed): _____ Date: _____

Signature: _____ Title: _____

FOR OFFICIAL USE ONLY

Date Filed: 12/3/03	Application #: P-79238	Motcar: 31899	Permit Issued: HG- 61162
Staff Assigned: [Signature]	Insurance: [Signature]	Inspection:	DOL/SOS: [Signature]

Reception #: 111-0268-207-02 550.00 111-0268-202-01 111-0268-013-20

0003704

TV-031976

BUSINESS INFORMATION


Name of Applicant Expert Moving & Storage, Inc.
(must be individual, partners of a partnership, or corporation)

Trade Name, if applicable _____

Physical Address 3305 108th ST. S., Ste 101, Lakewood, Wa 98499

Mailing Address PO Box 98032, Lakewood, Wa 98499

Telephone Number (253) 588-3886 Fax Number (253) 581-9461

UBI # 601 413 804  Email: expmov@earthlink.net

TYPE OF BUSINESS STRUCTURE

- Individual Partnership Corporation Other _____
(LP, LLP, LLC)

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 Percentage of Shares</u>
Edward P. Zielinski	President	100%

Choose one of the following for the territory in which you wish to operate:

- All counties in the State of Washington
 The following named counties only: _____

Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: Intrastate irregular route, non-radial service as a carrier of General Freight (local cartage) in the State of Washington; served as a carrier of Household Goods in the State of Washington.

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

I was reared in the moving & storage industry. While in school, I worked summers as a mover and for the last 13 years, I have worked full time in all aspects of the moving & storage industry. Since 1992 I have been President of Expert Moving & Storage Inc.

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: HG-16649

Have you ever applied for and been denied a permit to operate as a motor carrier of property?
 No Yes If yes, please explain: _____

Do you currently operate interstate? No Yes If yes, please indicate your:
 DOT# _____ MC# _____ Single State Registration Base State _____

Do you operate interstate as an agent of another company? No Yes If yes, what is the
 name of the company? National Van Lines, Broadview, IL

Do you have, or have you ever had a business related legal proceeding against you in Washington,
 or in any other state? No Yes If yes, please explain: _____

Have you ever been convicted of a Class A or B Felony? No Yes If yes, please explain:

Have you been cited for violation of state laws or Commission rules? No Yes If yes,
 please explain: _____

FINANCIAL STATEMENT			
You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available			
ASSETS		LIABILITIES	
		SEE ATTACHED BALANCE SHEET	
Cash in Bank	\$	Salaries/Wages Payable	\$
Notes Receivable	\$	Accounts Payable	\$
Accounts Receivable	\$	Notes Payable	\$
Investments	\$	Mortgages Payable	\$
Other Current Assets	\$	Other	\$
Prepaid Expenses	\$	TOTAL LIABILITIES	\$
Land and Buildings	\$	NET WORTH	
Trucks and Trailers	\$	Preferred Stock	\$
Office Furniture	\$	Common Stock	\$
Other Equipment	\$	Retained Earnings	\$
Other Assets	\$	Capital	\$

TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$
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EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheets if necessary). Vehicles must pass inspection and be issued a valid Commercial Vehicle Safety Alliance inspection decal before your application may be granted.

Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight
	SEE ATTACHED ENCLOSURE			

SAFETY AND OPERATIONS

In each of the categories shown below, list the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State Laws and rules. Please refer to the WAC rules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVERS LICENSE (CDL) REQUIREMENTS (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle must have a valid CDL.

Name: Edward P. Zielinski	Position: President
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DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: Edward P. Zielinski	Position: President
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DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: Edward P. Zielinski	Position: President
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CONTROLLED SUBSTANCES AND ALCOHOL TESTING (Title 49, Code of Federal Regulations Part 382 & Part 40) Any person who drives a commercial motor vehicle requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Name: Edward P. Zielinski	Position: President
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Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirement (49 CFR Part 382 and 49 CFR Part 40)

VEHICLE INSPECTION, REPAIR, AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Companies must ensure that each motor vehicle operated is regularly inspected, repaired, and maintained.

