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July 16, 2014

Rosemary Chiavetta, Secretary Pennsylvania Public Utility Commission Commonwealth Keystone Building 400 North Street, 2nd Floor Harrisburg, PA 17120 **VIA ELECTRONIC FILING** 

Re:	Application of Lyft, Inc., For Emergency Temporary Authority to Offer
	<b>Experimental Transportation Network Service Between Points in Allegheny</b>
	County, PA; Docket No.

Dear Secretary Chiavetta:

Attached for filing with the Pennsylvania Public Utility Commission is the Application for Emergency Temporary Authority of Lyft, Inc. in the above-captioned proceeding. In addition, following via hand delivery is a check in the amount of \$100.00 to cover the requisite filing fee. Thank you.

Sincerely,

McNEES WALLACE & NURICK LLC

By

Adeolu A. Bakare

Counsel to Lyft, Inc.

lmc Enclosure

c: Robert F. Powelson, Chairman (via e-mail and First Class Mail)
John F. Coleman, Jr., Vice Chairman (via e-mail and First Class Mail)
James H. Cawley, Commissioner (via e-mail and First Class Mail)
Pamela A. Witmer, Commissioner (via e-mail and First Class Mail)
Gladys M. Brown, Commissioner (via e-mail and First Class Mail)
Jan H. Freeman, Executive Director (via e-mail and First Class Mail)
Mary Beth Osborne, Directory of Regulatory Affairs (via e-mail and First Class Mail)

Paul Diskin, Director of Bureau of Technical Utility Services (via e-mail and First Class Mail)

Bohdan R. Pankiw, Chief Counsel of Law Bureau (via e-mail and First Class Mail)

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# BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

Application of Lyft, Inc., For Emergency

Temporary Authority to Offer Experimental

Docket No. A-2014-

Transportation Network Service

Between Points in Allegheny County, PA

APPLICATION FOR EMERGENCY TEMPORARY AUTHORITY OF LYFT, INC.

Pursuant to Section 3.383(c) of the Pennsylvania Public Utility Commission's ("PUC" or "Commission") Regulations, Lyft, Inc. ("Lyft"), submits this Application for Emergency Temporary Authority ("ETA Application") to operate an experimental transportation network service between points in Allegheny County, Pennsylvania. *See* 52 Pa. Code § 3.383(c). In

support thereof, Lyft avers as follows:

I. Background

1. Lyft hereby requests permission from the Commission to operate as a Transportation Network Company ("TNC") offering experimental transportation network service between points in Allegheny County, Pennsylvania. As explained herein, Lyft has demonstrated that the public has an immediate need for its transportation network service to improve transportation alternatives. As acknowledged by the Commission's Administrative Law Judges ("ALJs") Mary D. Long and Jeffrey A. Watson, Lyft's service offers a number of crucial benefits, including, but not limited to, "supplementing existing public transportation, reducing single occupancy vehicle trips, vehicle ownership and usage, and assisting the state in achieving

<sup>1</sup> Petition of the Bureau of Investigation and Enforcement of the Pennsylvania Public Utility Commission for an Interim Emergency Order requiring Lyft, Inc., to immediately cease and desist from brokering transportation service for compensation between points within the Commonwealth of Pennsylvania, Order on Interim Emergency Relief, P-2014-2426847 (July 1, 2014), p. 11, citing Application of Lyft, Inc., A-2014-2415045 and A-2014-2415047

reductions in greenhouse gas emissions." Commission approval of the instant Application is

necessary to ensure these benefits, and others highlighted herein, continue in the Commonwealth.

- 2. On April 3, 2014, Lyft filed an Application at Docket No. A-2014-2415045 ("Allegheny County Application") requesting the issuance of a certificate of public convenience to operate an experimental transportation network service between points in Allegheny County, Pennsylvania.<sup>2</sup>
- 3. Lyft is a for-profit corporation registered with the Pennsylvania Department of State. Lyft's Pennsylvania Corporation Bureau Entity ID Number is 4255720. Lyft's Corporate Officers and Directors are:

<u>Corporate Officers</u>: Logan Green, CEO, CFO and Secretary John Zimmer, President Travis VanderZanden, COO <u>Directors</u>: Logan Green John Zimmer Scott Weiss Geoff Lewis

4. Lyft's physical and mailing address is:

Lyft, Inc. 548 Market Street #68514 San Francisco, CA 94104 Phone: 415-264-5462

5. The names and address and Lyft's attorneys are as follows:

James P. Dougherty (Pa ID No. 59454) Barbara A. Darkes (Pa ID No. 77419) Adeolu A. Bakare (Pa ID No. 208541) McNees Wallace & Nurick LLC 100 Pine St., P.O. Box 1166 Harrisburg, PA 17108-1166

Phone: 717.232.8000 Fax: 717.237.5300

(April 3, 2014), Section I of Attachment A.

