



# ANNUAL REPORT HOUSEHOLD GOODS MOTOR CARRIER

**The Annual Report must be completed in full and received with the Annual Fee by April 1 to avoid suspension.**

**INCOMPLETE reports will be returned and carrier may be subject to suspension.**

NAME OF CARRIER (EXACT NAME UNDER WHICH CERTIFICATE IS ISSUED)		OREGON CERTIFICATE #		REPORT FOR YEAR ENDING	
				DECEMBER 31, 20 _____	
MAILING ADDRESS, CITY, STATE AND ZIP CODE				TELEPHONE NUMBER (INCLUDING AREA CODE)	
MAIN TERMINAL ADDRESS, CITY, STATE AND ZIP CODE				EMAIL ADDRESS	
<b>1</b>	TYPE OF OWNERSHIP <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LIMITED LIABILITY COMPANY				
<b>2</b>	INCOME DERIVED AS A MOTOR CARRIER FROM THE TRANSPORTATION OF HOUSEHOLD GOODS <b>SOLELY WITHIN OREGON:</b>  <b>A.</b> TOTAL GROSS OPERATING REVENUE: \$ _____  <b>B.</b> LINE A MULTIPLIED BY .001 (AKA: 1/10 <sup>TH</sup> OF 1% OR 0.1%): \$ _____ ← THIS IS YOUR ANNUAL FEE. ENTER AND PAY THE CALCULATED SUM OR \$100, WHICHEVER IS GREATER.  <b>C.</b> TOTAL GROSS OPERATING EXPENSE: \$ _____  <b>D.</b> SUBTRACT LINE C FROM LINE A THIS IS YOUR <b>NET INCOME:</b> (REVENUE MINUS EXPENSE) \$ _____				
<b>3</b>	WAS THIS REPORTING PERIOD YOUR FIRST YEAR OPERATING AS A MOTOR CARRIER OF HOUSEHOLD GOODS IN OREGON? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YOU CHECKED <b>YES</b> , YOUR ANNUAL FEE FOR THIS REPORTING PERIOD IS \$100.00 →		ANNUAL FEE \$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
<b>4</b>	BILL OF LADING NUMBERS UTILIZED FOR REPORTING PERIOD: <b>BEGINNING:</b> _____  <b>ENDING:</b> _____				
<b>5</b>	TOTAL NUMBER OF OREGON MOVES PERFORMED DURING THE REPORTING PERIOD:				
<b>6</b>	TOTAL NUMBER OF SHIPPER COMPLAINTS RECEIVED IN WRITING:				
<b>7</b>	CURRENT NUMBER OF OFFICERS (OWNERS):				
<b>8</b>	CURRENT NUMBER OF EMPLOYEES (OTHER THAN OWNERS):				
<b>9</b>	CURRENT NUMBER OF VEHICLES OWNED THAT ARE USED IN TRANSPORTATION OF HOUSEHOLD GOODS:				
<b>VERIFICATION</b>					
I DECLARE, UNDER PENALTIES FOR FALSE SWEARING, THAT THIS REPORT (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS A TRUE, CORRECT, AND COMPLETE REPORT.					
PRINT NAME				TITLE	
SIGNATURE				DATE	



## ANNUAL REPORT HOUSEHOLD GOODS MOTOR CARRIER

### CRIMINAL BACKGROUND CHECK INFORMATION

NAME OF CARRIER (EXACT NAME UNDER WHICH CERTIFICATE IS ISSUED)	OREGON CERTIFICATE #
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OREGON ADMINISTRATIVE RULE (OAR) 740-060-0045(3) REQUIRES INTRASTATE FOR-HIRE MOTOR CARRIERS OF HOUSEHOLD GOODS TO CERTIFY EACH YEAR THAT THEY ARE IN COMPLIANCE WITH ALL RULES OF THIS DEPARTMENT AND PROVIDE INFORMATION PERTAINING TO CRIMINAL BACKGROUND CHECK ACTIVITY.

PLEASE READ THE ATTACHED RULES PERTAINING TO CRIMINAL BACKGROUND CHECK REQUIREMENTS AND THEN PROVIDE THE FOLLOWING INFORMATION.