Name: Edward P. Zielinski	Position: President
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INSURANCE REQUIREMENTS (WAC 480-15-530) All companies must file and maintain proof of public liability and property damage insurance covering vehicles operated. (\$300,000 minimum coverage for vehicles under 10,000 pounds GVWR and \$750,000 minimum coverage for vehicles 10,000 pounds GVWR or more)

Name: Edward P. Zielinski	Position: President
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CARGO INSURANCE REQUIREMENTS (WAC 480-15-550) All companies must maintain cargo insurance coverage. (\$10,000 for household goods transported in motor vehicles under 10,000 pounds GVWR and \$20,000 for vehicles 10,000 pounds GVWR or more)

Name: Edward P. Zielinski	Position: President
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OPERATIONAL RESPONSIBILITIES

ANNUAL REPORTS and REGULATORY FEES (WAC 480-15-480) Companies must annually file a report of their financial operations and pay regulatory fees.

Name: Edward P. Zielinski

Position: President

STATE OF WASHINGTON – general laws, rules and regulations: Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the state of Washington, such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.

Name: Edward P. Zielinski

Position: President

DECLARATION OF APPLICANT:

*I understand that filing this application **does not** in itself constitute authority to operate as a household goods mover.*

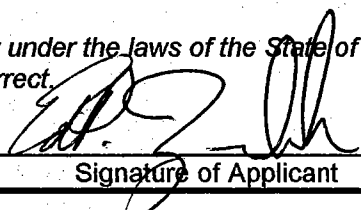
As the applicant for a household goods permit, I understand the responsibilities of a motor carrier, and I am in compliance with all local, state, and federal regulations governing businesses, including household goods movers, in the state of Washington.

I understand that if the Commission grants my application as a new entrant I will be granted temporary authority to provide service as a household goods carrier on a provisional basis for at least six months. During this time, the Commission will evaluate whether I have met the criteria in WAC 480-15-330 to obtain permanent authority. I also understand that I must comply with all conditions placed on my temporary permit and that failure to do so will result in cancellation of my permit.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Edward P. Zielinski

Print name of applicant



Signature of Applicant

08/20/20 Lakewood, Wa

Date & Place

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name:

Expert Moving & Storage, Inc.

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Metro Record Storage Inc. Richard L. Abbott, Vice President

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

PO Box 39674 (Mailing address)
Lakewood, Wa 98439-0674

2926 South Steele St (Physical address)
Tacoma, Wa 98409

Phone Number:

253-588-3115

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

No Yes If yes, please describe your current moving needs: Metro Record Storage is a full service firm that serves primarily medium to large corporate clients. We are frequently called upon to move as many as 500 cartons/boxes at a time, either for client delivery or supervised record destruction.

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:

Our business is growing and our need for moving services will only increase.

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 staff is unable to fully perform all required functions in house. Frequently outside movers are unable to accommodate our clients needs. I am well acquainted with the Expert Moving Co. management and staff and know that they will provide better service than I have received in the past.

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

As noted, I am acquainted with Experts capable staff and fully support this application.

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

Richard L. Abbott, Vice President

Richard L. Abbott

Signature of Person Completing Form

11-26-03 Tacoma, Wa.

Date and Location

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name:

EXPERT MOVING AND STORAGE, INC.

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Richard L. Abbott, President, Metro Warehouses, Inc.

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

P. O. Box 98028
3305 108th ST S., SUITE 103
Lakewood, Wa 98498-0028

Phone Number:

253-588-2459

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

No Yes If yes, please describe your current moving needs: Metro has a requirement to engage movers to deliver goods to and from our warehouse. Other companies are frequently not as responsive as I would like. Expert is located next to Metro and their proximity and availability would increase the efficiency of our operation.

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 need access to a responsive firm to deliver goods from our warehouse.

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: Expert is co-located with Metro. By using a firm whose employees I know well, I will be better able to serve my customers. Expert is eager to obtain my business and I am enthused by the prospect of using their services.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit? My resources have indicated that since 1992 Expert has performed very well in handling a significant number of international moves for the US military. I am confident that they will do just as well with intra-state moves. This is an experienced carrier with a very good record.

