

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

Page 2 of 7

CHECKLIST

Ensure the following items are included with your Household Goods Moving application:

Completed application	ion					
Manufacea abbucation	n and fee					
Register with Departr	nent of Labor & Indust	tries 🗸 . () .	Л		1.14	
Register with Employ	nent of Labor & Industraent Security Departm	nent / N/A M	o emplo	yees	sex Wh	
Wikegister with Departu	nent of Revenue/Busin	ess Licensing Servi	ce (UBI#) /20	2-07	-085	
I /VREDISTER WITH Secretar	0/ Of F4-4-/- O.EE: /:C					
Completed required H	lousehold Goods Indus	try Training 100	aistered	Dog (Quarint 19:) <i>മ</i> ി <i>മ</i>
<u> </u>	recuse of Bovertillell	Lissued photo ID	card for each p	erson na	amed in the	rose
application (abload a	s a separate documen	t)				
Evidence of enrollmer	it in a drug and alcohol	testing program, o	r evidence that	vou have	in place your own	
ar all arra arconor restil	ig bi ográfii, it your co r	npany operates c	ommercial veh	icles and	has CDI drivers	
300 43 CIT 302[E] UIIU	303.5.1411000 PCC					
Evidence of insurance	 combined single limit 	of public liability a	nd property da	mage (Fo	rm F) and cargo	
" " " " " " " " " " " " " " " " " " "						
XiAttachment A - Three	or more completed stat	tements of support	from people in	the com	munity supporting	
the proposed service					and adplotting	
	HOUSEHOLD	GOODS MOVI	NG COMPA	NY		
	PER	MIT APPLICAT	TION .			
The transfer of the contract o	EOR (C	DEFICAL USE ONLY	7.57, 1.1, 180, 100	11.7.7.50		
Date Filed: 1/0/2020	Company: AAA M	oving & Stor	age	Docket	# TV 000000	
					#: IV=ZUUh_5U	
Receipt ID: 70321		: 13588	Amount		#: TV-200630 \$550	
111-0268-207-02	Payment ID 111-0268-032-20	13588				
111-0268-207-02	111-0268-032-20		Amount			
111-0268-207-02	111-0268-032-20		Amount		\$550	
Type of Household Go	ods Authority Requ	ested – Check C	Amount			
Type of Household Go Provisional and pe	ods Authority Requ	ested – Check C	Amount	Paid:	\$550	
Type of Household Go Provisional and pe permanent authori Note: Per RCW 81	ods Authority Requirmanent authority. The ty is a one-time fee. Co. 80.075(2), applications	ested – Check C e fee for provisiona implete pages 3-7 a	Amount Ine I and then	Paid:	\$550 <u>Fee</u>	
Type of Household Go Provisional and pe permanent authori Note: Per RCW 81	ods Authority Requ	ested – Check C e fee for provisiona implete pages 3-7 a	Amount Ine I and then	Paid:	\$550 <u>Fee</u>	
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Type of Household Go Provisional and pe permanent authori Note: Per RCW 81 commission for at Reinstatement of permanent	ods Authority Requirmanent authority. The ty is a one-time fee. Co. 80.075(2), applications least 30 days before iss	e fee for provisional implete pages 3-7 as must be on file with uance.	Amount Ine I and then and Attachment th the	Paid:	Fee \$550	
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Type of Household Go Provisional and pe permanent authorical Note: Per RCW 81 commission for at Reinstatement of pon criteria set forth statement justifyin If longer than 30 di WAC-480-15-302(1	ods Authority Requirement authority. The ty is a one-time fee. Co. 80.075(2), applications least 30 days before issuermit Must be filed within WAC 480-15-450. Cg the reinstatement. But ays after cancellation, 1).	e fee for provisional mplete pages 3-7 as must be on file with uance. thin 30 days of can omplete pages 3 as usiness letter form	Amount Ine I and then and Attachment th the cellation, depend 7, and includent	Paid:	Fee \$550	

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Phone: 360-664-1222 Email: transportation@utc.wa.gov

