Revised 6/12/

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 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)
	MT Everest Moving Company Inc
	ff 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 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?NO
	If yes, at PUC No. A- 89 1755 3
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 6475502 (see checklist and indicate type of business entity registered)

	Convad & Martin 69 9 Line Rd Stevers 1.		
	Physical Address (do not use post office box)		
	26   Wabash Rd		
	Ephrata PA 17522 City State and Zip Code		
	717-314-7697 Lancaster  Telephone Number County		
	The address entered here should reflect the actual location of the business. This is the address he Commission needs in order to dispatch Enforcement Officers to inspect equipment.		
Mailing Address (if different from Physical Address)			
	Mailing Address (if different from Physical Address)		
	Mailing Address (if different from Physical Address)  Street Address		
	Street 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		
	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.		
	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.  Attorney (if applicable)		
	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.  Attorney (if applicable)  Attorney's Name & Telephone Number for this Filing		
1	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.  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		

-			
(	Certification:		
1	Applicant certifies that it is not for compensation between po transportation unless and unti Utility Commission.	ints in Pennsylvania	and will not engage in said
 	Applicant further certifies that Public Utility Commission, esp it may be subject to civil penal failure to comply with Commis	pecially as they relate Ities, suspension or c	to safety and insurance an
; ;	Applicant further certifies that assessment based upon its reassessment to help defray export Property; and acknowledge assessment may result in civil	ported gross Pennsy penses incurred in re s that failure to repor	rivania intrastate revenues; gulating Motor Common Ca t revenue and pay its annu
fic	cation of Application		
	ereby state that the statement it of my/our knowledge and be		ication is/are true and corre
	dersigned understands that fa es of 18 Pa. C.S. Section 490		
<u>_</u>	onrad 5 May ame)	rtin	· ··••
/	m m	-	08/05/
atı	urė)		(Date)
~	rification of the application mu pplication by the named indiv liabilitycompany), or by the P	idual all nartners if s	nartnershin a member (if
C	: <del>2</del>		
ANIO	. ၁ <u>၈</u>		Revised 6/12/

What type of commodities do you intend to transport?

10.

Mt Everat Moving Co 261 Wabash Rd Ephran PA 17522



91EVENS, PA 17578 AUG 18 17 AMOUNT \$ 1.19 17120 R2305K137879-04

Secretary, PA PUC 400 North Derry 40 North Street, 2nd Floor Harrisburg, PA 17120