#### ANNUAL REPORT INSTRUCTIONS - HHG CARRIERS

1.		TRIER MUSI ELECTRONICALLY FILE ITS ANNUAL REPORT Thttps://www.ncuc.gov in DOCKET NO. M-2 SUB 2023T WITH
		HE DESCRIPTION "2022 ANNUAL REPORT OF [NAME OF CARRIER]
	ιг,	TE DESCRIPTION 2022 ANNUAL REPORT OF [NAME OF CARRIER]
	$\Box$	
	Ш.	a) A fully completed Annual Report Form, including the cargo claims form (if applicable).
		Please use your carrier name as the attachment(s) file name.
		b) An electronically signed copy of the attached Report Verification Page.
		c) One Certificate of Insurance (COI) for General Liability. Please do not electronically
		file the COI in the Commission's docket system. The COI must be mailed
		or emailed to the Commission. The COI must also note proof of warehouse
		insurance for carriers providing storage. (Verify with your insurance agent to
	(	obtain this information).

2. FILING FORMS – ANNUAL REPORT, CERTIFICATE OF INSURANCE, & CLAIMS LOG
All information entered on the Annual Report must be typed or printed in black ink. The (T) Docket number
may be found on the Quarterly Fee reports. For verification of certificated name and C#, please refer to:
https://www.ncuc.gov/Industries/documents/carriers.pdf.

The Report Verification Page should be electronically signed by a company official. Include the Verification Page as an attachment with the Annual Report.

If there is nothing to report for a particular field, enter zero or N/A ("not applicable"); If the information is not a vailable, enter "NOT AVAIL" and provide an explanation in Section VII on Page 2.

The Certificate Holder section of the Certificate of Insurance (COI) for General Liability and Warehouse coverage (if applicable), should be completed by the insurance agent to read as follows: NC Utilities Commission, 4325 Mail Service Center, Raleigh, NC 27699-4300. Please note that the Commission is **NOT** an additional insured on the COI. The insured's name (carrier name) on the COI should be exactly as shown on the NCUC certificate.

**The Cargo Claims Log Form** should only list cargo losses and damages for jurisdictional moves; carriers **do not** need to report **property damage**. Carriers may refer to an attachment only if the attachment contains the same columns as the Cargo Claims Log Form. If no claims are shown on Line 19, Claims Log Form is not required.

#### 3. "JURISDICTIONAL INTRASTATE HHG OPERATING REVENUE" CLARIFIED

In Section I on Page 1 of the Annual Report, "Jurisdictional Intrastate HHG Operating Revenue" will include all intrastate (in-state) movement of household goods moves governed by the MRT. Do not include information from **non-jurisdictional moves**, such as interstate, international, military, retail deliveries, office and commercial, general freight or commodities, and moves conducted entirely within a gated community. Revenue from permanent storage and labor-only services also should **not** be included.

## 4. IF NO JURISDICTIONAL HHG OPERATIONS WERE CONDUCTED or IF CARRIER HAS BEEN GRANTED AN AUTHORIZED SUSPENSION

If the reporting carrier did not conduct any regulated household goods moves during the reporting year, complete the cover page and signed verification forms. On Pages 1 and 2, enter, "NO OPERATIONS," across the entire page or enter zero in each individual line for both pages. Carriers holding an authorized suspension must continue to file timely Regulatory Fee Reports and Annual Reports to maintain their certificates. The COI is not required for carriers holding an authorized suspension.

