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.

<u> </u>			-
Trade Name (Attach a copy of fictitious	name registration if	applicable)	
Physical Address (do not use PO Box	x)		
180 MARSHAU L	ANT.		
Street Address	31·1D		
BEDFORD PA	15522		
City, State and Zip Code			
814 GZ4 8006		BEDFORD	(45)
Telephone Number	Count	ty	
Mailing Address (if different from Phys	sical Address)		
SAME			
Street Address			
City, State and Zip Code			
			SECRE

		As a
5.	Attor	ey's Address
	Attorn	ey's Name & Telephone Number for this Filing
	Attorn	ey's Address
6.	Does	applicant currently hold PA PUC authority? Yes No (circle one)
	If yes,	enter current docket number A-00
7.	What	type of commodity do you intend to transport?
		PECYCLABLE PLASTIC, CARDEDARD
8.	Form	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 shares.
	[]	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) and title of each member.
9.	Attac	chment Checklist
	For C	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 L	LPs 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 F [] []	Partnerships Only: Copy of Partnership Agreement. List the names and addresses of ALL partners.

PUC 189 (Revised 4/09)



## 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.

## 10. 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.

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.

(Print Made M.) Kin

Signature)

(Date)

PUC 189 (Revised 4/09) Bedford

PENNSYLVANIA FINANCIAL RESPONSIBILITY IDENTIFICATION CARD COMPANY COMMERCIAL PERSONAL NAIC NUMBER Grange Insurance EFFECTIVE DATE **6/12/2013** NOT VALID MORE THAN ONE (1) YEAR FROM EFFECTIVE DATE POLICY NUMBER XA2041646 YEAR 1986 VEHICLE IDENTIFICATION NUMBER 1XP9D29X6GN202540 MAKE/MODEL Peterbilt Tractor AGENCY/COMPANY ISSUING CARD
Reed, Wertz & Roadman AGENCY/COMPANY TELEPHONE NUMBER (800) 458-5856 INSURED Chad Kidd 180 Marshall Lane

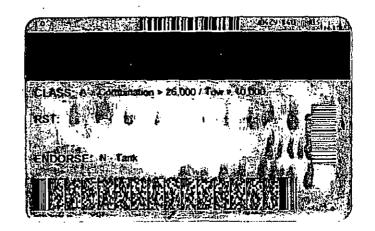
PA 15522

SEE IMPORTANT NOTICE ON REVERSE SIDE

RIECEIVED

19 JIN 19 MII: 40





RECEIVED
2013 JUN 19 MII: 40
SECRETARY'S BURE AU