Commonwealth of Pennsylvania to cover the required application filing fee:

The original and one copy of the Application for Motor Common Carrier

A copy of the Pennsylvania Department of State approved Application for

A money order in the amount of \$100.00 made payable to

4. A list of the officers, directors and shareholders of Savage Fueling Corporation; and,

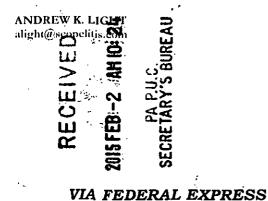
This Firm represents Savage Fueling Corporation, an interstate motor carrier intending to transport intrastate freight in Pennsylvania. Enclosed for filing are the following documents required to be filed in order to obtain intrastate

5. The motor carrier's insurance binder (or declaration page) as evidence of the motor carrier's auto liability insurance coverage.

Please return to me in the enclosed self-addressed, stamped envelope a filestamped copy of the documents evidencing receipt of the application. Should you have any questions regarding the application, please feel free to contact my

> Indianapolis = Chicago = Washington, D.C. = Los Angeles = Chattanooga Detroit = Spokane = Dallas/Fort Worth = Milwaukee = Philadelphia/Mt. Ephraim

10 West Market Street Suite 1500 Indianapolis, IN 46204



400 North Street

Re:

1.

2.

3.

Harrisburg, PA 17120

To Whom It May Concern:

motor carrier authority:

of Property;

Certificate of Authority;

Pennsylvania Public Utility Commission Bureau of Transportation and Safety

Savage Fueling Corporation

Pennsylvania Intrastate Authority

The full service transportation law firm

ESCOPELITIS

GARVIN LIGHT HANSON & FEARY

www.scopelitis.com

Main (317) 637-1777 Fax (317) 687-2414

January 29, 2015

2015 JAN 30 PM 2:

10 West Marke Suite 1500

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Page 2 January 29, 2015

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paralegal, Sue Madden, or me at the above telephone number. Thank you for your prompt attention to processing of the attached Application.

Very truly yours,

Andrew K. Light

AKL/smm Enclosures cc: Tad Koch via e-mail (w/enclosures) H:\Users\smadden\\WPDOCS\Savage Transportation Mgmt\PA intrastate Submittal Ltr.docx Secretary Pennsylvania Public Utility Commission 400 North Street, Second Floor Harrisburg, PA 17120 (717) 772-7777 www.puc.pa.gov



Revised 12/1/13

2015 FEB -2 AH 10: 24

Application for Motor Commons Centres of Bungerty

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE TO OPERATE AS A COMMERCIAL CARRIER OF PROPERTY FOR COMPENSATION BETWEEN POINTS IN PENNSYLVANIA.

1. Legal Name of Applicant (Individual, Partnership or Corporation)

Savage Fueling Corporation

- If you are an individual who has not formed any type of corporate entity, you should enter your name as it will appear on your insurance documents.
- If you are filing for a partnership, but *not a limited liability partnership*, the names of all partners must be entered on this line. Those names should be entered as they will appear on your insurance documents. This includes husbands and wives filing jointly.
- If you are filing for a corporate entity (corporation, limited liability company, or limited liability partnership), even if you are the sole shareholder member, you must enter the name exactly as it appears on the registration papers from the Corporation Bureau of the Pennsylvania Department of State.
- 2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

This is any name which you will be operating under which differs from the LEGAL NAME OF APPLICANT. A TRADE NAME is considered a FICTITIOUS NAME if the identity of the applicant cannot be readily determined. *EXAMPLE: John Doe is the applicant and wants to use the name* "Johnboy Trucking" as his trade name. People cannot readily determine that John Doe is the actual operator; therefore, the name is fictilious and must be registered as such. Trade names such as "John Doe Trucking" or "J. Doe Trucking" are not considered fictitious and would not have to be registered.

3. Do you currently hold PA PUC Authority? X-NO Previous Authority? ___NO

If yes, at PUC No. A- _____ N/A

4. Are you a business entity registered with the PA Department of State? ____NO If No, you must first register (see checklist)

If Yes, provide your PA Corporation Bureau Entity ID Number 432 4298 (see checklist and indicate type of business entity registered)

5. Physical Address (do not use post office box)

901 West Legacy Center Way	
Street Address	
Midvale, UT 84047	
City, State and Zip Code	
801-944-6600	Salt Lake

Telephone Number

County

The address entered here should reflect the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment.

6. Mailing Address (if different from Physical Address)

Street Address

City, State and Zip Code

This is the address to which the Commission will send all official documents issued by the Commission. If left blank, it will be assumed that the MAILING ADDRESS is the same as the **PHYSICAL ADDRESS**.

7. **Attorney** (if applicable)

Andrew K. Light 317-637-1777 Attorney's Name & Telephone Number for this Filing Scopelitis Garvin Light Hanson & Feary 10 W. Market Street, Suite 1500, Indianapolis, IN 46204 Attorney's Address

An attorney's name should only be entered if an attorney is filing the application for a client and the application is being sent under the attorney's cover letter.

8. Do you hold interstate operating authority?

No X Yes, at No. MC-895632

9. What type of commodities do you intend to transport?

General freight; logs, poles, beams, lumber, railroad ties, motor fuel.

10. 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 Property; 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 statement(s) 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 Name) (Signature)

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 the President or Secretary (if a corporation).