5. If you need help electronically filing your organization's Annual Report, please contact the Chief Clerk's Office at (919) 733-7328. If you have any other questions concerning the report, contact the **Commission Transportation Rates Division at (919) 733-4036 or <u>Transportation@psncuc.nc.gov</u>.** 

### **2022 ANNUAL REPORT**

Of

	Carrier's Name as	shown on Certificat	te issued by	NC Utilities	Commission
C		Certificate of Exemp	ption Numb	er	
T Docket Number					
		Current Mail	ing Address		
	City			State	Zip Code
	Phone number	er	Primary	/ Company I	Email Address

To the

# NORTH CAROLINA UTILITIES COMMISSION

For the year ended December 31, 2022

The Annual Report Form, along with the Verification Page, should be filed electronically with the Commission in its docket system. The Verification of Principals, Principals' criminal history and citizenship/employment authorization, Certificate of General Liability Insurance, and Warehouse insurance coverage if applicable, should be sent via e-mail or mail to NJeffries@NCUC.net or Transportation Utilities Regulatory Director, North Carolina Utilities Commission, 4325 Mail Service Center, Raleigh, North Carolina 27699-4300, by April 30, 2023

CARRIER SHOULD RETAIN A COPY OF REPORT FOR OWN RECORDS.

## **OPERATIONS REPORT – 2022**

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I -			

#### Section I. JURISDICTIONAL INTRASTATE HHG OPERATING REVENUE

1.	Weight/Distance moves (MRT Section III)	\$
2.	Hourly moves (MRT Section II)	\$
3.	Packing and Accessorial (MRT Sections I & IV/Valuation)	\$
4.	Total NC jurisdictional revenue (should match Line 18 belo	ow): \$
Sect	ion II. OPERATING STATISTICS (Jurisdictional intrastate NC weig	ght/distance and hourly moves only
5.	Number of regulated weight/distance moves performed	
6.	Total bill of lading miles	
7.	Total bill of lading weight (in pounds)	
8.	Number of regulated hourly moves performed	
9.	Total hours billed	
10.	TOTAL NUMBER OF REGULATED MOVES PERFORMED (L	ine 5 + 8)
11.	Number of each type of estimate for moves performed:	
	a) Non-binding (written):	
	b) Binding (Not-to-Exceed and Guaranteed) (written):	
	c) No written estimate:	
	d) Total (Line 11 A+B+C: Should match Line 10 above)	
12.	Number of each type of valuation applicable for moves perform	ned:
	a) Basic: (\$0.60/lb./ article – No charge)	_
	b) Full Value: (Customer charged \$0.75/\$100 of value)	
	c) Total (Line 12 A+B: Should match Line 10 above)	
13.	Do you own a warehouse or have a long-term lease for storage of the storage of th	e? (Y/N)
	ion III. JURISDICTIONAL REVENUES SHOWN ON LI ULATORY FEE REPORTS FILED DURING CALENDAR \	
14.	Quarter ended March 31, 2022:	\$
15.	Quarter ended June 30, 2022:	\$
16.	Quarter ended September 30, 2022:	\$
17.	Quarter ended December 31, 2022:	\$
18.	Total for 2022 (Line 14+15+16+17: Should match Line 4)	\$