<sup>&</sup>lt;sup>2</sup> Lyft also filed an Application at Docket No. A-2014-2415047 ("Statewide Application") requesting the issuance of a certificate of public convenience to offer transportation network service throughout the Commonwealth, which is pending before the Commission.

- 6. On June 5, 2014, the Bureau of Investigation and Enforcement ("I&E") filed a Complaint with the Commission alleging that Lyft is acting as a broker of transportation without Commission authority. Lyft filed an Answer to the Complaint on June 26, 2014.
- 7. On June 16, 2014, I&E filed a Petition for Interim Emergency Relief with the Commission requesting the issuance of an Interim Emergency Order requiring Lyft to immediately cease and desist from brokering transportation network service for compensation between points within the Commonwealth of Pennsylvania. On June 23, 2014, Lyft filed an Answer to the Petition, requesting that the ALJs and the Commission deny I&E's request for emergency relief. On July 1, 2014, ALJs Long and Watson granted I&E's Petition for Interim Emergency Relief through an Order on Interim Emergency Relief ("Interim Order") and certified the Material Question to the Commission for review.
- 8. On July 8, 2014, Lyft filed a Brief to Commission on Material Question requesting that the Commissioners answer the Material Question and reverse the Interim Order. At this time, the Material Question remains before the Commission.

#### II. Legal Standards Applicable to ETA Application

- 9. The Public Utility Code authorizes the Commission to approve applications for temporary certificates of public convenience in emergencies, without hearing, while evaluating action on permanent certificates. 66 Pa.C.S. § 1103(d).
- 10. Furthermore, under the Commission's regulations, the Commission may grant such emergency temporary authority ("ETA") "upon the establishment of an immediate need for the transportation of passengers" within a particular county. 52 Pa. Code § 3.384(b)(1).
- 11. The "immediate need" standard is the appropriate emergency consideration for purposes of an ETA Application. Prior Commission precedent has referenced both the definition

of "emergency" in Section 3.1 of the Commission's Regulations and the "immediate need" standard set forth in Section 3.384(b)(1) of the Regulations when reviewing ETA Applications. 52 Pa. Code §§ 3.1, 3.384(b)(1). See Application of South Shore Limousine, Docket Nos. A-2012-2297115, A-2012-2297105. However, Section 3.1 explicitly states that the definition of "emergency" set forth therein shall apply only "when used in this subchapter...unless the context clearly indicates otherwise." See 52. Pa. Code § 3.1. The relevant Subchapter A of Chapter 3 includes the provisions for Ex Parte Emergency Orders and Interim Emergency Relief. The provisions applicable to ETA Applications are separately set forth in Subchapter E of Chapter 3. See 52 Pa. Code § 3.383-84 (stating that "a grant of TA or ETA will be made when it is established that there is or soon will be an immediate transportation need." Id. Therefore, a finding of "emergency" as defined in Section 3.1 of the Commission's Regulations is not a prerequisite for approving an ETA Application. See Application of Northeast Paramedics Services, Inc., 2001 WL 36255007 (Penn. P.U.C., 2001) (approving an ETA Application without reference to the definition of "emergency" in Section 3.1 of the Commission's Regulations).