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

Richard L. Abbott, President

Richard L. Abbott

Signature of Person Completing Form

11-26-03 Tacoma, Wa

Date and Location

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Permit applications must include at least three shipper and/or public statements supporting the proposed household goods moving service. Shipper statements may come from persons and/or organizations with a need for household goods moving services, or who support the applicant's request for a permit to provide those services. These forms may be copied by the applicant as needed.

Applicant Name:

Expert Moving And Storage, Inc.

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

Karen Nelson, Vice President, Expert Forwarders, Inc.

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

3305 108th St S., Ste 100
P.O. Box 98032
Lakewood, Wa 98032

Phone Number: 1-800-726-1516

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

No Yes If yes, please describe your current moving needs: Expert Forwarders Inc. arranges for the pickup and delivery of more than 400 residential shipments per year. I am acquainted with Expert Moving & Storage management and staff and would like to use their services locally.

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: Expert Forwarders business is growing. Our need for a residential household goods moving company will only continue to increase.

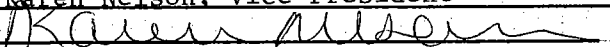
Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community: We are located in the same building complex as Expert Moving. Our ability to co-ordinate "face to face", when necessary, will only serve to increase our efficiency and consequently serve the convenience of the public.

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

All my past dealings with Expert Moving have been most satisfactory. I fully support this application.

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

Karen Nelson, Vice President


Signature of Person Completing Form

11-26-03 Tacoma, WA
Date and Location

EXPERT MOVING & STORAGE, INC.
Income Statement
For the Nine Months Ending September 30, 2003

	Current Month		Year to Date	
Revenues				
FINANCE CHARGE	0.00	0.00	0.00	0.00
GARNISHMENT FEE	0.00	0.00	0.00	0.00
FACTORING INCOME	0.00	0.00	2,106.49	1.26
ACCESS SERVICES, EXPERT	210.85	0.33	223.33	0.13