		Entity #: 4324298 Date Filed: 01/16/2015 Pedro A. Cortés Acting Secretary of the Commonwealth
		
PENNSYLVANIA DEPARTMEN BUREAU OF CORPORATIONS	l'or state ND Charitable orga	NIZATIONS
Applicatic	n for Certificate of Author (15 Pn.C.S.)	rity
Fore	gn Business Corporation (§ 4124) gn Nonprofit Corporation (§ 6124)	
Nome Adureas CT - COUN		cument will be returned to the Commonwealth of Pennsylvania CERTIFICATE OF AUTHORITY 3 Page(s)
City 9401941	210 Code	
Fco: \$250	•	11502241130
In compliance with the requirement associations), the undersigned, hereby states th		a.C.S. (relating to corporations and unincorporated
1. The nume of the corporation is: Savage Fueling Corporation		
2. Complete only when the corporation a The name which the corporation adop		v use in Pennsylvania.
3 If the name set forth in paragraph 1 of The fictitious name which the corpora	2 is not available for use in this Co. ion adopts for use in transacting bus	mmonwealth, complete the following: iness in this Commonwealth is:
The corporation shall do business in Penne directors under the applicable provisions of DSCB:54-311 (Application for Registration	I 5 Pa.C.S. (rolating to corporations and	purponul to the attached resolution of the board of d unincorporated associations) and the attached form
4 The name of the jurisdiction under the	laws of which the corporation is inc	orporated is: Utah
5 The address of its principal office und	a the laws of the jurisdiction in whic	th it is incorporated is:
901 West Legacy Center Way, Midval Number and street	o, Ulah 84047 City Stato	Zip
 6 The (a) address of this corporation's p registered office provider and the cour (a) Number and street 	oposed registered office in this Com ty of venue is: City State	monwealth or (b) name of its commercial Zip County
(b) Name of Commercial Registered (ffice Provider	County
C'T CORPORATION SYSTEM		Dauphin
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RANDEPT. OF STATE	EINED	ออช่

DSCB:15-4124/6124-2

7 Check one of the following:

Business Corporation: The corporation is a corporation incorporated for a purpose or purposes involving pecuniary profit, incidental or otherwise.

_ Norprofit Corporation: The corporation is a corporation incorporated for a purpose or purposes not involving pecuniary profit, incidental or otherwise.

8 Business corporations only. Check any applicable statements:

This corporation is organized on a nonstock basis.

This corporation is a statutory close corporation.

This corporation is a management corporation.

This corporation is a professional corporation. This corporation is an insurance corporation.

This corporation is a benefit corporation.

IN TESTIMONY WHEREOF, the undersigned corporation has caused this Application for Certificate of Authority to be signed by a duly authorized officer thereof this ______ day of ______ APULARY, 20_____

Savage Pueling Corporation

Name of Corporation

Tad A. Koch Vico President

Title

REV 08/2014 11/27/2014 CT 1984 Manuface Online <u>Name</u> Allen B. Alexander Kirk W. Aubry Curtis C. Dowd

Kelly J. Flint Donald W. Alexander David L. Harris John K. Savage Michelle Hollingsed Steve Peterson Sharon Broadwater Tad A. Koch Amy Poulson Benjamin W. Bates Steven J. Newman

Position

Chief Executive Officer and Director President & COO and Director Executive Vice President & CFO and Director Sr. Vice President & Secretary Sr. Vice President and Director Sr. Vice President & Treasurer Sr. Vice President Vice President Vice President Vice President Vice President Assistant Secretary Assistant Secretary

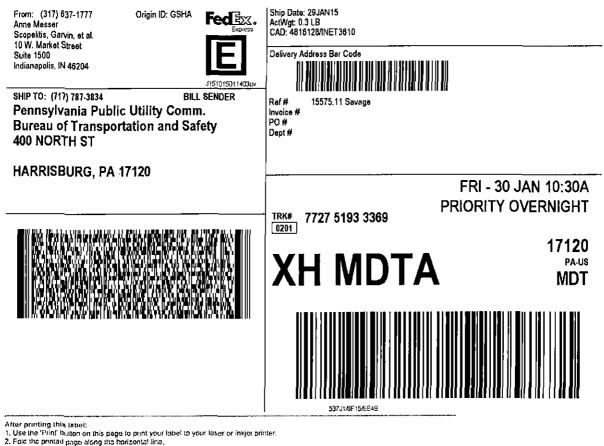
Savage Fueling Corporation – Shareholders:

Savage Services Corporation - a Utah Corporation - 100% of the shares

SECRETARY'S BUREAU

5012 EEB - 5 WI 10: 52

RECEIVED



3 Place label in shipping pouch and utivil to your shipment so that the barcode portion of the label can be read and scanned

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number, Use of this system constitutes your agreement to the service conditions in the current FodEx Service Guide, available on fedex com FédEx Use of this system constitutions your adjustment of the device containing in the cument poler sector device contact, data, non-tell/way,mised-contrevent will not be may claim in excess of \$100 per package, whicher the result of loss, damage, data, non-tell/way,mised-contrevent found in the current FedEx Service Guide apply. Your right to recover from FedEs for any loss, including intrinsic value of the package, loss of seles, income interest, profit, altorney's fees, costs, and of their provide data actual documented loss Maximum for rams of is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss Maximum for rams of extraordinary value is \$1,000, e.g. Jeweky, proclous metals, negotiable instruments and other Items listed in our ServiceGuide. Written claims must be filed writtin strict time firmts, see current FedEx Service Guide,