RECEIVED

AUG 282012

TV-120850



WASH, UT. & TP COMM HOUSEHOLD GOODS MOVING COMPANY PERMIT APPLICATION



Replacement app-

	replacement c	999
	Type of Household Goods Authority Requested - Check one	Fee Required
۵	Emergency temporary authority (to meet an urgent need for up to thirty days) - Complete pages 2 - 7 and Attachment E	\$ 50
	Temporary authority (to meet a short-term need) - Complete pages 2 - 7 and Attachment A	\$ 250
٥	Permanent authority (at least six months must be served on a temporary provisional basis) – Complete pages 2 - 7 and Attachment A	\$ 550
	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 2 - 7 and Attachment B	\$ 550
0	Permanent authority to transfer or acquire control under the exceptions in WAC 480-15-335 – Complete pages 2 - 7 and Attachments B & C	\$ 250
	Reinstatement of permit (must be filed within 30 or 60 days of cancellation, depending on criteria set forth in WAC 480-15-450) – Complete pages 2 - 3 and include a statement justifying the reinstatement	\$ 250
۵	Name Change – Complete pages 2 - 3 and Attachment D	\$ 35
	Extension of authority – Complete pages 2 - 7 and Attachment A	\$ 550

			Γ	YPE OF I	PAYM	ENT							
Check	☐ Money C	Order	☐ Amex ☐ Mastercard			□Vi	□ Visa						
,													
Amount:			_					Expira	ition D	Date:			
CERTIFICATION that I am authorize	: I, the undersi	igned, und nd file this	ler penalty s document	for false state t on behalf of	ement, co	ertify that the	ne foll nat all	owing inforn	inform ation	nation on file	is true is cur	and corent and	orrect, d valid.
Name (printed):		 		(Company	Name:							
Cardholder's Signa	ature:		1 	_		Dat	e:			***			
		L_{i}	FOR	OFFICIA	L USF	CONLY				<u>/ </u>			
Date Filed 12		SPAIN		D: 643	38	Permi	t Issu	red: T	*10- H1	4	119	$\mathcal{Z}_{\mathcal{C}}$	2
Staff Assigned:	Insura	nče: # 4121		Inspection:		Docke	 et #	TV	(2	0	85	O,	
Reception #: 111-0268-207-02	03956			7-01		111-02	68-01	3-20_					

We ady pd \$35 -

Page 2 of 12

BUSINESS INFORMATION
Name of Applicant (must be individual, partners of a partnership or corporation)
Trade Name, if applicable From Man Moves and Strage, Inc.
Physical Address 4715 A Britton Rd. Bellingham, 414 98776
Mailing Address/495 Lahr Dr Bellingham, ult 9/006
Telephone Number (360) 233-1033 Fax Number () none UBI#: 602 935 783 (Email: Wonner movers & concest. not
USDOT #: DOT 1981024 (If you currently don't have one, you can go online at www.fmcsca.dot.gov/online-registration to apply for one or call 360-596-3816 or 360-596-3803 for assistance.)
Have you established a Worker's Compensation Account with the Department of Labor & Industries? No XYes L & I Account No. 963 425 -01 (required if you have employees.)
Have you registered with the Employment Security Department? □ No 本Yes ESD No.1→600 → (required if you have employees)
Have you registered your business with the Department of Revenue? ☐ No XYes
TYPE OF BUSINESS STRUCTURE
☐ Individual ☐ Partnership ☐ Corporation ☐ Other(LP, LLC)
List the name, title and percentage of partner's share or stock distribution for major stockholders:
Name Name Stock Distribution or Percentage of Shares ECL M Stock Distribution or Percentage of Shares
Jusan K. Stewart Mush Vice President 50%

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: Packing transporting, storing househad furniture and goods. With our experience and reputation we can continue to provide encaptional moving services to those who are relocating in Wilshington Stake.
Briefly describe your experience in the transportation/household goods moving industry: We are a locally sured, flerily operated business in Bellington: With most of our business coming from reterrals.
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 HGIBVLL
Have you ever applied for and been denied a permit to operate as a motor carrier of property in Washington? ✓ No ☐ Yes If yes, please explain
Do you currently operate interstate? ✓ No ☐ Yes If yes, please indicate your MC# and USDOT#
Do you operate interstate as an agent of another company? No Ses If yes, what is the name of the company?
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 crime? No □ Yes If yes, please explain:
Have you been cited for violation of state laws or Commission rules? In No X Yes If yes, please explain: Recently we were quarted and were made aware of evens whe we have since attended bot training and were using approved forms and procedures on of which is this process of genting Page 4 of 12

Revised 06-10 name registered.

FINANCIAL STATEMENT

You must complete the following financial statement or attach a balance sheet, profit and loss statement, or business plan.

