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April 24, 2017

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A-2017-2589039

To Whom It May Concern,

PA P.U.C.
SECRETARY'S BUREAU

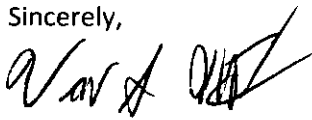
As I complete the Business Plan of Applicant for Motor Carrier Authority form, I have noticed that many of the questions center around the stability and structure of the company, in order to ensure the quality of the service provided to potential customers and safety of their personal property. One of the benefits and strengths of opening a You Move Me franchise is that I will be able to leverage the knowledge and experience of the parent company as well as the other 30+ franchises spread across North America. The parent company has also developed a system and structure that covers everything from uniforms and employee appearance to booking of customer estimates and/or jobs either online, over the phone or in person.

This support will be especially important as I develop my moving crews. I will be able to utilize training plans that have been in use for several years and have been continuously updated to include lessons learned and industry best practices. In addition, I will be able to seek advice of my peers to determine methods used to ensure drivers and movers are screened properly at the time of initial employment as well as periodically throughout their employment with my franchise.

I will also be able to leverage the many contacts previously established by the parent company to obtain various things required to operate my business successfully. These contacts range from vendors for moving supplies and marketing materials to business contacts that would provide insurance or vehicle acquisition.

Lastly, I will have access to ongoing support from the parent company in the form of a field advisor which will be available at all times to assist with any questions or challenges that may arise during the operation of my moving business. Because of this wide range of support and access to the combined knowledge and experience of the parent company and my sister franchises, I feel that I will be in a position to provide a great moving experience to my customers from a very stable position as a company.

Sincerely,



Walter S Kichline IV

~~PA
PUBLIC UTILITY COMMISSION
APR 26 2017
BUREAU OF
TECHNICAL UTILITY SERVICES~~

BUSINESS PLAN OF APPLICANT FOR MOTOR CARRIER AUTHORITY

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

A-2017-2589839

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PUC Application Docket No.

APR 27 2017

Blue Collar Movers LLC

Legal Name of Applicant

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

You Move Me

Trade Name, if any

209 Cherry Hill Rd.

Nazareth

PA

18064

Street Address (principal place of business)

City or Municipality

State

Zip Code

This document is a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

You are encouraged to provide as much information as possible to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person providing the information by giving your name and indicate whether you are the owner, employee, officer, or attorney for the applicant.

Walter S. Kichline IV - Owner

2. List the applicant's affiliation (owner, manager, controls) with any other carrier with the ^{PA} description of affiliation. PUBLIC UTILITY COMMISSION

N/A - None

APR 26 2017

BUREAU OF
TECHNICAL UTILITY SERVICES

3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. An explanation of education or training that you believe may be relevant may also be included.

No direct experience related to the transportation industry. I do have manager experience during my 20+ year career in the financial services sector. I will have direct support from the You Move Me parent company as I am a franchise partner.

4. Describe the physical location, to include the office area, office machines that will be used, and where vehicles will be stored. Household goods in use carriers should include a description of their storage facilities, if applicable.

The administrative part of the business will operate out of my home office in Nazareth. My equipment and truck will be kept at a storage facility in Easton, PA. I will be renting both parking and a storage unit there.

5. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and continuous communication with drivers.

Jobs will be booked through the franchise call center in Vancouver and tracked, dispatched and closed using the franchise proprietary software. Driver communication will be conducted via cell phones to crew leaders.

6. Please explain:

- a. Your hiring standards for drivers;

Must have a valid PA driver's license with a clean driver's record. Drivers and crew members must be clean, courteous and in uniform daily.

- b. Your system to ensure prospective drivers will be subject to a criminal background check;

As a condition of employment all applicants will be required to submit to a background check and drug test.

- c. Your driver training program;

All drivers, crew leaders and movers will be given training as developed by the You Move Me parent company. In addition, there will be ongoing field training by the owner.

- d. Your system for ensuring that your drivers are properly licensed at all times;

Driver's license records will be checked at the time of hiring. Verification will be completed annually by the insurance carrier. Policy in hand book will also require employees to notify us of any changes.

- e. Your system to ensure that all drivers will be subject to a criminal background check every two years;

All employee files will be reviewed annually. Background checks will be completed as needed to comply with the 2 year requirement.

- f. Your policies regarding alcohol and drug use by your drivers.

Any employee found to be operating a company leased or owned vehicle while under the influence of alcohol or illegal drugs will be terminated immediately.

7. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below. Taxicabs and limousines may not be used if the vehicle's age is greater than eight model years.