ACCESSORIAL SERVICES, GOLDEN	0.00	0.00	0.00	0.00
ADDITIONAL TRANSPORT	257.40	0.41	257.40	0.15
ADD TRANSPORTATION, GOLDEN	0.00	0.00	0.00	0.00
PACKING MATERIALS/INCOME	0.00	0.00	3,960.65	2.37
BOOKING COMMISSION	9,364.27	14.83	18,848.25	11.29
BOOKING COMMISSION, GOLDEN	0.00	0.00	0.00	0.00
COMMERCIAL STORAGE	3,911.70	6.20	9,044.45	5.42
COMMERCIAL STORAGE, GOLDEN	0.00	0.00	0.00	0.00
POV STORAGE	29,269.00	46.36	76,871.00	46.06
WAREHOUSE HANDLING POV	126.00	0.20	1,738.00	1.04
RETRIEVALS, EXPERT	0.00	0.00	0.00	0.00
CONTAINERS	80.00	0.13	1,280.00	0.77
CONTAINERS, GOLDEN	0.00	0.00	0.00	0.00
PHONE/COPY/FAX/MAIL/SEALS, EX	18.00	0.03	32.00	0.02
PHONE/COPY/FAX/MAIL/SEALS, G	0.00	0.00	0.00	0.00
CONTAINER RECOUP	300.00	0.48	480.00	0.29
CONTAINER RECOUP, GOLDEN	0.00	0.00	0.00	0.00
DELIVERY CHARGES	73.69	0.12	73.69	0.04
DELIVERY CHARGES, GOLDEN	0.00	0.00	0.00	0.00
DIRECT DELIVERY	362.60	0.57	1,129.30	0.68
DESTINATION CHARGES, GOLDEN	0.00	0.00	0.00	0.00
FUEL SURCHARGE, EXPERT	22.52	0.04	37.92	0.02
EXCESS MILAGE EXPERT	0.00	0.00	0.00	0.00
EXCESS MILEAGE, GOLDEN	0.00	0.00	0.00	0.00
EXTRA LABOR CHARGE, EXPERT	0.00	0.00	0.00	0.00
EXTRA LABOR CHARGE, GOLDEN	0.00	0.00	0.00	0.00
INTEREST INCOME	0.00	0.00	0.00	0.00
INTEREST INCOME GOLDEN	0.00	0.00	0.00	0.00
INTERSTATE DRAYAGE, EXPERT	0.00	0.00	0.00	0.00
INTERSTATE DRAYAGE, GOLDEN	0.00	0.00	0.00	0.00
INTERSTATE DRAYAGE, MOTOR	0.00	0.00	0.00	0.00
LINE HAUL	1,018.20	1.61	1,026.64	0.62
LINE HAUL, GOLDEN	0.00	0.00	0.00	0.00
COMMERCIAL MOVE LOCAL TARI	<7,743.89>	<12.27>	0.00	0.00
LOCAL DELIVERIES, GOLDEN	0.00	0.00	0.00	0.00
LOCAL MOVES	<1,284.46>	<2.03>	0.00	0.00
LOCAL MOVES, GOLDEN	0.00	0.00	0.00	0.00
MISC INCOME	11,065.76	17.53	20,473.92	12.27
MISC INCOME, GOLDEN	0.00	0.00	0.00	0.00
UNIDENTIFIED DEPOSIT	0.00	0.00	0.00	0.00
MONTHLY STORAGE	0.00	0.00	0.00	0.00
NTS PACKING, EXPERT	0.00	0.00	0.00	0.00
NTS PACKING, GOLDEN	0.00	0.00	0.00	0.00
NTS STORAGE, EXPERT	0.00	0.00	0.00	0.00
NTS WAREHOUSE HANDLING, EXP	0.00	0.00	0.00	0.00
ORIGIN SERVICES	3,849.60	6.10	12,842.81	7.69
ORIGIN SERVICES, GOLDEN	0.00	0.00	0.00	0.00
OVERFLOW CONTAINERS	85.75	0.14	550.73	0.33
OVER FLOW CONTAINERS, GOLDE	0.00	0.00	0.00	0.00
PICK UP FEES/TRUCK/LABOR, EXP	0.00	0.00	0.00	0.00
PICK UP AND HOLD, EXPERT	131.60	0.21	131.60	0.08
PICK UP AND HOLD, GOLDEN	0.00	0.00	0.00	0.00
PORT HANDLING	0.00	0.00	0.00	0.00
PORT HANDLING, GOLDEN	0.00	0.00	0.00	0.00