12. Demonstrating that there is an "immediate need" may be achieved through a showing that existing carriers fail "to provide service or comparable situations which require new carrier service before an application for permanent authority can be filed and processed." *Id.* § 3.384(b)(2). In addition, where other carriers are capable of rendering transportation network service, an immediate need may also be shown where "there is a substantial benefit to be derived from the initiation of a competitive service." *Id.* 

# III. An Immediate Need Exists for Lyft's Service, Which Requires That The Commission Grant Lyft's ETA Application.

13. There exists an immediate need for Lyft's experimental transportation network service because there are no other providers that currently offer this service in Allegheny

County. Unlike traditional motor carrier services, Lyft passengers use only software embodied in a mobile application to contact drivers, providing convenience and efficiency that is not present through the arduous street hail or telephone dispatch methods used by existing motor carriers. As a result, the Commission's regulations mandate that an immediate need exists for Lyft's service. *See* 52 Pa. Code § 3.384(b)(2).

- 14. The need for Lyft's service is evidenced by correspondence from City of Pittsburgh Mayor William Peduto, who has asked the Commission to encourage and permit innovative transportation network services, such as those offered by Lyft, as a means to meet the service needs unfulfilled by existing taxicab and limousine companies operating in the Pittsburgh area. See <a href="http://www.post-gazette.com/business/2014/02/18/Peduto-asks-for-rule-change-on-ride-sharing-operations/stories/2014/02180175">http://www.post-gazette.com/business/2014/02/18/Peduto-asks-for-rule-change-on-ride-sharing-operations/stories/2014/02180175</a>. In addition, Mayor Peduto issued a statement on July 2, 2014, explaining that Pittsburgh, as well as Pennsylvania, should support businesses such as Lyft because they facilitate business growth and drive technological innovation and progress. See <a href="http://m.pghcitypaper.com/Blogh/archives/2014/07/02/peduto-promises-a-fight-over-rideshare-cease-and-desist-order">http://m.pghcitypaper.com/Blogh/archives/2014/07/02/peduto-promises-a-fight-over-rideshare-cease-and-desist-order</a>.
- 15. In addition, significant public demand for Lyft's service exists, as indicated by the multiple daily requests for this service in Allegheny County. As an illustration of the immediate need, Exhibit A to this Application attaches 29 verified statements submitted by passengers. Of the 29 statements, 24 specifically state that existing taxi and/or public transportation services are unreliable, including the following excerpts:

Lyft has been so helpful and provided me with a ride every single time I needed one. I recently attempted to use Classy Cab to get a ride to the airport. It not like [sic] took over an hour to get to me but it took another 30 minutes because they could not find my place. I have NEVER had this issue with Lyft because they know exactly where you live without any complications.

- ... Public transportation does not accommodate the large number of bags or bulky items. The transit stops are not close to my location or destination. Traveling these distances on foot is not possible with the normal about [sic] of groceries a person needs. The Yellow Cab Company has never been reliable often arriving after several hours of initial request.
- 16. See Exhibit A, Statements of Rachel Edman and Steven Ross Fowler.<sup>3</sup> Additional statements discuss the necessity of Lyft's service as a safe alternative to walking at night in areas underserved by existing transportation services. See Exhibit A, Statements of Julie Cook, Rachel Edman, and Lauren Moran. This public support for Lyft provides further evidence of the substantial benefit offered by Lyft's transportation network service.
- 17. The Commission should consider the attached verified statements as support for this ETA, despite statements to the contrary made by I&E in a similar ETA proceeding. On July 9, 2014, I&E filed a Letter-Response to an ETA Application submitted by Raiser-PA LLC, in association with Uber Technologies, Inc. ("Uber"), on July 2, 2014 ("Uber ETA Application"). In response to the Uber ETA Application, I&E argued that statements of need for the service should be disregarded by the Commission because evidence of unauthorized service offered in bad faith cannot be considered by the Commission. I&E Letter-Response, Docket No. A-2014-2429993 (July 9, 2014).
- 18. In this case, Lyft is not offering unauthorized service in bad faith and has submitted evidence that its current service is not offered in violation of the Public Utility Code. *See* Lyft, Inc. Brief to Commission on Material Question, Docket No. A-2014-2426847 (July 8, 2014). Further, even if the Commission determines that Lyft has violated the Public Utility Code in any manner, I&E's comments should not preclude the Commission from considering the attached verified statements. With regard to periods of unauthorized service, the Commission

<sup>&</sup>lt;sup>3</sup> With the exception of Mr. Fowler each of the 29 verified statements was signed by hand. Due to a vision impairment, Mr. Fowler's Statement was dictated and signed using voice recognition software.