One truck initially with order of 2nd truck pending business needs. Rental vehicles (Ryder/Penske) may be used to handle overflow.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY</u>	<u>VEHICLE ID#</u>
2017	ISUZU	NRR	3	JALE5W169H7303227
- delivery expected late May 2017				

8. Describe your vehicle safety program. Please include the following in your explanation:

a. Your periodic vehicle maintenance plan;

Lube, Oil + Filter every 16 Km.les
 Fuel filter, tire + brake inspection every 24 Km.les
 Engine check + service every 80K miles

b. Your system for ensuring your vehicles will continuously comply with Pennsylvania's inspection standards and the Commission's equipment standards;

In addition to routine maintenance, the truck will be cleaned and inspected for safety by crews on a daily basis. Owner will physically inspect weekly.

c. If applying for Household Goods Authority, explain how it will be ensured that vehicles meet all USDOT equipment standards.

Owner will apply for USDOT # and will regularly check vehicles condition and safety equipment.

9. As proof that an effort has been made to determine that insurance is affordable, list the name and phone number of insurance agents you have contacted and the prices of premiums they have quoted.

Jason Rigby - Liberty Insurance Agency
 412-571-5700 x 255 - quotes are pending

10. Criminal Record. Has the applicant* been convicted of a misdemeanor or felony for which applicant remains subject to supervision by a court or correctional institution?

YES NO

**If applicant is a partnership, limited partnership, limited liability partnership, limited liability company, or corporation, this question applies to all partners, members, shareholders and corporate officers. In the event that the answer is yes for one of those individuals, a separate page identifying the individual and stating relevant information should be attached.*

11. Financial Data. In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation service. You may use the "Statement of Financial Position" which follows this page or supply a balance sheet prepared by an accountant. You need only provide the applicable information. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

PLEASE NOTE: COMMISSION REGULATIONS REQUIRE THAT PARTNERSHIPS, LIMITED PARTNERSHIPS, LIMITED LIABILITY PARTNERSHIPS, LIMITED LIABILITY COMPANIES, AND CORPORATIONS MUST FILE A CURRENT INCOME STATEMENT.

Statement of Financial Position (Balance Sheet)

As of (date) 04/25/2017

ASSETS

Current Assets

Cash

140,000.00

Other Current Assets (specify)

30,799.00

You Move Me franchise Territory

Other Assets

Motor Vehicle Equipment

68,800.00

pending truck purchase

Building and Structures

Office Equipment

2,000.00

Investments and Funds (specify)

TOTAL ASSETS

140,800

LIABILITIES

Current Liabilities (Due within one year of date)

Long Term Liabilities (Due after one year of date)

68,800.00 pending Truck purchase

TOTAL LIABILITIES

68,800.00

NET WORTH / OWNER'S EQUITY (Subtract total liabilities from total assets)

72,000.00

STATEMENT OF FINANCIAL POSITION
One Year Projected Income Statement

REVENUE and GAINS

Operating Revenue	129,200
Net Revenue from non-carrier operations	
Dividend and interest revenues	
Other non-operating revenue	
Gains	
Total Revenue and Gains	129,200

EXPENSES

Equipment Maintenance and Garage Expense	400.00
Insurance Expense	10,000.00
Employee Salaries	38,760.00
Supervisory Salaries	
Officer Salaries	40,000.00
Fuel Expense	3,876.00
Purchased Transportation (Lease Expense)	8,000.00
Materials and Supplies Expense	1,400.00
General Office Expense	400.00
Advertising Expense	15,504.00
Telephone Expense	1,400.00
Accounting Expense	2,645.00
Legal Expense	240.00
Uncollectible Revenue Misc. Expense	1,800.00
Depreciation Expense	
Amortization Royalties	16,796.00
Operating Taxes and Licenses	
Rent Expense	2,400.00
Loss	
Total Operating Expenses and Losses	143,671.00

Net Income Before Taxes

Provision for Income Taxes	(14,471)
<u>Net Income (Loss)</u>	(14,471.00)

Disclaimer: Applications are public records and can be accessed on the PUC's website. DO NOT provide social security numbers, credit card numbers, bank account numbers, tax information, or any other confidential information on your application, business plan, or verified statement forms.

Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.



(Signature)

04/25/2017
(Date)

Walter S. Kichline IV - Owner
(Name and Title, printed or typed)

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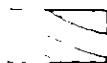
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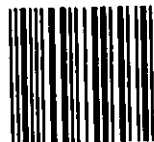
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ONE RATE ★ ANY WEIGHT*

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Commonwealth of Pennsylvania
Pennsylvania Public Utility Commission
Attn: Robert P. Bogovic
Compliance Specialist
PO Box 3265
Harrisburg, PA 17105-3265

Expected Delivery Day: 04/27/2017

USPS TRACKING NUMBER

EP14H July 2013 Outer Dimension: 10 x 5