NCUC Form CE-1 (Revised April 2013)

BEFORE THE NORTH CAROLINA UTILITIES COMMISSION RALEIGH, NORTH CAROLINA

◆APPLICATION FOR CERTIFICATE OF EXEMPTIONTO TRANSPORT HOUSEHOLD GOODS►

Docket No.	T-4933	sub &
LOCKELNO. 1		

NOTE: Instructions for the completion and submission of this Application are included herewith as an "Appendix." You should read the Instructions carefully before proceeding.

Alamance Moving LLC		336-213-8441		
egal Name of Business (hereafter the "Applicant")	Telephone Number		er	
2448 Tribek Court	Burlington	NC	27215	
Physical Address Street	City	State	Zip	
1183 University Drive Ste 105-114	Burlington	NC	27215	
Mailing Address Street or Post Office Box	City	State	Zip	
alamancemoving@gmail.com				
Email	-			
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- 3. That the Applicant has read and understands the following terms and conditions and certifies that Applicant has met or will meet such requirements prior to being issued a certificate of exemption. Indicate agreement by inserting a checkmark (<).
- (✓) Applicant is fit, willing, and able to properly perform the service of household goods transportation within North Carolina, is familiar with the moving industry, has a reasonable and adequate knowledge of the rules and regulations governing the moving industry, including safety requirements as enforced by the North Carolina Division of Motor Vehicles (DMV), and has knowledge of and will abide by the tariff requirements as established by the Commission in Maximum Rate Tariff No. 1.
- (\checkmark) Applicant is financially solvent and able to furnish adequate service on a continuing basis by maintaining the required insurance protection and safe, dependable equipment and being able to settle any damage claims which may arise.
- (/) Applicant will maintain and has filed, or will soon file, with the DMV (or the Commission) the following minimum limits of liability and cargo insurance coverage:
 - (a) <u>Liability insurance coverage</u> Form E: \$100,000/\$300,000/\$50,000 for Gross Vehicle Weight (GVW) of 26,000 lbs. or less and \$750,000 for GVW of more than 26,000 lbs.
 - (b) <u>Cargo insurance coverage</u> Form H: \$35,000/\$50,000 i.e., \$35,000 for loss of or damage to household goods carried on any one motor vehicle and \$50,000 for loss of or damage to household goods occurring at any one time and place.

If Forms E and H are not on file with the DMV, Applicant will provide such forms to the Office of the Chief Clerk of the Commission.

In addition to the foregoing, Applicant will also maintain general liability insurance coverage in an amount not less than \$50,000 to compensate for loss or damage, to property of shipper or consignee, not otherwise covered under the requirements of subparagraphs (a) and (b) as set forth immediately above.

As proof of compliance with the Commission's three insurance coverage requirements as described above, Applicant has filed, or will soon file, a "certificate of insurance," issued by Applicant's insurance company, with the Office of the Chief Clerk. All insurance documents submitted should be clearly marked/stamped "CONFIDENTIAL", by the Applicant or the Applicant's insurance company, prior to providing such information to the Commission.

(\checkmark) Applicant will permit only persons possessing a valid driver's license to operate the motor vehicles that will be used for transporting household goods in compliance with the laws of the State of North Carolina.

- (\(\subseteq \)) The following information will be provided to the Office of the Chief Clerk for each principal [see Item 1 above for definition of principal]:
 - (a) A completed Fingerprint Card with fingerprints that have been taken and imprinted by a law enforcement agency such as a local police department, sheriff's office, or city/county bureau of identification. Fingerprint Cards are to be enclosed unfolded in a separate envelope do not fold Fingerprint Cards. The Applicant's name and address and the words "FINGERPRINT CARDS" should be typed or printed on the front of the envelope and the front of the envelope should be clearly marked/stamped "CONFIDENTIAL".
 - (b) A completed "Authority for Release of Information" form signed by principal consenting to use of his or her fingerprints for a criminal history records check. The "Authority for Release of Information" form is included in this Application packet as Exhibit D. The form may be copied as needed.
 - (c) A money order or cashier's check in the amount due for criminal history records checks (\$38.00 per principal), made payable to the "North Carolina Department of Commerce/Utilities Commission," to cover the Commission's direct cost of obtaining a criminal history records check. Money orders and cashier's checks received by the Commission are nonrefundable.

Principals' Fingerprint Cards and "Authority for Release of Information" forms will be treated in a "CONFIDENTIAL" manner upon receipt. The Commission will use the Fingerprint Cards and the "Authority for Release of Information" forms to obtain criminal history records checks from the State and National Repositories of Criminal Histories through the North Carolina Department of Justice.

Pursuant to North Carolina Department of Justice regulations, the Commission is prohibited, in large measure, from providing a **hard copy** of the results of a criminal history records check to any company principal. See Page 12, Paragraph 3(f)(3) of the Instructions for further information in this regard.

An Applicant will not automatically be denied a certificate of exemption solely on the basis of past criminal activity. The Commission will review and evaluate the information in the criminal record to determine if it is relevant to, or would call into question, the Applicant's fitness to possess a certificate of exemption.

() Applicant's principals [see Item 1 above for definition of principal] are either United

States citizens or non-United States citizens. The names and titles of the principals who are States citizens are as follows:			
Kelly Dillard - Owner			
David Dillard - Owner			

The names and authorization do follows:	cuments den	nonstrating	legal author	ority to wor	k within	the United	States, are	as
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NOTE: Applicant principals who are not United States citizens must provide employment authorization documents demonstrating legal authority to work within the United States. Employment authorization documents should be marked/stamped as "CONFIDENTIAL" and sent to the Office of the Chief Clerk.