has previously disregarded testimony offered to show an Applicant's fitness for service, but has reviewed testimony offered to show a need for service and/or inadequacy of existing services. See Hercik v. Pennsylvania Public Utility Com'n, 137 Pa.Cmwlth. 377, 382, 586 A.2d 492, 494 (Pa. Cmwlth., 1991) (finding that "although a favorable finding of fitness may not be based upon evidence of the quality of service conducted in willful violation of a court order or the Commission's authority, the mere fact of prior operation in violation of a court order or the Commission's authority does not preclude a carrier from obtaining lawful authority in a subsequent proceeding before the Commission..."). In Hercik, the Commission barred applicant from using testimony of unauthorized service to establish its fitness, but accepted testimony describing the inadequacy of available alternatives and the resulting need for the applicant's service. Id. at 495. This reasoning is especially compelling in the context of an ETA, where the applicant is responding to a public need. Accordingly, while Lyft maintains that it has not violated the Public Utility Code, the outcome of this question should not disturb the Commission's consideration of the attached verified statements as evidence of an immediate need for the service. See id.

- 19. Similarly, entry of additional TNCs in the Pittsburgh area will not alleviate the immediate need for Lyft's platform. In recognition of the need for transportation network service, the Commission conditionally approved a prior application for experimental transportation network service, but the conditions for this approval have not been met and a certificate of public convenience has not been issued. *See Application of Yellow Cab Company of Pittsburgh, Inc. t/a Yellow X,* Order, A-2014-2410269 (May 22, 2014) ("Yellow Cab Order").
- 20. To the extent a certificate of public convenience is issued to Yellow Cab during the pendency of the instant ETA Application, an immediate need still exists for the Lyft platform

due to the substantial benefit derived from the initiation of Lyft as a competitive service and the tremendous consumer demand for TNCs in general and specific customer-focused transportation network service offered by Lyft. *See* 52 Pa. Code § 3.384(b)(2).<sup>4</sup>

- 21. As acknowledged by the Commission in the Yellow Cab Order, experimental network service, such as the service provided by Lyft, offers exciting opportunities for transportation in the Commonwealth that allows for faster and more user-friendly scheduling of transportation network service. The Commission found that the proposed service was responsive to a public demand and stressed the importance of ensuring that the current regulatory structure is not a barrier to desirable changes and technological advancements in the transportation industry. Yellow Cab Order, p. 6.
- Coinciding with adoption of the *Yellow Cab Order*, Commissioner Witmer and Commissioner Brown issued a Joint Statement expressing their support for such experimental service: "Using App-based technology to connect passengers with drivers has the potential to revolutionize the transportation market and provide customers with more options for travel throughout Pennsylvania." *See Application of Yellow Cab Company of Pittsburgh, Inc. t/a Yellow X*, Joint Statement of Commissioner Pamela A. Witmer and Commissioner Gladys M. Brown, A-2014-2410269 (May 22, 2014). Because Lyft offers similar technology to connect passengers with drivers, approval of this Application for ETA will help meet demand for transportation network service in Allegheny County and provide the important benefits to Pennsylvania identified by the Commission in *Yellow Cab*.

<sup>&</sup>lt;sup>4</sup> In the event that the Uber ETA Application is approved in advance of this Application, Lyft submits that the immediate need for transportation service in Allegheny County is sufficiently pervasive to necessitate further ETA approval for Lyft. This outcome is consistent with the Commission's authority to approve competitive transportation services when beneficial to consumers. See 52 Pa. Code § 3.384(b)(2).