For Management Purposes Only

EXPERT MOVING & STORAGE, INC.
Income Statement
For the Nine Months Ending September 30, 2003

PORT HANDLING	0.00	0.00	0.00	0.00
DOCUMENTATION FEES, GOLDEN	0.00	0.00	0.00	0.00
RENTAL INCOME	0.00	0.00	0.00	0.00
REWEIGHTS	100.00	0.16	150.00	0.09
REWEIGHS, GOLDEN	0.00	0.00	0.00	0.00
RUSH DELIVERIES EXPERT	0.00	0.00	0.00	0.00
RUSH DELIVERIES, GOLDEN	0.00	0.00	0.00	0.00
S.I.T. STORAGE	2,038.36	3.23	3,567.86	2.14
S.I.T. STORAGE, GOLDEN	0.00	0.00	0.00	0.00
S.I.T. W/H HANDLING	2,069.37	3.28	2,573.38	1.54
S.I.T. W/H HANDLING, GOLDEN	0.00	0.00	0.00	0.00
S.I.T. DELIVERY	7,801.73	12.36	9,505.47	5.70
S.I.T. DELIVERY, GOLDEN	0.00	0.00	0.00	0.00
S.I.T. VALUATION, EXPERT	0.00	0.00	0.00	0.00
S.I.T. VALUATION, GOLDEN	0.00	0.00	0.00	0.00
REWEIGHS, EXPERT	0.00	0.00	0.00	0.00
REWEIGH	0.00	0.00	0.00	0.00
DRAYAGE CHARGE, EXPERT	0.00	0.00	0.00	0.00
OTHER INCOME, GOLDEN	0.00	0.00	0.00	0.00
INTEREST INCOME, EXPERT	0.00	0.00	0.00	0.00
INTEREST INCOM - GOLDEN	0.00	0.00	0.00	0.00
MISCELLANEOUS INCOME, GOLDE	0.00	0.00	0.00	0.00
Total Revenues	63,128.05	100.00	166,904.89	100.00
Cost of Sales				
SALES DISCOUNTS ALLOWED, EXP	0.00	0.00	0.00	0.00
SALES DISCOUNTS	0.00	0.00	0.00	0.00
DRAYAGE CHARGE, GOLDEN	0.00	0.00	0.00	0.00
WEIGHT TICKETS	0.00	0.00	0.00	0.00
WEIGHT TICKETS, GOLDEN	0.00	0.00	0.00	0.00
Total Cost of Sales	0.00	0.00	0.00	0.00
Gross Profit	63,128.05	100.00	166,904.89	100.00
Expenses				
PACKING MATERIAL, EXPERT	4,000.51	6.34	6,600.83	3.95
PACKING MATERIAL, GOLDEN	0.00	0.00	0.00	0.00
PEST CONTROL	195.88	0.31	440.73	0.26
CLAIMS EXPENSE	642.31	1.02	687.31	0.41
CLAIMS EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
EMPLOYMENT SECURITY EXPENS	0.00	0.00	11,285.28	6.76
L&I EXPENSE	47.50	0.08	17,563.26	10.52
FEDERAL UNEMPLOYMENT EXPEN	0.00	0.00	0.00	0.00
FACTORING EXPENSE	0.00	0.00	0.00	0.00
TRIP EXPENSES, EXPERT	300.00	0.48	600.00	0.36
TRIP EXPENSES, GOLDEN	0.00	0.00	0.00	0.00
GAS EXPENSE, EXPERT	0.00	0.00	0.00	0.00
GAS EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
TIRES, EXPERT	0.00	0.00	0.00	0.00
TRUCK REPAIR AND MAINT	1,475.26	2.34	1,475.26	0.88
TRUCK REPAIR AND MAINT. GOLD	0.00	0.00	0.00	0.00
W/H EQUIPMENT, EXPERT	0.00	0.00	0.00	0.00
W/H EQUIPMENT, GOLDEN	0.00	0.00	0.00	0.00
W/H EQUIPMENT, MAINT, EXPERT	0.00	0.00	0.00	0.00
W/H EQUIPMENT, MAINT, GOLDEN	0.00	0.00	0.00	0.00
W/H EQUIPMENT, LEASE, EXPERT	0.00	0.00	0.00	0.00
W/H EQUIPMENT, LEASE, GOLDEN	0.00	0.00	0.00	0.00

For Management Purposes Only

EXPERT MOVING & STORAGE, INC.
Income Statement
For the Nine Months Ending September 30, 2003

