

IMA Endorsed Intrastate Mover Application Checklist

Name of Applying Moving Company

Street Address

City

State

Zip

Phone

Email

1. Are you a current IMA member (2016)? _____ Yes/ No
2. Date your business began. (Please provide documentation). _____
3. Current Better Business Bureau (BBB) rating. _____
4. Do you have any outstanding complaints or unresolved issues with the BBB? _____
If **yes**, please attach explanation.
5. Do you have a tariff on file with the state of Indiana that is current? _____
If **no**, please attach explanation.
6. Are you in good standing with the Indiana Department of Revenue (IDOR) with regard to your tariff filing and insurance? _____ If **no**, please attach explanation.
7. Do you have any outstanding complaints or unresolved issues with the IDOR? _____
If **yes**, please attach explanation.
8. Have you personally, any other owners, or this company filed for bankruptcy in any form in the past seven years? _____ If **yes**, please attach explanation.
9. Has the owner(s) or officer(s) ever been convicted of a felony? _____
If **yes**, please attach explanation.
10. Are any of the owners or officers currently the defendant in any form of litigation related to a moving issue? _____ If **yes**, please attach explanation.

I certify that the above information is accurate and current and represents the true profile of my company.

Print Name

Signature

Date

Please send this checklist along with your application, any supporting documentation and payment to; IMA, Endorsed Mover Program, 3721 W. Michigan Avenue, Suite 102, Lansing, MI 48917 -OR- You are welcome to scan and email to the address below.

Questions? Contact the IMA office at 517 – 327 – 9207 or, Donn@indianamoving.org