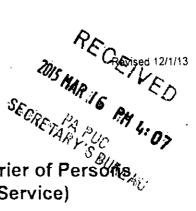
Secretary Pennsylvania Public Utility Commission 400 North Street, Second Floor Harrisburg, PA 17120 (717) 772-7777 www.puc.pa.gov



Application for Motor Common Carrier of Persons, upon Call or Demand (Taxi Service)

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE PROVIDING LOCAL TRANSPORTATION ON EITHER EXCLUSIVE OR NONEXCLUSIVE BASIS, AND SERVICE IS CHARACTERIZED BY PASSENGERS HIRING THE VEHICLE AND ITS DRIVER EITHER BY TELEPHONE CALL OR BY HAIL, OR BOTH. THIS APPLICATION CANNOT BE USED TO APPLY FOR TAXI SERVICE WITHIN THE CITY AND COUNTY OF PHILADELPHIA.

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

Amigo Cab, LLC

- 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 <u>exactly as it appears on the registration papers from the Corporation</u>. <u>Bureau of the Pennsylvania Department of State</u>.
- 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 fictilious and would not have to be registered.*

3. Do you currently hold PUC Authority? ____NO Previous Authority? ____NO

If YES, at PUC No. A- 2012-2176038_____

4. Are you a business entity registered with the PA Dept. of State? ____NO If NO, you must register (see checklist on how to register)

If YES, provide your PA Corporation Bureau Entity ID Number 4330829______ (see checklist and indicate type of business entity registered)

5. Physical Address (do not use PO Box)

2304 Walnut Street

Street Address

Harrisburg, PA 17103 City, State and Zip Code

717-773-5452

Dauphin County

Telephone Number

The address entered here should be 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)

Justine L. Pate, Esq. 347-351-2631 Attorney's Name & Telephone Number for this Filing

620 S 13th Street, Harrisburg, PA 17104

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. Does applicant hold interstate operating authority?

X No Yes, at No. _____

9. **Describe the service area proposed by this application.** (Use the space below or attach additional sheet if space provided is not sufficient).

To transport persons in call or demand service from points in the counties of Berks and Lancaster to points in Pennsylvania and return.

Examples:

- To transport people upon call or demand in the city of Reading, Berks County.
- To transport people upon call or demand in Spring Township, Centre County.

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 Persons upon Call and Demand (Taxi Service); 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)	
	3/16/15
(Signature)	(Date).
The verification of the application must be complet of the application by the named individual, all partr limited liability company), or by the President or Se	ners if a partnership, a mem g er (if 📰 👘 🔿

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Amigo Cab, LLC

Member: Saber Elnaggar, 2304 Walnut Street, Harrisburg, PA 17103, 100% Shapes

Manager: Maher S. Ahmed, 2304 Walnut Street, Harrisburg, PA 17103, 717-773-5452