W/H SUPPLIES, EXPERT	0.00	0.00	15.05	0.01
W/H SUPPLIES, GOLDEN	0.00	0.00	0.00	0.00
ADVERTISING EXPENSE	0.00	0.00	0.00	0.00
ADVERTISING EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
MEETINGS & CONVENTIONS	0.00	0.00	0.00	0.00
AUTO EXPENSE, EXPERT	0.00	0.00	0.00	0.00
AUTO EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
AUTO ALLOWANCE	1,000.00	1.58	1,000.00	0.60
ACCOUNTING EXPENSE	0.00	0.00	0.00	0.00
BAD DEBT EXPENSE	0.00	0.00	0.00	0.00
BANK CHARGES KEY BANK	0.00	0.00	0.00	0.00
BANK CHARGES WA MUTUAL	0.00	0.00	30.00	0.02
CASUAL LABOR	4,177.00	6.62	4,937.00	2.96
CASUAL LABOR, GOLDEN	0.00	0.00	0.00	0.00
DONATIONS TO CHARITY	0.00	0.00	0.00	0.00
CONSULTING FEES	0.00	0.00	0.00	0.00
DEPR. EXP/OFF. FURN., EXPERT	0.00	0.00	0.00	0.00
DEPRECIATION EXP/COMPUTER, E	0.00	0.00	0.00	0.00
DEPRECIATION EXP/TRUCKS, EXP	0.00	0.00	0.00	0.00
DEPRECIATION EXP/TRAILERS	0.00	0.00	0.00	0.00
DEPRECIATION EXP/AUTO, EXP	0.00	0.00	0.00	0.00
DEPRECIATION EXP/W/H EQUIP	0.00	0.00	0.00	0.00
DEPRECIATION EXP/W/H SECURIT	0.00	0.00	0.00	0.00
DEPRECIATION EXP/LEASEHOLD I	0.00	0.00	0.00	0.00
DEPRECIATION EXP/LEASEHOLD I	0.00	0.00	0.00	0.00
COMPUTER MAINTENANCE	117.50	0.19	117.50	0.07
COMPUTER EXPENSE	105.00	0.17	105.00	0.06
COMPUTER SOFTWARE EXPENSE	0.00	0.00	0.00	0.00
DUES AND SUBSCRIPTIONS	28.00	0.04	108.00	0.06
DUES AND SUBSCRIPTIONS, GOLD	0.00	0.00	0.00	0.00
EMPLOYEE BENEFITS	0.00	0.00	0.00	0.00
EQUIPMENT RENTAL	0.00	0.00	0.00	0.00
EQUIPMENT RENTAL, GOLDEN	0.00	0.00	0.00	0.00
FACTORING FEES	0.00	0.00	0.00	0.00
INSURANCE/COMMERCIAL	8,197.60	12.99	17,451.20	10.46
INSURANCE/COMMERCIAL, GOLDE	0.00	0.00	0.00	0.00
INSURANCE/EMPLOYEE MEDICAL	0.00	0.00	0.00	0.00
INSURANCE/EMPLOYEE MEDICAL,	0.00	0.00	0.00	0.00
INSURANCE/OFFICERS LIFE	0.00	0.00	0.00	0.00
INTEREST EXPENSE, EXPERT	0.00	0.00	0.00	0.00
LANDSCAPE & MAINTENANCE	0.00	0.00	0.00	0.00
LANDSCAPE & MAINTENANCE, GO	0.00	0.00	0.00	0.00
JANITORIAL EXPENSES	0.00	0.00	0.00	0.00
LEASE/AUTO	0.00	0.00	0.00	0.00
LEASE/AUTO & TRUCK, GOLDEN	0.00	0.00	0.00	0.00
LEGAL/PROFESSIONAL FEES	5,080.64	8.05	9,586.72	5.74
LICENSES/BUSINESS	0.00	0.00	35.00	0.02
LICENSES/BUSINESS, GOLDEN	0.00	0.00	0.00	0.00
LICENSES/VEHICLE	59.00	0.09	59.00	0.04
MEALS/ENTERTAINMENT	108.39	0.17	1,127.73	0.68
OFFICE EXPENSE	50.77	0.08	129.99	0.08
OFFICE EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
POSTAGE EXPENSE	52.33	0.08	129.30	0.08
PENALTIES	0.00	0.00	0.00	0.00
RENT EXPENSE	10,825.17	17.15	30,867.12	18.49
RENT EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
MISC EXPENSE	0.00	0.00	0.00	0.00
PAYROLL SERVICE EXPENSE	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/CORP. OFFICE	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/CORP. OFFICE	0.00	0.00	0.00	0.00

For Management Purposes Only

EXPERT MOVING & STORAGE, INC.
Income Statement
For the Nine Months Ending September 30, 2003