- Application requesting a permanent certificate of public convenience, recent developments require that the Commission grant the instant ETA application at this time. First, the Allegheny County Application was protested by various parties, including the Insurance Federation of Pennsylvania, the Pennsylvania Association for Justice, JB Taxi LLC, Concord Limousine, and Black Tie Limousine, and Executive Transportation t/d/b/a Luxury Sedan Service ("Executive Transportation"). Following Preliminary Objections filed by Lyft, ALJs Long and Watson dismissed all of the above protests, except for JB Taxi LLC (which currently holds no operating authority in Allegheny County) and Executive Transportation. The specific issues raised by these two motor carrier protestants can be addressed in the proceedings for a permanent certificate of public convenience, but should not override the immediate need for Lyft's service and the benefits offered to Pittsburgh citizens seeking efficient, reliable, and safe transportation.
- 24. Further, the July 1, 2014, Interim Order, in which ALJs Long and Watson directed Lyft to cease and desist from providing experimental transportation network service, failed to properly weigh the substantial benefits provided by Lyft that have been previously identified by the Commission and general public alike. An app-based platform allows for expedited and convenient transportation service that benefits both Lyft passengers who receive superior transportation service and Lyft drivers who are provided with an opportunity to grow businesses, spurring economic growth in the Commonwealth. While Lyft filed a brief requesting that the Commission reverse the Interim Order, deny I&E's Petition for Interim Emergency Relief, and waive the regulatory provision authorizing an immediate cease-and-desist, the significant benefits offered by Lyft's service merit granting the instant ETA Application for a

temporary certificate of public convenience until Lyft's Application for a permanent certificate of public convenience may be fully considered by the Commission.

#### IV. <u>Description of Lyft's Service</u>

- 25. To ensure that the Commission has sufficient information related to Lyft's fitness for providing temporary service, this Application provides additional detail related to Lyft's service, liability insurance, driver integrity, and vehicle safety.<sup>5</sup>
- 26. Lyft's product is a mobile application that provides a platform allowing passengers to connect to independent drivers. Drivers use their personal, insured, non-commercially licensed vehicles for the purpose of providing transportation to these passengers. Lyft does not own vehicles or employ drivers for the purposes of providing such transportation.
- 27. Lyft offers service at no charge, but suggests an amount that passengers can donate to drivers. The passenger is under no obligation to provide this donation, and the driver will make no attempts to persuade the passenger to remit this donation. Upon completion of a trip, an electronic receipt will be transmitted to the passenger's email address documenting the details of the trip. Following approval of the ETA Application, Lyft proposes to charge a set fare.

#### V. Description of Lyft Insurance

28. Lyft requires drivers to provide proof of valid and current liability insurance on all vehicles used in offering transportation network service in at least the amounts specified in 75 Pa.C.S. §§ 1702 and 1711.

<sup>&</sup>lt;sup>5</sup> Lyft is prepared to provide any and all other information the Commission deems necessary for purposes of establishing immediate need for Lyft's service and will supplement this application as appropriate.

- 29. Lyft will submit to the Commission proof of adequate insurance evidencing policies and coverage that comply with and exceed the minimum standards required by the Commission at 52 Pa. Code §§ 32.11 and 41.21, as follows:<sup>6</sup>
- a. \$1 million of liability coverage per incident. Lyft maintains liability insurance in the amount of \$1 million to cover a driver's liability for bodily injury, death or property damage, which far exceeds the Commission's minimum requirement of \$35,000. The terms and conditions for this policy provide that this coverage will apply from the time a driver accepts a trip request through the App until the completion of a trip. This coverage additionally includes first party medical benefits in the amount of \$25,000 and first party wage loss benefits in the amount of \$10,000 for passengers and pedestrians. This policy protects drivers and passengers using Lyft's platform and third parties when injured through an accident caused by the driver using Lyft. This policy is designed to apply even if the driver's personal auto insurance coverage denies coverage entirely or covers only a portion of the driver's liability. This policy also includes uninsured/underinsured motorist coverage of \$1 million per incident, which will apply if another motorist causes an accident with a driver's vehicle and does not carry adequate insurance. In the event of injury caused by an uninsured/underinsured motorist, this policy protects drivers and passengers using Lyft's platform and third parties.
- b. Contingent liability coverage between trips. If the driver's personal policy declines coverage during the time that a driver using Lyft's platform is available on the Lyft platform, but between trips with passengers (prior to being matched), Lyft has procured a policy that covers liability up to \$50,000 per person for bodily injury, \$100,000 per accident, and \$25,000 for property damage.

<sup>6</sup> Although 52 Pa. Code § 3.383(c)(3)(G) requires the submission of evidence of insurance with an ETA Application, Lyft respectfully requests a conditional waiver of this provision subject to submission of the requisite evidence of insurance upon approval of the requested ETA.

c. Contingent comprehensive/collision coverage. Finally, for drivers carrying comprehensive and/or collision coverage on their personal policies, Lyft offers contingent comprehensive and/or collision coverage up to \$50,000 per occurrence with a \$2,500 deductible.

