Application for Motor Common Carrier of Persons in Group and Party Service

Exclusively using vehicles with a seating capacity of 16 or more passengers, including the driver.

Please complete all parts of the following application. For questions, please call the Commission at 717-787-1227.

Legal Name of Applicant (Individual, Partnership or Corporation)
Project 4 ever Striving Inc.
Trade Name (if using a fictitious trade name, it must be registered with the Dept. (State)
Fictitious name and Registration number (if applicable) RY'S BURE NU
Physical Address (do not use PO Box)
2418 W. York Street
Philadelphia Pennsylvania 19132 City, State and Zip Code
Zib7-968-0607 Telephone Number County
Mailing Address (if different from Physical Address)
P.O. BOX 38279
Street Address Philadelphia Pennsylvania 19140
City, State and Zip Code
Attorney (if applicable)

Attorney's Name & Telephone Number for this Filing								
Attor	Attorney's Address							
Does applicant currently hold or has ever held PA PUC authority?								
If yes	If yes, enter current docket number A- NONE							
Applicant will be operating vehicles with a seating capacity of:								
iy/	16 to 28 passengers including the driver (Requires carrier to maintain a minimum of \$1 million in liability insurance coverage Checking this box will limit authority to providing service in vehicles having a seatin capacity of no more that 28 passengers including the driver)							
[]	More than 28 passengers including the driver (Requires carrier to maintain a minimum of \$5 million in liability insurance coverage)							
Are you one of the following? If yes, check below.								
[]	Individual							
[4	Partnership							
Are	vou a business entity regi	stere	ed with the PA Department of State?					
If Y	If YES, please check below the type of business that applies to this Application and provide the Entity ID Number given to you by the PA Department of State:							
[]	Limited Partnership							
			Corporation Bureau Entity ID Number					
[]	Limited Liability Partnership		Corporation Bureau Entity ID Number					
[]	Limited Liability Company		Corporation Bureau Entity ID Number					
[]	Corporation – For Profit		Corporation Bureau Entity ID Number					
[]	Corporation - Nonprofit		3824240					
	Corporation Bureau Entity ID Number If NO, contact the PA Department of State and apply according to how you will do business in PA:							
PA (Prof	Corporations (Profit or Non- it)	-	File for Articles of Incorporation					
Fore	eign Corporations	_	File for a Certificate of Authority					
PAI	Limited Partnerships, Limited	_	File for an Application of Registration					

Liability Partnerships, Limited Liability Companies

Fictitious Name Registration

File **only if** Trade Name will be different than the business name you register with the Department of State

10. Attachment Checklist

Individual:	[]	Certified Check, money order, or check from attorney Copy of Current Safety Rating (if available)			
Partnership:	[] []	Certified Check, money order, or check from attorney List of names and addresses of ALL Partners Copy of Current Safety Rating (if available)			
Limited	[]	Corporation Bureau Entity Number as entered above in #8			
Partnership:	[] [] []	· · · · · · · · · · · · · · · · · · ·			
Limited Liability Partnership:	[]	Corporation Bureau Entity Number as entered above in #8			
Tarmeromp.	[]	Certified Check, money order, or check from attorney List of names and addresses of ALL Partners Copy of Current Safety Rating (if available)			
Limited Liability Company:	[]	Corporation Bureau Entity Number as entered above in #8			
Company.	[]	Certified Check, money order, or check from attorney List of names and addresses of ALL Members and Title of each Member (even if only one member) Copy of Current Safety Rating (if available)			
	[]				
Corporation – For Profit:	[]	Corporation Bureau Entity Number as entered above in #8			
Total Tolle		Certified Check, money order, or check from attorney List of ALL Corporate Officers and Titles, name of each Shareholder and distribution of shares			
	[]	Copy of Current Safety Rating (if available)			
Corporation – Non-Profit:	[]	Corporation Bureau Entity Number as entered above in #8			
· · · · · · · · · · · · · · · · · · ·	[4 14	Certified Check, money order, or check from attorney List of ALL Corporate Officers and Titles and those serving on Board of Directors			

[] Copy of Current Safety Rating (if available)

11. Certification

Applicant certifies that it is not now engaged in any intrastate transportation of property for compensation between points in Pennsylvania and will not engage in said transportation unless and until authorization is received from the Pennsylvania Public Utility Commission.

Applicant further certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance and that it may be subject to civil penalties, suspension or cancellation of the Certificate for failure to comply with Commission requirements.

Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Property; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the Certificate.

Applicant must sign the following Verification of Application.

Verification of Application

The Verification of Application must be completed by the applicant appearing on Line 1 of the application: the named individual, all partners (if a partnership), or by any officer (if a corporation).

I/we hereby state that the statements made in this application are true and correct to the best of my/our knowledge and belief.

The undersigned understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 Relating to Unsworn Falsification to Authorities.

Letita Mack
(Print Name)

Retitia Mack
(Signature)

(Signature)

(Date)

List of names and addresses of ALL PartnersCopy of Current Safety Rating (if available)
[] Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney List of names and addresses of ALL Members and Title of each Member (even if only one member)
[] Copy of Current Safety Rating (if available)
[] Corporation Bureau Entity Number as entered above in #9
 [] Certified Check, money order, or check from attorney [] List of ALL Corporate Officers and Titles, name of each Shareholder and distribution of shares
[] Copy of Current Safety Rating (if available)
Corporation Bureau Entity Number as entered above in #9
[] Certified Check, money order, or check from attorney [**\footnote{\text{U}} List of ALL Corporate Officers and Titles and those on Board of Directors
[] Copy of Current Safety Rating (if available)

11. Certification and Verification - The verification of the application must be completed by the applicant appearing on Line 1 of the application by the named individual, all partners if a partnership, a member (if a limited liability company), or by any officer (if a corporation).

Please complete all pertinent parts of the application. If you need help, you may call 717-787-1227.



ORGANIZATIONAL CHART Board of Directors

CEO Letitia Mack 2915 N. Stillman St. Philadelphia, PA 19132 267-776-5482







President Doris Yarborough

Doris Yarborough 115 E. Gorgas Ln Philadelphia, Pa 19119 215-438-2033

Vice President

Rev. Anthony Floyd 2801 N.22nd St Philadelphia, PA 19132 267-298-6726

Secretary

Rev. Johnny E. Odom Jr. 125 W. Logan Street Apt. 2 Philadelphia, PA 19144





Treasurer Noleen Taylor

3450 Bowman Street Philadelphia, PA 19129 267-266-0301 Advisory Board
Dr. Tom Reid
Scnator Shirley Kitchen

Rev. Daniels

Project Mever Striving P. O. BOX 38279 Phila. PA. 19140 (19140)

> PA.P.U.C. SECRETARY'S BUREAU

RECEIVED

2013 APR -5

Secretary, Pennsylvamia
Public Utility Commission
P. O. Box 3265
Harrisburg, PA 17105-3265