Asse	ts	Liabilities	
Cash in Bank	\$8,200.00	Salaries/Wages Payable	\$ 850,00
Notes Receivable	\$3,105.00	Accounts Payable	\$2,411.00
Investments	\$	Notes Payable	\$
Other Current Assets	\$4,211.00	Mortgages Payable	\$
Prepaid Expenses	\$5,804.00	TOTAL LIABLITIES	s 3,261.00
Land and Buildings	\$	NET WORTH	64,959.00
Trucks and Trailers	\$ 39,000.00	Preferred Stock	\$
Office Furniture	\$3,700.00	Common Stock	\$
Other Equipment	\$4,200,00	Retained Earnings	\$
Other Assets	\$	Capital	\$
TOTAL ASSETS	\$68,220.00	TOTAL LIABILITIES & NET WORTH	\$68,220.00

EQUIPMENT LIST

Describe the equipment you will use (attach additional sheets if necessary).

Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight
1998	Freightliner	B16156K	IFV6HLBA6WH956351	26,000.00 165
1997	Ford 6-350	B53/85T	IFDKE 3752VHB2527	10,000,00 165
1996	Ford CF7000		IFOWH 70C2 TVAO338	
1995	Ford F-8000		i	α .
1989	International			26,000,00 lbs

SAFETY AND OPERATIONS

List the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State Laws and commission rules (WAC) as described below. 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 DRIVER'S LICENSE (CDL) STANDARDS REQUIREMENT AND PENALTIES (Title 49, Code of Federal Regulations Part 383). If you operate commercial motor vehicles, your drivers must have a valid CDL.

DRIVER QUALIFICATION REQUIREMENTS: (Title 49, Code of Federal Regulations Part 391). Each of your drivers must meet minimum qualification requirements. You must maintain driver qualification files for each driver.

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395). Each of your drivers must maintain hours of service logs. You must maintain true and accurate hours of service records for each driver.

CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code of Federal Regulations Part 382 and Part 40). If you operate commercial motor vehicles, your drivers must be in a Controlled Substance and Alcohol Use and Testing program. You must have an alcohol and controlled substances testing program.

INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396). You must systematically inspect, repair, and maintain all motor vehicles.

PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393). You must maintain parts and accessories in a safe condition.

LIABILITY INSURANCE REQUIREMENTS (WAC 480-15-530). You must file and maintain proof of public liability and proper damage insurance (\$300,000 minimum coverage for vehicles under 10,000 pounds GVWR and \$750,000 minimum coverage for vehicles 10,000 pounds GVWR or more) CARGO INSURANCE REQUIREMENTS (WAC 480-15-550). You 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:			Position:	
Eric	M. Stewart		Olypper	

(71	PER	Δ	TI	O_{N}	JAI	T. T.	ES	PC	IN	S.	IBIL	TT	TES	2
•	,,	. 121	$\overline{}$		$\mathbf{O}_{\mathbf{L}}$		<i></i>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>!</i> ! !	L)	LDIL	/L L	1124	•

Annual Reports and Regulatory Fees (WAC 480-15-480). You must annually file a report of your financial operations and pay regulatory fees.

Name: Ene m. Stewart Position: Owner

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 the 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 (oversize or over-weight permits); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.

Name: Eric m Stewart Position

OWNER

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 receive 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.

My employees are sufficiently trained to comply with commission rules regarding estimates, bills of lading, rates and charges and terms and conditions of household goods moves. In addition, my employees are sufficiently trained to comply with commission rules regarding vehicle operation, maintenance, and all other safety requirements. My company will provide a copy of the customer survey to each customer for whom we provide transportation service.

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.

Eric M Stewart

7-25-12 42154 Britton Rol. Bellington, UM 97326

Date and Location

ATTACHMENT B

Transfer or Acquisition of Control

Applicant is seeking one of the following – please check one:
☐ Transfer ☐ Acquisition of Control
Current Name on Permit (Seller): Eric Stewart d/b/a Impression ces
Current Trade Name on Permit (Seller) C11C S/EWAY 0/01/2 1/2
Address (Seller) 4215-4 Driffor Ko, Dellingham, VVA 18008
Current Trade Name on Permit (Seller) Eric Stewart d/b/a 2 move of Seller) 4215-A Britton Rd. Bellingham, WA 98886 HG Permit Number: 14611862 Phone Number (Seller) 360-733-1083
Does the transfer of this permit fall under the provisions of WAC-480-15-335? No best please complete Attachment C.
Have all fines or penalties owed to the commission been paid? ☐ No Yes
Has the closing annual report been filed with the commission? ☐ No Yes
A customer may file a loss or damage claim for up to nine months following a move and may file a loss or damage lawsuit for up to two years following a move. Who will be responsible for handling claims filed by customers for loss or damage that occurred on moves taking place prior to the sale and transfer/acquisition?
RELEASE OF AUTHORITY
I, the seller, have sold or otherwise released interest in my household goods permit number HG-11862 to the following:
Name of Buyer: Eric Stewart MA Trade Name of Buyer; IRON MAN MOVERS AND STORAGE INC.
Trade Name of Buyer; IRON MAN MOVERS AND STORAGE, INC.
We, as applicants, hereby jointly declare and affirm that all information is true to the best of our
knowledge. 4215 Britton Rd-A Bellingham, WA 98026
8-6-12
Seller's Signature Date and Location 4 & 15 Britton Rd - A Bellingham, WA 98006 8-6-70 Date and Location
Buyer's Signature Date and Location

