

A-00100359 F1

APPLICATION

F1 AMB



**LAW OFFICES OF  
JOHN A. PILLAR**

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April 23, 2007

Re: Baker's Transportation Service, Inc.  
Docket A-00100359  
File No. 2316

Hon. James J. McNulty, Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

Dear Mr. McNulty:

Enclosed for filing are the original and one copy of an application on behalf of Baker's Transportation Service, Inc. for authority to transport persons, in paratransit service, from points in Venango County to points in Pennsylvania, and return. Also enclosed is the filing fee in the amount of \$350.00.

Please acknowledge receipt of the enclosures on the duplicate of this letter of transmittal and return it in the stamped, self-addressed envelope provided. If you require anything further in order to process this application, please contact me.

Very truly yours,

JOHN A. PILLAR

sw  
Enclosures  
cc: Baker's Transportation Service, Inc. (w/o encl.)

RECEIVED  
TRANSPORTATION SAFETY  
2007 APR 26 PM 2:23

RECEIVED  
P.A.P.U.C.  
SECRETARY'S BUREAU  
2007 APR 26 AM 10:49

DOCUMENT  
FOLDER

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

PUC 178 (revised 4/05)

## Application for Motor Common or Contract Carrier of Persons

Check only **one** service type:

- Airport Transfer                       Paratransit  
 Call or Demand                         Scheduled Route  
 Group and Party  
(15 passengers or less)

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2007 APR 26 AM 10:19  
SECRETARY'S BUREAU

1. Baker's Transportation Service, Inc.  
Full Name of Applicant (Individual, Partnership or Corporation)

2. N/A  
Trade Name if Any

The trade name, if fictitious, \_\_\_\_\_ been registered with the  
(has or has not)  
Secretary of the Commonwealth on \_\_\_\_\_. Attach a date-  
stamped copy of the registration form.

630441

3. 1400 West First Street  
Oil City, Venango County, PA 16301                      814-678-2443  
Physical Address (City, County, and Zip Code)                      Telephone Number (Required)

2007 APR 26 PM 2:23  
TRANSPORTATION SAFETY

4. See #3 above  
Mailing Address if Different from Physical Address

**DOCKETED**  
MAY - 2 2007  
TZ

5. John A. Pillar, Esq.                      412-343-0970                      FAX: 412-343-0971

Attorney's Name and Telephone Number for this Filing  
(Do not supply an Attorney's name if you want all correspondence and notice of process mailed directly to you.)

680 Washington Road, Suite B101, Pittsburgh, PA 15228  
Attorney's Address

6. Applicant does hold PA PUC Authority Under  
(does or does not)  
Docket Number A-00100359, and operates as a common carrier.

**DOCUMENT  
FOLDER**

A-100359  
F1 Am-B

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(common or contract)

7. Applicant does not hold interstate operating authority at  
(does or does not)  
Docket Number \_\_\_\_\_.

8. Check **one** that applies to this application:

**Individual**

**Partnership** Attach a copy of a Partnership Agreement and list the names and addresses of all the partners below:

\_\_\_\_\_

\_\_\_\_\_  
(Attach a separate sheet if space provided is not sufficient.)

**Corporation** Organized under the laws of the State of Pennsylvania  
and qualified to do business in Pennsylvania by registering with the  
Secretary of the Commonwealth on 1996.

Attach a date-stamped copy of the application for Certificate of Incorporation  
or Certificate of Authority. Include a list of corporate officers with titles,  
names of shareholders and number of shares held, and addresses.

9. Attachment Checklist:

**For Corporations Only:**

Date-stamped copy of application for Certificate of Incorporation or  
Certificate of Authority. ON FILE WITH THE COMMISSION

List of corporate officers/titles and distribution of shares. ON FILE WITH THE COMMISSION

Statement of corporate charter purpose.

**For Partnerships Only:**

Copy of Partnership Agreement.

**FOR ALL APPLICANTS:**

Fictitious Trade Name Registration (if applicable).

Map for scheduled route Service (if applicable).

Certified check, money order or attorney's check.

10. Describe the service proposed by this application. Common or contract? In what area of Pennsylvania will this proposed service be provided?

(Use the space below or attach additional sheet if space provided is not sufficient).

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To transport, as a common carrier, persons, in paratransit service, between points in the County of Venango:

so as to permit the transportation of persons, in paratransit service, from points in Venango County to points in Pennsylvania, and return.

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11. Certification:

Applicant certifies that it is not now engaged in unauthorized intrastate transportation 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 Passengers; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the certificate.

## Verification of Application

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.

Debra L. Sanford, President

\_\_\_\_\_  
(Print Name)

*Debra L. Sanford*  
\_\_\_\_\_  
(Signature)

*April 19, 2007*  
\_\_\_\_\_  
(Date)

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).

Revised 4/05