be completed unless no claims were filed. Show cargo claims only; property damage claims are not subject to the provisions of the MRT.    For Reporting Year 2022	Section	on IV. CLAIMS IN	FORMATION T-						
19. Number of loss    Claims   Settled   Claims   Settled   Claims   Settled   Ciccord   Ciccord	Instructions/Check Sheet for clarification. A properly identified <b>Cargo Claims Log Form must be completed</b> unless no claims were filed. Show <b>cargo claims only</b> ; property damage claims								
19. Number of loss  and damage claims  and damage claims  Total dollar amount of claims in Line 19 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			For R	eporting Yea	<u>ar</u> 2022				
and damage claims  20. Total dollar amount of claims in Line 19 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	19.	Number of loss	<b>Beginning of Year</b>	Filed	<b>Settled</b>	at End of Year			
of claims in Line 19 \$ \$		and damage claims	<u> </u>						
21. Number of full-time NC employees during the year (use the W-2 form address to determine NC status)  22. Number of full-time NC contract workers during the year (use the 1099 form address to determine NC status)  23. Total salaries and wages paid to full-time NC employees and contract workers (i.e., W-2 & 1099 forms recipients shown on Lines 21 & 22)  Section VI. PROOF OF MANDATORY INSURANCE  The Commission requires HHG carriers to maintain minimum insurance coverage in the following amounts: General Liability - \$50,000; Cargo - \$35,000;\$50,000; and Vehicle Liability - \$100,000/\$300,000/\$50,000 for vehicles with a gross vehicle weight (GVW) of less than 26,000 lbs. (for GVW of 26,001 lbs. or over, the amount is \$750,000). One copy of the General Liability Certificate of Insurance showing proof of coverage in the full certificated name should be provided with the Annual Report. Carriers providing storage-in-transit must file proof of warehouse insurance coverage with their annual report. Please note that the Commission does not have a required minimum limit for warehouse insurance coverage due to the various capacities of each storage facility. However, the Commission does expect carriers to obtain adequate warehouse coverage for shipments being stored. The certificate holder section on the Certificate of Insurance should be completed as noted below. Please note that the Commission is not an "additional insured;" the form will be unacceptable if that language appears on the Certificate of Insurance.  North Carolina Utilities Commission 4325 Mail Service Center Raleigh, NC 27699-4300	20.	of claims in Line 19			\$ on Line 19 imr	_ \$ mediately above.)			
(use the W-2 form address to determine NC status)  22. Number of full-time NC contract workers during the year (use the 1099 form address to determine NC status)  23. Total salaries and wages paid to full-time NC employees and contract workers (i.e., W-2 & 1099 forms recipients shown on Lines 21 & 22)  Section VI. PROOF OF MANDATORY INSURANCE  The Commission requires HHG carriers to maintain minimum insurance coverage in the following amounts: General Liability - \$50,000; Cargo - \$35,000/\$50,000; and Vehicle Liability - \$100,000/\$300,000/\$50,000 for vehicles with a gross vehicle weight (GVW) of less than 26,000 lbs. (for GVW of 26,001 lbs. or over, the amount is \$750,000). One copy of the General Liability Certificate of Insurance showing proof of coverage in the full certificated name should be provided with the Annual Report. Carriers providing storage-in-transit must file proof of warehouse insurance coverage with their annual report. Please note that the Commission does not have a required minimum limit for warehouse insurance coverage due to the various capacities of each storage facility. However, the Commission does expect carriers to obtain adequate warehouse coverage for shipments being stored. The certificate holder section on the Certificate of Insurance should be completed as noted below. Please note that the Commission is not an "additional insured;" the form will be unacceptable if that language appears on the Certificate of Insurance.  North Carolina Utilities Commission 4325 Mail Service Center Raleigh, NC 27699-4300	Section	on V. NC EMPLO	YEE DATA						
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Section VII EVELANATION FOR EASI LIDE TO REQUIRE DEGLIESTED INFORMATION		4325 Mail Service Center							
	Section								

## FOR CALENDAR YEAR 2022

<b>CARRIER:</b>	
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#### **CARGO CLAIMS LOG FORM**

FILE#	DATE OF CLAIM	PERSON FILING CLAIM	CLAIM	ACTION TAKEN	DATE CLOSED

## **GENERAL INFORMATION – 2022**

1. FILING STATUS:	<ul><li>☐ Corporation</li><li>☐ Individual</li></ul>	on (Sole Proprietor)	□ Partnersnip □ LLC	
2. Officer, owner,	or partner to who	m correspondenc	e or questions are to be addr	essed:
Name (Print)		<u> </u>	Title/Position	
Phone Numbe	r		Website Address	
	Email Add	ress		
3. Accounting reco	ords are maintain	ed at the following	g address:	
	Addre	ess		
City	State	Zip	Phone	
( <b>NOTE:</b> This verification shall officer, or the responsible acc	be completed by counting officer.)  me). state and a colina Utilities Coce, have made in the best of my key and true, no mater of the information hall applicable (Note: Failure to cosecution pursue)	attest under pena (full ommission; that reasonable inquir inowledge, information or contained in some North Carolina (or provide information)	Certificated Name of End I have reviewed said Report into the accuracy of the interest of the	ed Annual ntity) as ort and, in nformation omitted or pared and on Rules, commission
Signature of Person Making Verification	on	Т	itle	
		D	ate	