- 4. That there is attached to and made a part of this Application:
 - (a) Exhibit A, which is a statement of the approximate cost of the property of all kinds (including vehicles, pads, dollies, hand trucks, etc.) which the Applicant proposes to use in the transportation of household goods, including a list of the locations at which the Applicant proposes to establish and maintain terminals, if any, and a list of the year, make, body type, and GVW of the motor vehicles the Applicant proposes to use in the business.
 - (b) Exhibit B, which is a current balance sheet showing in detail the Applicant's assets, liabilities, and net worth. In lieu of the foregoing, a separate balance sheet with the same information may be attached.
 - (c) Exhibit C, which details the Applicant's experience in the moving industry.
 - (d) Exhibit D, which is the "Authority for Release of Information" form. A separate Exhibit D must be completed and submitted for <u>each</u> principal. Exhibit D may be copied as needed.

APPLICANT'S ATTORNEY:

Printed Name of Applicant's Attorney: history I amd me
Signature of Applicant's Attorney:
Date of Signature of Applicant's Attorney:
101 01-
Address of Applicant's Attorney: 181 UNUCL St NE
Email: hristen & navel me lowfirm. Com

NOTE: APPLICATIONS FILED ON BEHALF OF A CORPORATION, AN ASSOCIATION, OR AN LLC SHALL BE FILED BY AN ATTORNEY LICENSED TO PRACTICE IN THE STATE OF NORTH CAROLINA IN ACCORDANCE WITH RULE R1-5 OF THE COMMISSION'S RULES AND REGULATIONS.

VERIFICATION UNDER OATH REGARDING THE ACCURACY OF THE INFORMATION PROVIDED

Under the penalty of perjury,	
I, Kelly Renea Dillard	(Printed Name), the affiant,
am an Applicant, Sole Proprietor, Principal, Partner, o company and I state and attest that the information on filed on my behalf and all of the information provided and complete; and that copies of any documents information are genuine. This certification is made ur best of my knowledge, information, and belief, all of the accurate and true, no material information or fact has Providing false information to the Commission is punish, C.G.S. 62-310 and N.C.G.S. 62-326.)	this Application and the attached information is on this Application and attached is true, correct, presented to the Commission as part of this nder oath and under penalty of perjury. To the ne information contained herein and attached is been knowingly omitted or misstated. (Note:
Signature of Person Making Verification (Affiant)	
Owner Title of Person Making Verification (Affiant)	
Subscribed and sworn before me this theday Notary Public My Commiss	porios PA
	ANI OLINA MANINA PARA PARA PARA PARA PARA PARA PARA PA

VERIFICATION UNDER OATH REGARDING THE ACCURACY OF THE INFORMATION PROVIDED

Under the penalty of perjury,	
David V Dillard	(Printed Name), the affiant,
company and I state and attest that the ir	al, Partner, or Member with respect to the above-referenced formation on this Application and the attached information is
	on provided on this Application and attached is true, correct, documents presented to the Commission as part of this
	n is made under oath and under penalty of perjury. To the pelief, all of the information contained herein and attached is
accurate and true, no material information	on or fact has been knowingly omitted or misstated. (Note: ssion is punishable by fine and/or imprisonment pursuant to
N.C.G.S. 62-310 and N.C.G.S. 62-326.)	ssion is publishable by the and/or imprisonment pursuant to
David Divid	2/11/2
Signature of Person Making Verification (Affiant) Date Signed
Owner	
Title of Person Making Verification (Affiar	t) :
	N.
Subscribed and sworn before me this the	23rd day of Jells Mary , 20,23
	Notary Public
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	JESONIA ZESONIA
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EXHIBIT A

▼PROPERTY, EQUIPMENT, AND VEHICLES

The approximused in the operation	nate cost or present n is \$ <u>67,000</u>	value of the property/equ	ipment/vehicles of all kinds to
Applicant proposes t	to establish and mair	ntain terminals at the follow	ing location(s):
1585 Trippett Str	eet NW Concord, NC	28027	
		,	
			
			·
The vehicles to be u	sed in the operation	are listed below.	
YEAR	<u>MAKE</u>	BODY TYPE	<u>GVW</u>
2021	lsuzu	Truck	20,500 lbs
			
			
			
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EXHIBIT B

◆ASSETS, LIABILITIES, AND NET WORTH▶

NOTE: If Applicant is a sole proprietorship or partnership, the financial information provided below should be that of the proprietorship or partnership. If Applicant is a corporate entity (i.e., a corporation or LLC) the financial information provided should be that of the corporate entity.

Applicant's assets, liabilities, and net worth are as follows:

ASS	<u>SETS</u>	<u>LIABILITIES & NET WORTH</u>	
Real Estate	\$	Liens of Real Estate	\$
Vehicle Equipment		Liens on All Equipment	·
Other Equipment	\$700.00	Other Outstanding Loa	ns
Cash on Hand		Judgments	_ ,"
Cash in Bank	\$1000	Other Liabilities	
Other Assets		Net Worth	
TOTAL ASSETS	\$ <u>\$1700.00</u>	TOTAL LIABILITIES & NET WORTH	\$
	∡ΔPP! I	EXHIBIT C	
household goods indicate whether prepared bills of l	s, including the number you have supervised crevading.	sessed by the Applicant with re of years of experience acqu ws, prepared estimates, loaded port based out of Concord, NC. W	ired. For example, please and unloaded trucks, and/or
	<u> </u>		
for almost 7 year	s. Prior to starting that busi	ness, I worked for 5 years for and	ther moving company
in which I learne	d the skills and the busines	s aspect. By gaining that knowled	ge, I wanted to start my
own business to	create job opportunities for	others and provide a service for n	ny communities.
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