#### VI. Description of Lyft Driver Integrity

- 30. Lyft requires drivers to meet standards that are consistent with, and frequently more stringent than, the Commission's requirements set forth in 52 Pa. Code §§ 29.502-29.507, as described more fully below:
- a. Criminal Background Checks. Lyft conducts a national criminal background check with respect to each driver before the driver may access the App-based platform to receive requests for transportation from passengers. A match on the national sex offender registry or a conviction that appears on a criminal background check within the past seven years for crimes of violence, sexual abuse, felony, robbery, or felony fraud, automatically and permanently disqualifies an individual from acting as a driver.
- b. Driving History Record. Lyft obtains a driving history record for each driver applicant and rejects applicants if, within the past three years, the record shows a major violation (including, but not limited to, attempting to evade the police, reckless driving, or driving on a suspended or revoked license), or more than three moving violations.
- c. Drugs or Alcohol. Lyft maintains a zero-tolerance policy on the use of drugs or alcohol while the driver is available on the Lyft platform. Notice of this zero-tolerance policy is on Lyft's website along with procedures to report a complaint when passengers reasonably suspect a driver was under the influence of drugs or alcohol during the course of the ride. Lyft will immediately suspend a driver upon receipt of a passenger complaint alleging a

violation of the zero-tolerance policy, and such suspension will last the duration of Lyft's investigation into the incident.

#### VII. <u>Description of Lyft Vehicle Safety</u>

- 31. Lyft requires drivers' vehicles to meet extensive safety requirements, as more fully described below:
- a. Inspections. Lyft will require vehicles used in conjunction with the platform to pass annual safety inspections in compliance with Pennsylvania Department of Transportation Regulations and consistent with the Commission's Vehicle Safety Regulations. See 75 Pa.C.S. Chapter 47; 67 Pa. Code §§ 175.61-80; 52 Pa. Code §§ 29.402 and 29.405. Lyft further acknowledges that vehicles used in conjunction with Lyft's platform are subject to inspection by Commission enforcement officers. Additionally, Lyft requires drivers' vehicles to undergo and pass a 19-point safety inspection before the vehicle provides transportation network service that includes a check for cleanliness and addresses the following vehicle components: foot brakes, emergency brakes, steering mechanism, windshield, rear window and other glass, windshield wipers, headlights, tail lights, turn indicator lights, stop lights, front seat adjustment mechanism, doors (open, close lock), horn, speedometer, bumpers, muffler and exhaust system, conditions of tires, including tread depth, interior and exterior rear view mirrors, and safety belt for driver and passengers.
- b. Vehicle Type. Lyft requires drivers to use motor vehicles that have four doors and have a seating capacity of eight passengers or fewer. Eligible vehicles include street-legal coupes, sedans, or light-duty vehicles including vans, minivans, sport utility vehicles, hatchbacks, convertibles, and pickup trucks.
  - **c. Other Vehicle Requirements.** Drivers' vehicles do not include meters.

#### VIII. Other Requirements

- 32. Lyft maintains a website that provides a customer service telephone number or email address.
- 33. Lyft maintains records to demonstrate compliance with all of the requirements, standards, and obligations described in this ETA Application, and satisfies the recordkeeping requirements of 52 Pa. Code § 29.313.
- 34. Lyft is establishing a driver-training program designed to ensure that each driver safely operates his or her vehicle prior to the driver being able to use Lyft's platform to offer service.
- 35. Lyft understands that it is subject to an annual assessment based upon reported Pennsylvania intrastate revenues.
- 36. Lyft further understands that it has sole responsibility to address Commission-related passenger complaints and that a failure to adhere to the commitments made in this ETA Application may result in the Commission imposing sanctions, including civil penalties, suspension and revocation of the temporary certificate of public convenience.
- 37. Lyft is not currently engaged in unauthorized intrastate transportation for compensation between points in Pennsylvania. Lyft is currently not acting as a broker of transportation service for compensation in the Commonwealth.<sup>7</sup>
- 38. While Lyft has sought to comply the regulations at 52 Pa. Code §§ 3.383-3.384 regarding ETA applications, to the extent any part of this Application is deemed inconsistent