	Section 1/- BUSINESS INFORMATII	an water
Legal Name: AAA MOVING & ST	ORAGE. INC	UN .
Trade Name, if applicable:		
Physical Address: 2105 FRANK		
Mailing Address: 717 R GUTD	ALBERT ROAD, FIFE, WASHINGTON	98424
	ORDER AVENUE, ANCHORAGE, AK 99	9501
907-276-350	06 Email: greg@aaa-n	noving.com
Contact Name: Greg Wakefield		
USDOT#: 2971759 If you do not	have a USDOT number, go on-line at http	os://cms8.fmcsa.dot.gov/registration to
	1100,	to the state of th
is your business registered with the	e Department of Revenue? No	- No.
Business License/UBI#: 602-076-		Yes
Department of Labor & Industries	(L&I) Worker's Comp Account #: see	
Employment Security Department	(ECD) residue (ECD)	note
If you will not be setting up an account will	th 181 or 550 t	
workers. Per WAC 480-15-555, a criminal b	Dackground chock must be	oyees, please explain how you plan to obtain
hire day labor from a temp agency, they m	bush posts and must be completed on each	h person you intend to hire. If you intend to
AAA MOVING & STORAGE INC.	15 a Sister Rose +	Refer also to WAC 480-15-302 and 305.
American Moving	Services of Washing	to Coleman
De providing a c	driver who is due	I qualified with
Coleman American	is a sister Corporation Services of Washing driver who is due and AAA Moving	& Storage Inc.
L		
Individual Partnership	Type of Busines:	· · ··································
	Corporation Other (LP, LLP, LLC)	State of incorporation
List the name title and name		_ AI.ASVA
Name	of all partner's share or stock distribu	tion for major stockholders:
GREG WAKEFIELD	ride	Stock Distribution/% of Shares
JEFFREY COLEMAN	L-LIGHT SHAKEHOLDER	50%
JOHN COLEMAN	DIRECTOR SHAREHOLDER	25%
and the second to the contract department of the second to	DIRECTOR SHAREHOLDER	25%
and the second s	· · · · · · · · · · · · · · · · · · ·	

Provide a copy of a valid driver's license or government-issued photo identification card for each person named in the application. Upload or email as a separate attachment. Application processing will not begin until the commission/



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Section 2 - ARPLICATION QUESTIONNAIRE 1. Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service:
AAA MOVING & STORAGE INC. will be servicing service members by booking shipments for interline shipments within the Dept. of Defense Agencies. This company is a Freight Forwarder for the military and government agencies.
2. Briefly describe your experience in the transportation/household goods moving industry:
AAA MOVING & STORAGE INC. is family owned and has been in business since 11/18/19 serving Dept. of Defense contracts.
3. Do you currently hold, or have you ever held, a Household Goods permit in Washington? No X Yes If yes, please indicate your permit number: HG 11885
4. Have you ever applied for and been denied a Household Goods permit in Washington? X No Yes If yes, please explain:
5. Do you currently operate interstate? No X Yes If yes, please indicate your MC#: FF-1197
6. If you have interstate authority, have you registered for Unified Carrier Registration? No very Yes
7. Do you operate interstate as an agent of another company? No XYes If yes, what is the name of the company? Allied Van Lines
8. Have you completed commission-sponsored training? X No Yes If "yes" date:
9. Will you be employing CDL drivers? X No Yes
If "yes", you must attach evidence of enrollment in a drug and alcohol testing program.
Please answer the following questions completely. If there are multiple persons listed in this application with legal proceedings or criminal convictions to declare, provide documentation on a separate attachment
10. Does any person named in this application have, or has ever had a business-related legal proceeding against you in Washington state, or in any other state? X No Yes If "yes" please list below*:
Type of Legal Proceeding Date State
*attach additional pages if necessary