PAYROLL EXPENSE/OFFICE	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/OFFICE, GOLD	0.00	0.00	0.00	0.00
GOLDEN DRIVER FOR EXPERT	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/DRIVERS	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/DRIVERS	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/WAREHOUSE	0.00	0.00	0.00	0.00
PAYROLL EXPENSE/WAREHOUSE,	0.00	0.00	0.00	0.00
REPAIR & MAINTENANCE/BUILDIN	0.00	0.00	0.00	0.00
REPAIR & MAINTENANCE/BUILDIN	0.00	0.00	0.00	0.00
SECURITY EXPENSE	132.00	0.21	198.00	0.12
SECURITY EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
DEPRECIATION EXP/LEASEHOLD I	0.00	0.00	0.00	0.00
TAXES/BUSINESS	270.01	0.43	994.65	0.60
TAXES/BUSINESS, GOLDEN	0.00	0.00	0.00	0.00
TAXES/PAYROLL	0.00	0.00	19.45	0.01
TAXES, PROPERTY	0.00	0.00	0.00	0.00
TOWING EXPENSE, EXPERT	0.00	0.00	0.00	0.00
TELEPHONE EXPENSE	708.12	1.12	434.51	0.26
TELEPHONE EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
TRAINING EXPENSE, EXPERT	0.00	0.00	0.00	0.00
TRAVEL EXPENSE, EXPERT	0.00	0.00	0.00	0.00
TRAVEL EXPENSE, GOLDEN	0.00	0.00	0.00	0.00
UTILITIES & REFUSE	648.52	1.03	1,484.47	0.89
UTILITIES & REFUSE, GOLDEN	0.00	0.00	0.00	0.00
UNIFORM EXPENSE	0.00	0.00	0.00	0.00
OTHER EXPENSES, EXPERT	0.00	0.00	0.00	0.00
INCOME TAXES, EXPERT	0.00	0.00	0.00	0.00
Total Expenses	<u>38,221.51</u>	60.55	<u>107,482.36</u>	64.40
Net Income	\$ <u>24,906.54</u>	39.45	\$ <u>59,422.53</u>	35.60

TOTAL MV EQUIPMENT INVENTORY - 031124 - Reg Expire Date sort - Reg + Ex Date Verified

EXPERT EQUIPMENT LIST		INSPECTED / VERIFIED ON: 11/24/2003																		
#	CO	YR	MAKE/MODEL	VIN #	V	LICENSE #	LICENSE EXPIRES	V	LAST INSP	INSP EXPIRE	REMARKS									
TRACTORS																				
87	EX	1990	INT'L Model 8100 TRACTOR	1HSHBGFN5LH282626	V	A18377A	01/17/04	V												
TRAILERS																				
T-17	EX	1980	STRICK CURTAIN DROPVAN BLUE RATCHET	229772	V	9343KQ	PERM	V												8.25 x 15TR Tires
T-555	EX	1972	40' KENTUCKY FURNITURE VAN	43305	V	7700JB	PERM	V												
T-556	EX	1969	DORSEY TRAILER	85227	V	5904LT	PERM	V												
PACK VEH																				
28	EX	1979	BLUE "PACIFIC" CHEVROLET VAN	CGU159415710	V	A05762K	03/30/04	V												
VANS																				
58	EX	1985	MACK VAN-24' BOX/VG6M11A8FB023966		V	A29931B	04/20/04	V												
OTHER																				
	EX		CATERPILLAR FORKLIFT	T-5013-12N2437	V															

INQR UTL024P1 MASTER LICENSE SERVICE 12/01/03
 BUSINESS ENTITY INQUIRY 14:33:34

UBI: 601 413 804 001 0001 State of Inc: WA Loc Status: A
Type: PROFIT CORPORATION Date of Inc: 09 17 1992 Corp Status: A

Owner Name: EXPERT MOVING & STORAGE, INC.

Reg. Agent: EDWARD P ZIELINSKI
Reg. Address: 3305 108TH ST S STE 101 Exp. Date: 09 30 2004
 PO BOX 98032 Total Shares authzd:
 LAKEWOOD WA 98498 Total Shares issued:

Firm Name : EXPERT MOVING & STORAGE, INC.
Loc: 9726 47TH AVE SW Mail: PO BOX 99069
 TACOMA WA 98499 TACOMA WA 98499

Phone: (206) 588-3886 Registered Tradenames for this UBI? No
RFI: No NSF: No Location First Activity: 09 17 1992
RFP: No Withhold: No Last License Issue: 05 27 1993
TRANSFER: _____ {Press <ENTER> for Endorsements List}
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
 GLIST APLST UBIQ SERV TRDU INQA INQR MMENU

INQR UTL024P1 MASTER LICENSE SERVICE 12/01/03
BUSINESS ENTITY INQUIRY 14:33:43

UBI: 601 413 804 001 0001 Loc Status: A
Type: PROFIT CORPORATION

Owner Name: EXPERT MOVING & STORAGE, INC.