<sup>&</sup>lt;sup>7</sup> The Commission is currently reviewing a material question regarding this fact. While an Interim Order was issued directing Lyft to cease and desist operations, the Commission has not yet acted on the matter. As previously noted, Lyft has filed a brief on the Material Question and requested that the Commission issue a Final Order reversing the Interim Order and exercising its discretion to grant a waiver staying any effectiveness of the Interim Order. As further set forth in the brief, Lyft has provided evidence that the service currently offered does not violate the Public Utility Code.

with the Regulations, Lyft respectfully requests that the Commission exercise its discretion to grant waivers of these provisions due to their inapplicability to this ETA Application for experimental transportation network service. See 52 Pa. Code § 5.43; see also Township of Collier v. Pennsylvania American Water Company, 2004 WL 1647271 (Pa. P.U.C. 2004), p. 4 ("Case law supports the power of an administrative agency to waive its own rules and regulations or excuse noncompliance.").

39. Consistent with 52 Pa. Code § 1.36, this ETA Application includes a Verification executed by Katie Kincaid, Manager of Government Relations for Lyft.

### IX. Conclusion

The Commission should grant Lyft's ETA Application because (1) there are no other providers currently offering experimental transportation network service in Allegheny County; (2) Lyft's service offers substantial benefits as acknowledged by the Commission and general public; and (3) the need for innovative, reliable, and safe transportation network service in Pittsburgh is immediate and extensive, justifying approval of Lyft's ETA regardless of the status of the *Yellow Cab* decision or the Uber ETA Application. Moreover, Lyft has provided extensive information related to its driver integrity, vehicle safety, and insurance, which ensures that passengers may use Lyft's platform to conveniently and safely secure transportation. Accordingly, Lyft requests that the Commission approve its Application for Emergency Temporary Authority to operate an experimental transportation network service between points in Allegheny County, Pennsylvania and grant any other relief deemed necessary.

Respectfully submitted,

McNEES WALLACE & NURICK LLC

James P. Dougherty (Pa. I.D. 59454)

Adeolu A. Bakare (Pa. I.D. 208541)

Barbara A. Darkes (I.D. No. 77419)

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<u>abakare@mwn.com</u> bdarkes@mwn.com

Dated: July 16, 2014

### **Verification**

I hereby verify that the statements made in this application are true and correct to the best of my 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.

Signature

- 1. Dylan Ahrens
- 2. Sarah Birmingham
- 3. Maria Brown
- 4. Heather Cochrane
- 5. Sean S. Cochrane
- 6. Julie Cook
- 7. Thomas John Cooley
- 8. Ashley E. DeBerry
- 9. Vira Doughton
- 10. Rachel Edman
- 11. Joshua Flavin
- 12. Steven Fowler
- 13. Ellie Gordon
- 14. Bradley Hoffman
- 15. Melissa Marchionne
- 16. Ryan McGinnis
- 17. Lauren Moran
- 18. Christopher Norris
- 19. Andrea Pinigis
- 20. Elyson Sanchez
- 21. Martin Schiff
- 22. Garrett Senter
- 23. Thomas J. Slosky III
- 24. Kimberly Sonnie
- 25. Robin L. Stanton
- 26. Elizabeth Surmacz
- 27. Jonathan Surmacz
- 28. Diane Torbich
- 29. Emily Winn

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.					
Derlan Ahrens					
1012 North Negley Pittsburgh PA 15205					
Street Address City or Municipality State Zip Code Name of Applicant					
• Describe the type of transportation service needed.  Lyft  • What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. At Night in the East End of Pittsburg					
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> <li>2-3 Times a week</li> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>Taxis are not seliable</li> </ul>					
• Have you supported similar applications in the past? If so, please supply name and docket number.					
VERIFICATION OF STATEMENT					
The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.  (Signature)  (Date)					
(Name, printed or typed)					

