NCUG Form CE-1 (Revised April 2018)

BEFORE THE NORTH CAROLINA UTILITIES COMMISSION RALEIGH, NORTH CAROLINA

▼APPLICATION FOR CERTIFICATE OF EXEMPTIONTO TRANSPORT HOUSEHOLD GOODS▶

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

Legal Name of Business (hereafter the "Applicant")		Telephone Numb	oer
810 Brevard Drive	Albemarle	NC	28001
Physical Address Street 810 Brevard Drive	City Albemarle	State NC	Zip 28001
Mailing Address Street or Post Office Box Christian_Bundy@Yahoo.com	City	State	Zip
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 (\checkmark).
- (X) 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.
- (x) 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.
- (χ) 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 <u>three</u> insurance coverage requirements as described above, Applicant has filed, or will soon file, a "<u>certificate of insurance</u>," 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.

(*X*) 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.

- (χ) The following information will be provided to the Office of the Chief Clerk for <u>each</u> 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.

(x) Applicant's principals [see Item 1 above for definition of principal] are either States citizens or non-United States citizens. The names and titles of the principals who a States citizens are as follows:				
Christian Bundy (Owner)				
V. Company of the Com				

The names authorization	and titles of documents	f the principa demonstrating	ils, who a g legal aut	re non-U thority to	nited 3 work	States within	citizer the U	ıs, with nited S	empl tates,	oyme are	ent as
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None											
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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 Attorn	ney: Benton loups
Signature of Applicant's Attorney:	rys
Date of Signature of Applicant's A	ttorney: 12-16-22
Address of Applicant's Attorney:	Cranfill Summer LLP
	101 N. 3rd St. Ste 400
	Wilmington, NC 28403 2840
Email: btoups e csl	
Email: 10 100 ps 6 C3	1140.01.

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,

company and I state and attest that the information filed on my behalf and all of the information provi and complete; and that copies of any docume information are genuine. This certification is material of my knowledge, information, and belief, all accurate and true, no material information or face	(Printed Name), the affiant, ner, or Member with respect to the above-referenced on on this Application and the attached information is ded on this Application and attached is true, correct, ents presented to the Commission as part of this de under oath and under penalty of perjury. To the I of the information contained herein and attached is ct has been knowingly omitted or misstated. (Note: punishable by fine and/or imprisonment pursuant to
Signature of Person Making Verification (Affiant)	11/15/22 P
Title of Person Making Verification (Affiant)	E
Subscribed and sworn before me this the 5 Notary F My Com Notary F	Kolm Le

be

EXHIBIT A

▼PROPERTY, EQUIPMENT, AND VEHICLES▶

ne approxima used in the operation		ue of the property/equipmen	it/vehicles of	all kinds to
Applicant proposes to	establish and maintain	terminals at the following loc	cation(s):	
810 Brevard driv	ve Albemarle NC 28	3001		
***************************************		· · · · · · · · · · · · · · · · · · ·		
		,		
The vehicles to be use	ed in the operation are I	listed below.		
<u>YEAR</u>	MAKE	BODY TYPE	GVW	
2019	Chevrolet	Pickup Truck	12,000 lb	(leased)
2022	D&A custom	7'x16' Enclosed trailer	7,000 lb	(Leased)
Both the trailer	and the truck are le	ased from the Christian	Bundv (owr	 ner)
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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:

ASSETS		LIABILITIES		
Real Estate	<u>\$ 0</u>	Liens of Real Estate	\$ <u>0</u>	
Vehicle Equipment	\$0	Liens on All Equipment	0	
Other Equipment	\$ 1,100	Other Outstanding Loan	s 0	
Cash on Hand	\$0	Judgments	0	
Cash in Bank	\$ 6,980	Other Liabilities	_0	
Other Assets	\$0			
TOTAL ASSETS	\$ <u>8,080</u>	TOTAL LIABILITIES	\$0	

NET WORTH (Total Assets – Total Liabilities) \$8,080

EXHIBIT C

◀APPLICANT'S EXPERIENCE

Please explain the Applicant's experience with respect to the transportation of household goods, including the number of years of experience acquired. For example, please indicate whether you have supervised crews, prepared estimates, loaded and unloaded trucks, and/or prepared bills of lading.

Experience includes 10 years of volunteer work with non-profit agencies provid	ing moving to individuals in need.
Moving included, local, in state, and out of state moves of household goods.	I have read and understand the
rules and regulations for moving household goods in North Carolina and have	Chris Wilhoit, the owner of Miracle
Movers as my mentor and available for consultation if needed.	
For the last 8 years I have worked full-time in the field of heavy industry mainte	enance. In this field, I have
led and supervised crews to complete tasks safely and efficiently.	