Firm Name : EXPERT MOVING & STORAGE, INC.

Page: 1

Endorsements	Unit	Account #	Stat	Date	Expires
TAX REGISTRATION			A	05 11 1993	
UNEMPLOYMENT INSURANCE			A	05 11 1993	
INDUSTRIAL INSURANCE			A	05 11 1993	

TRANSFER: _____ End of Endorsement List

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
GLIST APLST UBIQ SERV TRDU INQA INQR MMENU



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Corporations

Corporations Division - Registration Data Search

EXPERT MOVING & STORAGE, INC.

UBI Number	601 413 804
Category	Regular Corporation
Profit/Nonprofit	Profit
Active/Inactive	Active
State of Incorporation	WA
Date of Incorporation	09/17/1992
License Expiration Date	09/30/2004

Registered Agent Information

Agent Name	EDWARD P ZIELINSKI
Address	3305 108TH ST S STE 101 PO BOX 98032
City	LAKESWOOD
State	WA
ZIP	98498

Special Address Information

Address
City
State
Zip


[Return to Search List](#)

Disclaimer

Information in the Secretary of State's Online Corporations Database is updated Monday through Friday by 5:00 a.m. Pacific Standard Time (state holidays excluded). Neither the State of Washington nor any agency, officer, or employee of the State of Washington warrants the accuracy, reliability, or timeliness of any information in the Public Access System and is not liable for any losses caused by such reliance on the accuracy, reliability, or timeliness of such information. While every effort is made to ensure the accuracy of this information, portions may be incorrect or not current. Any person or entity who relies on information obtained from the System does so at his or her own risk.



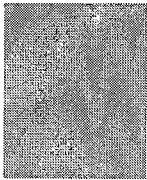
Bonnie Allen/WUTC
12/09/2003 10:36 AM

To Tina Leipski/WUTC@WUTC
cc
bcc
Subject Re: NEW HHG APPLICATION 

I have no additional information about this applicant that would suggest anything other than "grant with usual conditions."

Bonnie L. Allen, Regulatory Analyst
PHONE 360-664-1226 FAX 360-586-1130
ballen@wutc.wa.gov

Washington Utilities & Transportation Commission
PO Box 47250
Olympia, WA 98504-7250
Tina Leipski/WUTC



Tina Leipski/WUTC
12/03/2003 03:27 PM

To: Licensing Services, Business
Practices, Transportation Special
Investigators, Bonnie
Allen/WUTC@WUTC
cc: Carolyn Caruso/WUTC@WUTC
Subject: NEW HHG APPLICATION

We have an application for permit to transport household goods in the State of Washington from:

Expert Moving & Storage, Inc.
3305 108th ST. Ste 101
Lakewood, WA 98499

Edward Zielinski, President 100% (He is 100% owner of Golden Services, LLC HG-16649)

COMPLIANCE: There is nothing in the Volpe system regarding this carrier.

If you have any concerns or need more information regarding this carrier, just let me know.

Thanks!!! Tina

DEC-10-2003 08:20AM FROM-BRATRUD MIDDLETON INS

253-752-8658

T-342 P.002/002 F-046

MAIL FIRST THREE PARTS TO THE STATE COMMISSION, RETAIN FOURTH PART FOR YOUR FILE
Form E

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE (Executed in Triplicate)

Filed with Washington Utilities and Transportation Commission (hereinafter called Commission)

This is to certify, that the Granite State Insurance Co

(hereinafter called Company) of 1827 Clay Street Napa CA 94559
(Home Office Address of Company)

has issued to Expert Moving & Storage Inc of PO Box 96032 Lakewood WA 98488
(Name of Motor Carrier) (Address of Motor Carrier)

a policy or policies of insurance effective from 08/23/03 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State of which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon. This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 1827 Clay Street Napa CA
(Street Address) (City) (State) 94559
(Zip Code)

this 9th day of December, 2003

Insurance Company File No. 005304871-1
(Policy Number)

George Wickham
Authorized Company Representative