### DURING THE REPORTING PERIOD

<b>10</b>	NUMBER OF SUBJECT INDIVIDUALS HIRED: _____
<b>11</b>	NUMBER OF SUBJECT INDIVIDUALS ON WHOM CRIMINAL BACKGROUND CHECKS WERE OBTAINED FOR THE FOLLOWING:  <p style="text-align: center;"><b>NEW APPLICANTS:</b> _____</p> <p style="text-align: center;"><b>OFFICERS &amp; EMPLOYEES RECHECKED:</b> _____</p> <p style="text-align: center;"><i>CRIMINAL BACKGROUND CHECKS MUST BE COMPLETED PRIOR TO EMPLOYMENT OF SUBJECT INDIVIDUALS AND MUST BE COMPLETED EVERY THREE YEARS PER OAR 740-060-0045(1)(c).</i></p>
<b>12</b>	WITHOUT IDENTIFYING ANY INDIVIDUAL BY NAME, WHAT TYPE OF CRIMINAL CONVICTIONS WERE FOUND: <input type="checkbox"/> CHECK HERE IF NO CRIMINAL CONVICTIONS WERE FOUND.
<b>13</b>	IN REFERENCE TO THE INFORMATION PROVIDED IN THE PREVIOUS QUESTION, WHAT WAS YOUR COMPANY'S DECISION AS TO WHETHER THE SUBJECT INDIVIDUAL WAS HIRED, OR CONTINUED EMPLOYMENT, AND WHY:
<b>14</b>	NAME OF AGENCY AND/OR COMPANIES USED TO OBTAIN CRIMINAL BACKGROUND CHECKS:

### VERIFICATION

I DECLARE, UNDER PENALTIES FOR FALSE SWEARING, THAT THIS REPORT (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS A TRUE, CORRECT, AND COMPLETE REPORT.

PRINT NAME	TITLE
SIGNATURE	DATE

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HOUSEHOLD GOODS REGULATION UNIT AT (503) 779-8083



## Oregon Administrative Rules 740-060-0045

### Criminal Background Checks

- (1) Each carrier must obtain a criminal background check for each employee or any agent representing the carrier whose duties may require contact with the public or entry into a private residence or storage facility for the purpose of providing or facilitating the transportation of household goods. For the purpose of this rule:
  - (a) Carriers subject to these requirements are referred to as "Subject Employers."
  - (b) Employees or agents whose duties are described in this rule are referred to as "Subject Individuals."
  - (c) Criminal background checks must be completed prior to employment of Subject Individual and must be completed every three years.
- (2) Criminal Background Check means a public record of court actions regarding the Subject Individual covering each state the Subject Individual has resided in the last five years.
  - (a) Subject Employers must require each Subject Individual, as a condition of employment, to sign a release authorizing the Subject Employer to obtain the criminal background check required by this rule;
  - (b) The Department may require Subject Employers to obtain additional criminal background information from law enforcement on Subject Individuals;
  - (c) Criminal background checks must include a list of offenses that the Subject Employee has been convicted in a court of law and the date of each conviction.
- (3) Subject Employers must certify in their annual report due April 1 of each year that they are in compliance with all rules of the department and provide the following information about criminal history check activities:
  - (a) The number of Subject Individuals on whom criminal history checks were done during the preceding calendar year;
  - (b) The number of criminal history checks resulting in evidence of a criminal history including:
    - (A) Information about what was found without identifying the individual by name; and
    - (B) The Subject Employer's decision as to whether the Subject Individual was hired, or continued in employment, and if so, an explanation as to why.
- (4) Subject Individuals may not perform duties which may require contact with the public or entry into a private residence or storage facility for the purpose of providing or facilitating the transportation of household goods if they have been convicted of any felony within the five years preceding the criminal background check. In addition to any felony conviction, Subject Individuals may not have been convicted of a misdemeanor involving:
  - (a) Theft;
  - (b) Burglary;
  - (c) Sexual conduct;
  - (d) Manufacture, sale or distribution of a controlled substance;
  - (e) Identity theft or
  - (f) False statements.
- (5) Criminal background checks required by this rule must be retained by the carrier for at least three years from the date obtained.

PLEASE MAKE AND RETAIN A COPY FOR YOUR RECORDS