PUBLIC UTILITIES COMMISSION OF THE STATE OF CALIFORNIA

REQUEST FOR VOLUNTARY SUSPENSION OF HOUSEHOLD GOODS CARRIER PERMIT

NAME OF COMPANY	T-NUMBER
ADDRESS	
CITY, STATE, ZIP CODE	
AREA CODE AND TELEPHONE NUMBER ( )	

RETURN COMPLETED FORM TO:
CALIFORNIA PUBLIC UTILITIES COMMISSION
LICENSE SECTION
505 VAN NESS AVENUE
SAN FRANCISCO, CA 94102-3298
(415) 703-2183

THE UNDERSIGNED REQUESTS THE SUSPENSION OF ITS HOUSEHOLD GOODS OPERATING AUTHORITY.
NOTE: The operating authority will be suspended from the date of receipt of this request accompanied by the payment of the $50.00 voluntary suspension fee for a period of ***not more than one year.***

IMPORTANT WARNING

Upon the expiration of the voluntary suspension period, the household goods operating authority will be subject to revocation unless the suspended authority is reinstated prior to the revocation date.

During the period of suspension, it is unlawful to conduct any for-hire operations requiring household goods operating authority. ***The carrier must continue to file quarterly reports and to remit the minimum $15 quarterly fee*** and respond to Commission information requests. A change of address should be filed with the Commission if your address is changed while in voluntary suspension. The suspended authority may be reinstated at any time prior to the expiration of the suspension period, provided that you:

1. File a written request for reinstatement (TL528) and a current equipment list (TL706-D).
2. File the required evidence of liability and cargo insurance coverage, and workers' compensation insurance if applicable.
3. Are not delinquent in the payment of quarterly fees.

A CHECK OR MONEY ORDER IN THE AMOUNT OF $50 MUST ACCOMPANY THIS REQUEST.

Date: _____

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Signature of Applicant(s)

_____
Title