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11. Has any person named in this application misconduct, identity theft, fraud, falsoubstance? X No Yes If yes	ation ever been co se statements, or t s, please list below	ii wananalaciine. Sale or	olving theft, bu distribution o	arglary, assault, sexual of a controlled
	Conviction			
179001	CONVICTION		Date	State
				-
*attach additional pages if necessary				
12. Has any person named in this applic have committed a civil offense in Washi X No Yes If yes, please list	-8-4.1 010101 01 01	victed of a criminal offer found to have violated Co	nse in Washin ommission rul	gton state, 2) found to les?
Violation	n	Date of	conviction	DCM/MAG
			-	RCW/WAC
*attach additional pages if necessary				
13. If you would like to receive informat	Castiana	(action programs of C) a victim of the remarkation of the programs of the prog	<u> </u>	nessyolan.
Cash in Bank			Liabilities	
Notes Received	236204	Salaries/Wages Paya	ble	23901
Investments	73200416	Accounts Payable		1634498
Other Current Assets	908121	Notes Payable		107756
Prepaid Expenses		Mortgages Payable		1345290
Land and Buildings	1150055	Total Liabilities		
Trucks and Trailers		Net Worth		3111445
Office Furniture	1114788	Preferred Stock		
		Common Stock		· · · · · · · · · · · · · · · · · · ·
Other Equipment		Retained Earnings		
Other Assets	4992103	Capital		8486242
TOTAL ASSETS	11601687	TOTAL LIABILITIES AF	ND NET WOR	RTH
				11601687

List thereo	TUIPment Voulown or lease to	Section/4:- EQUIRN	(attach additional sheets (finecessary);	/mi
Year 2001	orhaveallong termilease for Make Volvo	License Number C35694L	Vyou mayinotinentivehicles/ontaljob-bys	obibasis GVW 52,000
*attach add	ditional pages if necessary			



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Section 5 - SAFETY

dentify the person and position responsible for understanding and complying with the Federal Notoricarriers afety Regulations (FMCSR), Washington state laws (RCW) and commission rules (WAC) as described below: Please refer to the WAGnules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

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. Please attach evidence of your enrollment in a drug and alcohol testing program if your company has commercial vehicles and employs CDL drivers.

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.

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

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: Mawali, Fall	
Name: Martlyn Eaton	Position: Dis patch Manager RESPONSIBILITIES
Section 6 @PERATIONAL	RESPONSIBILITIES
Identify the person and position responsible for the	INCOLOUGIBICIIIIEQ
Identify/the person and position responsible for understanding an shown below	id complying with the requirements of leaching to good
Appusal Panesta - 1.D	
Annual Reports and Regulatory Fees (WAC 480-15-480). You must	annually file a report of
Annual Reports and Regulatory Fees (WAC 480-15-480). You must pay regulatory fees.	amidally file a report of your financial operations and
Name: W	
STATE OF WASHINGTON	Position: Dispatch Manager
STATE OF WASHING ON Appendia laws rules and and the	lividuals and complete in Iranager
washington must comply with the regulations of the standard	of the state of
of the person in your organization who will be recently	ederal agencies. Please state the name and position
Washington, such as, but not limited to the Department of Labor & wage); Department of Licensing vehicle and drivers licenses, busing	uring compliance with the laws of the state of
wage): Department of Labor &	Industries (industrial insurance, safety, paragraph
wage); Department of Licensing vehicle and drivers licenses, busine fuel permits, fuel tax; Secretary of State (corporate registrations):	ess licensing. Unified Business Lt.
fuel permits, fuel tax; Secretary of State (corporate registrations); weight permits); Department of Revenue, Internal Revenue Service	Department, Officed Business Identifier (UBI number),
weight permits); Department of Revenue Internal Revenue	Department of Transportation (over-size or over-
- The transition of the transi	e (taxes); and Employment Security
Name: Maril Tat	
Name: Marilyn Eaton	Position: DIS hatel Mainage
	Position: DISpatch Manager
•	V



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Section 7/= DECLARATION OF APPLICANT

INITIAL

I understand that filing this application <u>does not</u> 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 480-15-305 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 understand the commission will complete a criminal background check on each person named in the application.

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.

Applicant Name:

Greg Wakefield

.

Date 7-6-2020

AAA MOVING & STORAGE, INC. by GREG WAKEFIELD

Section 8 ADDITIONAL REQUIRED	

X	For New Applications: provide three "attachment A - HOUSEHOLD GOODS STATEMENT OF
	SUPPORT" forms. Forms may be typed or hand-written.
	For Reinstatement of Permit: provide a personal statement justifying the reinstatement.
	Business letter format preferred.

The State of Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF REGISTRATION

to

AAA MOVING & STORAGE, INC.

