



**TSI Warehouse – PA, Inc.**  
3322 Route 22 West, Suite 1003  
Branchburg, NJ 08876  
(908) 255-4697  
Fax (908) 766-4417

February 19, 2015

**RECEIVED**

Secretary, PA Public Utility Commission  
400 North Street, 2<sup>nd</sup> Floor  
Harrisburg, PA 17120


FEB 19 2015

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

Dear Secretary:

Enclosed is an application for Motor Common Carrier of Property along with a cashier's check in the amount of \$100.00 payable to the Commonwealth of Pennsylvania. Please let me know if you have any questions or need additional information.

Sincerely,

  
Robert W. Deller  
President

RWD/gw  
Encl.

FEB 19 2015

Pennsylvania Public Utility Commission  
400 North Street, Second Floor  
Harrisburg, PA 17120  
(717) 772-7777  
[www.puc.pa.gov](http://www.puc.pa.gov)

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

**Application for Motor Common Carrier of Property**

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)

TSI Warehouse - PA, Inc.

- 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)

TSI Warehouse - PA, Inc.

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 fictitious 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?**  **NO** **Previous Authority?**  **YES**  **NO**

If yes, at PUC No. A- 8915476

4. **Are you a business entity registered with the PA Department of State?**  **YES**  **NO**

If No, you must first register (see checklist)

If Yes, provide your PA Corporation Bureau Entity ID Number 1870-801  
(see checklist and indicate type of business entity registered)

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

200 Cascade Drive, Suite B  
Street Address

Allentown, PA 18109  
City, State and Zip Code

908-255-4697  
Telephone Number

LeHigh  
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)

3322 Route 22 West, Suite 1003  
Street Address

Branchburg, NJ 08876  
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)

\_\_\_\_\_  
Attorney's Name & Telephone Number for this Filing

\_\_\_\_\_  
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?**

X No                    Yes, at No. \_\_\_\_\_

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

Plastic Bottles, Tubes, Caps and KD Corrugate Cartons  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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.

Robert W. Deller  
\_\_\_\_\_  
(Print Name)

 \_\_\_\_\_ 2-19-2015  
(Signature) (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, a member (if a limited liability company), or by the President or Secretary (if a corporation).

00052

# FedEx Package US Airbill Express

FedEx Tracking Number

8055 2880 8757

Form ID No.

0215

Recipient's Copy

### 1 From

Date 2/19/2015

Sender's Name

Robert Daller

Phone 908 255-4697

Company

TRANSPORT SYSTEMS

Address

3322 ROUTE 22 STE 1003

Dept./Floor/Suite/Room

City

BRANCHBURG

State

NJ

ZIP

08876-4403

### 2 Your Internal Billing Reference

### 3 To

Recipient's Name

Secretary

Phone 717-787-3834

Company

PA Public Utility Commission

Address

400 North Street, 2nd Floor

We cannot deliver to P.O. boxes or P.O. ZIP codes

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

Harrisburg

State

PA

ZIP

17120

0113727944



8055 2880 8757

### 4 Express Package Service

\* To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.

For packages over 150 lbs., use the FedEx Express Freight US Airbill.

#### Next Business Day

- FedEx First Overnight  
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- FedEx Priority Overnight  
Next business morning\*. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- FedEx Standard Overnight  
Next business afternoon\*. Saturday Delivery NOT available.

#### 2 or 3 Business Days

- FedEx 2Day A.M.  
Second business morning\*. Saturday Delivery NOT available.
- FedEx 2Day  
Second business afternoon\*. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
- FedEx Express Saver  
Third business day\*. Saturday Delivery NOT available.

### 5 Packaging

\* Declared value limit \$500.

- FedEx Envelope\*
- FedEx Pak\*
- FedEx Box
- FedEx Tube
- Other

### 6 Special Handling and Delivery Signature Options

- SATURDAY Delivery  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.
- No Signature Required  
Package may be left without obtaining a signature for delivery.
- Direct Signature  
Someone at recipient's address may sign for delivery. Fee applies.
- Indirect Signature  
If no one is available at recipient's address, someone at a neighboring address may sign for delivery for residential deliveries only. Fee applies.

#### Does this shipment contain dangerous goods?

- No
  - Yes  
As per attached Shipper's Declaration not required.
  - Yes  
Shipper's Declaration not required.
  - Dry Ice  
Dry Ice, 3 UN 1845 \_\_\_\_\_ kg
  - Cargo Aircraft Only
- Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

### 7 Payment Bill to:

- Sender  
Acct. No. in Section 1 will be billed.
- Recipient
- Third Party
- Credit Card
- Cash/Check

Total Packages

Total Weight

Credit Card Auth

\*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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