

Pennsylvania Public Utility Commission Bureau of Transportation & Safety PO Box 3265 Harrisburg, PA 17105-3265 (717) 787-3834

Application for Motor Common Carrier of Property

Please complete all parts of the following application. Incomplete applications will be returned. All questions may be directed to the Bureau of Transportation & Safety at (717) 787-3834.

Legal Name of Applicant (Individual, Partnership or Corporation) Trucking LLC	
Trada Nama (Attack a server of finitions assessmention if applicable)	
Trade Name (Attach a copy of fictitious name registration if applicable)	
DDW Trucking	
Physical Address (do not use PO Box)	
10113 Schoolhouse Rd	
Street Address	
Breinigsville PA 18031	
City, State and Zip Code	
610657-8582 <u>Leniah</u>	_
Telephone Number County	
Mailing Address (if different from Physical Address)	
Walling Place 600 (If amorotic from 1 hyologic reactions)	
Street Address	-
City, State and Zip Code	- 1 22
City, State and Zip Code	RF.
ن جا الله الله الله الله الله الله الله ا	ZZ Z
	NI3MAY20 PRETABBUL
S BUREAU	MAY 20 PH
$\frac{\partial \mathcal{L}}{\partial \mathcal{R}}$	C P# 3:
\cdot $\overset{F}{\mathcal{A}}$	
9 - 1 - 1 4/09)	17

Atto	orney (if applicable)				
Attor	ney's Name & Telephone Number for this Filing				
Attor	ney's Address				
Doe	s applicant currently hold PA PUC authority? Yes No (circle one)				
If yes	s, enter current docket number A-00				
Wha	at type of commodity do you intend to transport?Scrap Stel_				
9	eneral freight.				
Forr	n of Organization (Check one that applies to this application) Individual				
[]	Partnership Attach a copy of a Partnership Agreement and list the names and addresses of ALL partners.				
[]	Corporation Attach a copy of the Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration. Include a list of all corporate officers/titles and distribution of sh				
[]	LLC or LLP Attach a copy of the Certificate of Incorporation, Certificate of Authority, or foreign corporation registration. Include a list of all members (even if there is only one member title of each member.				
Atta	chment Checklist				
For	Corporations:				
[]	Copy of Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration.				
[]	List of all corporate officers/titles, names of shareholders and distribution of shares.				
For	LLPs and LLCs Only:				
[]	Copy of Certificate of Incorporation, Certificate of Authority, or foreign corporation				
	registration. List of all members (even if there is only one member) and title of each member.				
For	Partnerships Only:				
[]	Copy of Partnership Agreement. List the names and addresses of ALL partners.				
[]	List the harnes and addresses of ALL partners.				

For	For ALL Applicants:						
[]	Fictitious Trade Name Registration (if applicable).						
[]	Copy of Current Safety Rating (if available).						
[]	Proof of Insurance (See item 5 on instruction sheet						

Certified check, money order or attorney's check.

Certification 10.

ĬĬ

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.

You must sign the following Verification of Application.

Verification of Application

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) or by the President or Secretary (if a corporation).

I/we hereby state that the statements made in this application is/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. TO THE SECOND STATE OF THE SECOND SEC

(Print Name)

PUC 189 (Revised 4/09) - 3 -

B Rucking, LLC COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS 401 NORTH STREET, ROOM 206 P.O. BOX 8722 HARRISBURG, PA 17105-8722 WWW.CORPORATIONS.STATE.PA.US/CORP

THE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS IS HAPPY TO SEND YOU YOUR SOCUMENT. THE BUREAU IS HERE TO SERVE YOU AND WANTS TO THANK YOU FOR DOING BUSINESS NSYLVANIA.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE BUREAU, PLEASE VISIT OUR WEB SITE LOCATED W.CORPORATIONS.STATE.PA.US/CORP OR PLEASE CALL OUR MAIN INFORMATION TELEPHONE R (717)787-1057. FOR ADDITIONAL INFORMATION REGARDING BUSINESS AND / OR UCC FILINGS, VISIT OUR ONLINE "SEARCHABLE DATABASE" LOCATED ON OUR WEB SITE.

ENTITY NUMBER: 4181344

Entity #: 4181344 Date Filed: 04/17/2013 Carol Aichele Secretary of the Commonwealth

LVANIA DEPARTMENT OF STATE J OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Certificate of Organization Domestic Limited Liability Company (15 Pa.C.S. § 8913)

. Swartz		\ <u>u</u>	ocument will be retu ame and address you be left.		
			=		
Main Street					
State	Zip Code		Commonwe	atth of Pennsylvania ORGANIZATION 3 Page	<i>t</i> _3
sville PA	18051		CERTIFICATE OF	CRGANIZATION 3 Page	<i>(8)</i>
			T 1:	11260007	
pliance with the requiren anize a limited liability o			g to certificate of	organization), the un	dersign
ne of the limited liability of company" or abbreviation	ompany (designator i	is required, i.e., '	company", "limite	d" or "limited	
	DDW Trucki	ing, LLC	\$		1
)
	_ 				J
address of the limited liab imercial registered office p mber and Street Schoolhouse Ro	covider and the country	ty of venue is: State	Zip .	cealth or (b) name of County Lehigh	
ume of Commercial Regist				County	
]
ne and address, including	street and number, if	any, of each orga	nizer is (all organi	zers must sign on	
W. Walbert		Address 10113 Sch	oolhouse R	oad	
¥ 4		Breini g sv	ille, PA i	8031	
* *					
`6 * 6 * 6					
			·		3

STATE

2013

Section of the sectio

	s
-2	• •
·	•
.2	
-2	
ut if inapplicable term	
b er's interest in the company	y is to be evidenced by a certificate of membership interest.
	
t if inapplicable:	
nent of the company is veste	od in a managor or managors.
	
	
ified effective date, if any is:	
	month date year hour, if any
	•
	* <u> </u>
Hif Inapplicable: The compl	any is a restricted professional company organized to render the followin
l professional service(s).	
piolessional service(s).	
	
<u> </u>	
	
ional provisions of the certif	ficate, if any, attach an 81/2 x 11 sheet.
•	,
	<u> </u>
	IN TESTIMONY WHEREOF, the organizer(s) has (have
	signed this Certificate of Organization this
	day of APZIL 2013
	day of npk 12
	<u> </u>
,	DWANT D Wallest
	Ilwand U wallow
	Signature
	,
•	•
	0!
	Signature
	Signature
	Signature
	Signature

DDW Trucking LLC 10113 School house Rd LEHIGH VALLEY PA 180 16 MAY 2013 PM 4 L Breinigsuille, PA 18031 Pennsylvania Public Utility Commission Burlace of Transportation & Safety PO BOX 3265

Harrisburg PA