A/AN ALASKA PROFIT CORPORATION, effective on the date indicated below.

Effective Date: 07/01/2020 UBI Number: 602 076 085



Given under nr. hand and the Seal of the State of Washington a Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 07/01/2020



2020 UCR Registration is VALID!



Confirmation # 000-0153-3207

Generated: 02/19/2020 15:47 EST

Registered on: 02/19/2020 15:47 EST

Year:

2020

UCR Fee: \$59.00

Paid:

Convenience Fee: \$1.62

Total: \$60.62

Bracket:

0 to 2 vehicles [0 vehicle(s)]

USDOT #:

2971759

Classifications:

Freight Forwarder

Legal Name:

AAA MOVING & STORAGE INC

Base State:

Alaska

Principal:

717 E SHIP CREEK AVENUE

ANCHORAGE, AK 99501

US

Payor:

AAA MOVING & STORAGE INC

*** Expires: 12/31/2020 ***

From: Ciara Boyce [mailto:ciara.boyce@colemanallied.com]

Sent: Monday, July 6, 2020 3:24 PM

To: Greg Wakefield < Greg@aaa-moving.com> Subject: FW: August 19th WUTC training

We are set for training

From: Ciara Boyce

Sent: Monday, July 06, 2020 3:33 PM

To: Duke, Emily (UTC) < emily.duke@utc.wa.gov>

Subject: RE: August 19th WUTC training

Fantastic

Thank you

From: Duke, Emily (UTC) < emily.duke@utc.wa.gov>

Sent: Monday, July 06, 2020 3:31 PM

To: Ciara Boyce < ciara.boyce@colemanallied.com>

Subject: RE: August 19th WUTC training

Good afternoon,

You have been signed up and an email will be sent with additional information closer to the class date.

Thank you,

Emily Duke Administrative Assistant 3 Consumer Protection (360) 664-1104 Office emily.duke@utc.wa.gov www.utc.wa.gov



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: AAA MOVING AND STORA	AGE INC.	
The following must be co	ompleted by the Supporter of the appl	
Name, Title, and Business Name: Craig Sorensen, President, Impressive Sign &		icant
Address (include street address, mailing address, city 2615 E Main Avenue Puyallup, WA 98372 Pierce County		
Phone Number: 253-445-5146	Email: impressivesigns@g	mail.com
Do you currently need the services of a residential ho No Yes If yes, please describe your current mot at this time	pusehold goods moving company?	
Do you anticipate a future need for the services of a relative No Yes If yes, please describe your future monot at this time	esidential household goods moving compa oving needs:	ηγ?
Briefly describe how granting this company a permit to benefit you, your business, and/or your community: The military base is an essential part of our ecomilitary members under a Department of Defendent of short periods of time, increasing to local companies. Is there anything else the commission should consider application for a household goods possible.	comomy. AAA Moving and Storage In use contract. This provides valuable g state revenues, adding to the local	c. provides booking for additions to our economy, and business
have known the family for over a decade through the family for over a decade through Commerce activities. The company consiste integrity.	ugh numerous charity events, busine ently demonstrates an incredibly high	ess seminars, Chamber n level of service and
l certify (or declare) under penalty of perjury unde and correct.	er the laws of the state of Washington t	hat the foregoing is true
Craig Sorensen		
Approximate the majoritation of the contraction of	Lee attached	07/02/2020



7-2-2020

Washington Utilities and Transportation Commission 621 Woodland Square Loop SE Lacey, WA 98503

Impressive Sign & Display has had the pleasure of working directly with AAA Moving and Storage for over a decade.

We have seen extraordinary support and involvement in numerous community endeavors by Tracey Pidge and her staff, through local Chamber of Commerce activities, business seminars, and charitable events.

I am so impressed with the countless hours that Tracey has contributed to the development of critical infrastructure for the Chamber and the Community at large.

The Company consistently demonstrates an incredibly high level of service and integrity.

When it comes to compassion and involvement in our community, they really "Walk the Walk"! I highly recommend AAA Moving and Storage.

