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.



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.

The following must be completed by the Supporter of the applicant				
Name, Title, and Business Name: Justin Day, Owner, Justin Day Real Estate LLC				
Address (include street address, mailing address, city, state, zip, and county): 6314 NE 165th Ct Kenmore, WA King 98028				
Phone Number: 206-595-2307 Email: justin@mwagnerteam.com				
Do you currently need the services of a residential household goods moving company?				
Do you anticipate a future need for the services of a residential household goods moving company? No Ves If yes, please describe your future moving needs: As a residential real estate broker, I have clients continuously needing moving services in bo Snohomish county.	th King and			
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 can provide my clients with added value by providing a great referral for moving services. I have complete faith in the services Jeff Thirlwall and College Hunks would provide to my clients.				
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit? There are other moving company choices but very few I would ever consider referring to my clients. College Hunks will be my go to for all moving services.				
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.				
Justin Day	0/27/2021			
Printed Name of Person Completing Form	Date			



HOUSEHOLD GOODS STATEMENT OF SUPPORT

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The following must be completed by the Supporter of the applicant			
Name, Title, and Business Name: Kerri Krause, Broker, Champions RE Services			
Address (include street address, mailing address, city, state, zip, and county):			
1723 100th Place SE, Everett, Wa			
98208			
Phone Number: 206-795-2712 Email: krause.homes@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:			
I need regular assistance moving staging in/out of listings.			
5 5 5 5			
Do you anticipate a future need for the services of a residential household goods moving company?			
No <pre>Ves If yes, please describe your future moving needs:</pre>			
My needs are ongoing, and also clients will need moving services.			
Briefly describe how granting this company a permit to provide household goods moving services in Washi	ngton State will		
benefit you, your business, and/or your community:			
I appreciate College Hunks is a professional company with uniformed staff.			
Is there anything else the commission should consider when making a determination about this company's	5		
application for a household goods permit?			
I feel the owner, Jeff Thirlwall, is dedicated to providing a good service.			
Leartify (or declare) under penalty of perium under the laws of the state of Machineten that the	inconcina is true		
<i>I certify (or declare) under penalty of perjury under the laws of the state of Washington that the f and correct.</i>	oregoing is true		
Kerri Krause	11/01/21		
Kerri Krause	11/01/21		
Printed Name of Person Completing Form Signature	Date		



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.

The following must be completed by the Supporter of the applicant				
Name, Title, and Business Name:	inpleted by the supporter of the applicant			
Samantha Denson, Realtor				
Address (include street address, mailing address, city	, state, zip, and county):			
210 5th Ave S #102, Edmonds, WA 98020, Sno	homish County			
Phone Number: 206-817-6874	Email: samanthadenson@windermere	.com		
Do you currently need the services of a residential ho	usehold goods moving company?			
✓ No ☐ Yes If yes, please describe your current m	noving needs:			
Do you anticipate a future need for the services of a r				
No Ves If yes, please describe your future m	oving needs:			
As a real estate agent/Realtor, I always need a	access to several moving companies in order t	o serve my		
clients and take care of their needs.				
	to provide household goods moving services in Washi	ngton State will		
benefit you, your business, and/or your community:				
I have multiple clients at any given time and the	•			
Having additional moving company options makes it easier to serve my clients and find a moving company that offers the right day/time for my clients and their move.				
Is there anything else the commission should conside	r when making a determination about this company's			
application for a household goods permit?	с			
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true				
and correct.				
	Samantha Denson			
Samantha Denson		11/05/2021		
Printed Name of Person Completing Form	Signature	Date		
	-			



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.

	completed by the Supporter of the applicant			
Name, Title, and Business Name:				
Seemant Nakra - Property Manager - Next Brick, LLC				
Address (include street address, mailing address, cit	ty, state, zip, and county):			
5603 230th St SW				
Mountlake Terrace, WA 98043				
Phone Number: 425-465-4220	Email: snakra@nextbrick.co			
Do you currently need the services of a residential household goods moving company?				
No Yes If yes, please describe your current				
we recommend these services to our resid	lents when they are moving in or out of the pro	орепу.		
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:			
As more and more people renting instead	of huwing, more meying companies are require	ad to		
accommodate the rising movings.	of buying, more moving companies are require			
accommodate the haing movings.				
Briefly describe how granting this company a permi	t to provide household goods moving services in Washi	ngton State will		
benefit you, your business, and/or your community	:			
Currently most good movers are booked o	ut weeks causing delay in moving.			
Another reputed company will help.				
Is there anything else the commission should consider when making a determination about this company's application for a household goods permit?				
Snohomish is growing market and hence require reputed companies to accommodate the				
population growth				
I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true				
and correct.				
SEEMANT NAKRA	Seemant Nakra	11 / 07 / 2021		
Printed Name of Person Completing Form	Signature	Date		
	-			