ATTACHMENT C

TRANSFER OR ACQUISITION OF PERMANENT HOUSEHOLD GOODS AUTHORITY UNDER EXCEPTIONS IN WAC 480-15-335

l.	apt	commission will grant an application for permanent authority without public notice or comment if the licant is fit, willing and able to provide service and the application is filed to transfer or acquire control of manent authority for one of the following reasons (check one, if applicable):
		A partnership has dissolved due to the death, bankruptcy, or withdrawal of a partner, and that partner's interest is being transferred to one or more of the remaining partners or a spouse;
		A shareholder in a corporation has died and that shareholder's interest is being transferred to a surviving spouse or one or more surviving shareholders;
		A sole proprietor has died and the interest is being transferred as property of the estate;
		A sole proprietor has died and the interest is being transferred as property of the estate; An individual has incorporated, and the same individual remains the majority shareholder;
	۵	An individual has added a partner, but the same individual remains the majority partner;
	٥	A corporation has dissolved and the interest is being transferred to the majority shareholder;
		A partnership has dissolved and the interest is being transferred to the majority partner;
		A partnership has incorporated and the partners are the majority shareholders; or
		Ownership is being transferred from one corporation to another corporation when both are wholly owned by the same shareholders.
eorj esta	ora	ntation supporting the checked box, above, must be included with your application. You may submit a e resolution, partnership agreement, court order, death certificate, will or other proof of right to inherit, ecutor's statement, community property agreement or other such documentation that may support your
2.	fol	e Commission will grant an application for permanent authority without temporary permit operations lowing public notice or comment if the applicant is fit, willing and able to provide service and the plication is filed to transfer or acquire control of permanent authority for the following reason:
		Ownership or control of a permit is being transferred to any shareholder, partner, family member, employee, or other person familiar with the company's operations and the household goods moving services provided. If you check this option, please complete the following:
		a. Has the permit been actively used by the current owner to provide household goods moving services during the last twelve-month period?
		b. Explain why the transfer of ownership or control is necessary to ensure the company's economic viability: To Comply with WUTC Tariff 15-C
		c. Describe the steps taken by the applicant and the current owner to ensure that safe operations and continuity of service to the customers are maintained: The Transfer is in Mame only and will not affect continuity of Service
		·



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF INCORPORATION

to

IRON MAN MOVERS AND STORAGE, INC.

a/an WA Profit Corporation. Charter documents are effective on the date indicated below.

Date: 4/24/2009

UBI Number: 602-925-782

APPID: 1425570



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State

FILED SECRETARY OF STATE SAM REED

APRIL 24, 2009

STATE OF WASHINGTON

 \mathbf{OF}

IRON MAN MOVE RS AND STORAGE, INC.

KNOW ALL MEN BY THESE PRESENTS: That the undersigned, being over the age of eighteen (18) years, and for the purpose of rming a corporation under the Washington Business of Incorporation:

ARTICLE 1. NAME

The name of this corporation is IRO MAN MOVERS AND STORAGE, INC.

ARTICL 2. DURATION

The effective date of incorporation
Office of the Secretary of State. The corporation's period of duration is perpetual.

ARTICL 3. PURPOSES

This corporation is organized for the Howing purposes:

- a. To provide professional moving/hating and storage of personal property services for profit and to engage in generally and carry judgment of the Board of Directors, at any lawful business or trade which may, in the corporation.
- b. To own, acquire, sell, lease, pledge or mortgage real and personal property (including condominium units) of all kinds; to acquire by purchase, subscription or otherwise any obligations of any person, firm or corporation including its own stocks; to borrow money and secure the payment thereof in any lawful marrier.
- c. To apply for, obtain, purchase, lease copyrights, patents or inventions, and to use or otherwise dispose of, the same; to loan convenient, with or without security, in order to further the corporate purposes.
- d. To acquire by purchase or otherwise and to own, hold, cancel, reissue, sell, pledge and otherwise deal in the stock of this corporation, provided that the money or property of the corporation shall not be used for purchase of shares of its own stock when such use would cause any impairment of the capital of the corporation. The corporation shall not be entitled to vote, either directly or indirectly, on any shares of its own stock which it may hold.