Respectfully,

Craig Sorenson President



ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

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A 11		
Applicant Name: AAA MOVING AND STORAGE INC		
The following must be complete	d by the Supporter of the applicant	
Name, Title, and Business Name: Karissa Thompson, Past Puyallup Rotary President	a by the supporter of the applicant	
Address (include street address, mailing address, city, state, z 6024 160th Street E Puyallup, WA 98375 Pierce County	ip, and county):	
Phone Number: 253-278-2307 Email:	kthompson@redcanoecu.	com
Do you currently need the services of a residential household No Yes If yes, please describe your current moving no Not at this time	goods moving company?	
Do you anticipate a future need for the services of a residential No Yes If yes, please describe your future moving ne Not at this time	eds:	
Briefly describe how granting this company a permit to provid benefit you, your business, and/or your community: The military base is an essential part of our ecomomy military members under a Department of Defense compopulation for short periods of time, increasing state to local companies Is there anything else the commission should consider when napplication for a household goods permit?	r. AAA Moving and Storage Inc. provio tract. This provides valuable addition revenues, adding to the local econom	les booking for s to our y, and business
I have known the family for throughout the years thro participated in many community events supporting the	e overall success of Rotary.	
We have been very lucky to have them serve alongsic I certify (or declare) under penalty of perjury under the la and correct.	ws of the state of Washington that the f	oregoing is true
Karissa Thompson Printed Name of Person Completing Form	attached	07/02/2020
Times will of terson completing Form	Signature	Date

Karissa Thompson
Past Puyallup Rotary President
kthompson@redcanoecu.com
253-278-2307
6024 160th St E
Puyallup, WA. 98375
7/2/20

WUTC 621 Woodland Square Loop SE Lacey, WA 98503

To whom it may concern:

I am writing this letter to share with you the impact AAA Moving & Storage has had on our community. The GM, Ciara Boyce, served at the Puyallup Rotary President in 2016/2017 and made great impact to our organization. They have participated in many community events supporting the overall success. We have been very lucky to have them serve alongside us throughout the years. I am happy to answer any specific questions you may have.

Sincerely,

Karissa Thompson

Past Puyallup Rotary President kthompson@redcanoecu.com

253-278-2307



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: AAA MOVING AND STORAGE INC.	
The following must be a like the	
The following must be completed by the Supporter of the applicant Name, Title, and Business Name:	
Lora Butterfield, President/CEO, Fife Milton Edgewood Chamber of Commerce	
Address (include street address, mailing address, city, state, zip, and county): 2018 54th Avenue East Fife, WA 98424 Pierce County	
Phone Number: 253-922-9320 Email: lorab@fmechamber.org	
Do you currently need the services of a residential household goods moving company?	
Lives if yes, please describe your current moving needs:	
Not at this time	
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 at this time	
Briefly describe how granting this company a permit to provide household goods moving services in Wash benefit you, your business, and/or your community:	nington State will
The military base is an essential part of our community:	
military members under a Department of Defense contract. This provides valuable addition	des booking for
population for short periods of time, increasing state revenues, adding to the local econom	is to our IV. and business
Is there anything else the commission should consider when making a determination about this company	,,
abbuggion for a nonzemon 60002 DelWit's	
I have known the family for a number of years. I am writing in support of AAA Moving and Strusted local business and example of leadership in the community. They have a proven trabuilding support for critical community building projects. If you are searching for a partner who will also assist you in your goals to build & strengthen the community	Storage as a ack record of you can trust,
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the jand correct.	foregoing is true
Lora Butterfield Lee attached	07/02/2020
Printed Name of Person Completing Form Signature	



WUTC 621 Woodland Square Loop SE Lacey, WA 98503

July 2, 2020

Dear Community Partner,

I am writing in support of AAA Moving & Storage as a trusted local business and example of leadership in the community. They have a proven track record of building support for critical community building projects. Tracey Pidge and her team are helpful, friendly, and always willing to go the extra mile in order to help others and lend support. As members of the Fife Milton Edgewood Chamber of Commerce for a number of years, I could count on them for support in events designed to build a strong and healthy the community.

If you are searching for a partner you can trust, who will also assist you in your goals to build and strengthen the community, AAA Moving & Storage is a great choice!

Sincerely,

Lora Butterfield

Jon Butterfull

Fife Milton Edgewood Chamber of Commerce

President/CEO

(253) 922-9320

lorab@fmechamber.org