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS

A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.					
SARAH BIRMINGHAM					
. Name of Supporter					
3307 WARD ST APT #2 PHTSBURGH PA 15213 Street Address City or Municipality State Zip Code					
Street Address City or Municipality State Zip Code					
LyFT Name of Applicant					
Describe the type of transportation service needed.					
HOME FROM WORK LATE AT NIGHT					
HOME FROM GROLERY STORES, INSTEAD OF CARRYING BAGS 1+MILES  • What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. Home   MARKET SOWARE, PITTSBURGH  GROCERY STORES (EAST END) -> HOME					
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> </ul>					
4-5x / WEEK					
<ul> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>TAXI CABS ARE UN RELIABLE</li> </ul>					
• Have you supported similar applications in the past? If so, please supply name and docket number.					
N/A					
VERIFICATION OF STATEMENT					
The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.					
Signature) 10 July 2014 (Date)					
(Name, printed or typed)					

Revised 9/11

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED. Name of Supporter Describe the type of transportation service needed. ridesharing What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. Greater Pittsburgh area t Northern Suburbs, Cranberry Tup and Seven Fields How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Monthly
Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? No, because I've found it (taxis) unreliable and to be a more expensive alternative

Have you supported similar applications in the past? If so, please supply name and docket number. VERIFICATION OF STATEMENT The undersigned deposes and says that he/she is the person who signed the Statement for the abovecaptioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.

(Name, printed or typed

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Heather Cachrone Name of Supporter
Name of Supporter
1603 M. Royal Blud Glenshaw PA 51100 Street Address City or Municipality State Zip Code
Name of Applicant
Describe the type of transportation service needed.  Cide Sharing
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>
downtown Pitsburgh - baseball games, family events
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> <li>Weekly</li> </ul>
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  OUS SERVICE - not Gluxy Qual labor
<ul> <li>Have you supported similar applications in the past? If so, please supply name and docket number.</li> </ul>
VERIFICATION OF STATEMENT
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Heren Carhener 7/10/2014
(Signature)  Heather Cochrone  (Name, printed or typed)
Comments to the second

Revised 9/11 1

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Sean S Cachrane
Name of Supporter    1603   Name of Supporter
<ul> <li>Describe the type of transportation service needed.</li> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> <li>Any neighborhood for of liths brush Rush Hour (amount of locations).</li> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>Have your supported similar applications in the past? If so, please supply name and docket number.</li> </ul>
VERIFICATION OF STATEMENT
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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  (Signature)  (Date)
(Name, printed or typed)
(riames, primera or expects)

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Revised 9/11

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.				
Julie Cook				
Name of Supporter  2513 Spring Street Pah PA 15210  Street Address Street Sty or Municipality State Zip Code				
Street Address City or Municipality State Zip Code  Name of Applicant				
Describe the type of transportation service needed.				
car service to avoid driving while intoxicated				
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>				
Pittsburgharea, airport, home				
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> </ul>				
Weekly				
<ul> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>I've tried Caling cabs before for a ride and either they take to rever to pick up or they cancel.</li> <li>Have you supported similar applications in the past? If so, please supply name and docket number.</li> </ul>				
Alu				
VERIFICATION OF STATEMENT				
The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief.				
The undersigned understands that false statements herein are made subject to the penalties of 18 Pa.  C. S. Section 4004 relating to unsworn falsification to authorities.				
(Signature) JULIE COOK				
(Name, printed or typed)				

Revised 9/11

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Thomas John Cooley
Name of Supporter  25/3 Spring Street  Physical PA 15216  Street Address City or Municipality State Zip Code
Name of Applicant
· Describe the type of transportation service needed AT Bus, Thave anxiety en buses,
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. All over pitts bugh, not just the airport. WA (referens a appointments
• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? Ves, I have to lie to cab drivers to get to my destruction
<ul> <li>Have you supported similar applications in the past? If so, please supply name and docket number.</li> </ul>
VERIFICATION OF STATEMENT
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Sh 16 J. 1/2014 (Signature) (Date)
Thomas John Cooley
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.					
Name of Supporter  Name of Supporter  Street Address  Ave Bownshile PA B317  City or Municipality  State Zip Code					
• Describe the type of transportation service needed.  Sale reliable Public transportation					
What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.					
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> </ul>					
Have you supported similar applications in the past? If so, please supply name and docket number.					
VERIFICATION OF STATEMENT					
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The undersigned understands that false statements herein are made subject to the penalties of 18 Pa.  O.S. Section 4904 relating to unsworn falsification to authorities.  (Signature) (Date)					
(Name, printed or typed)					

A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.				
Vira Doughton Name of Supporter				
Name of Supporter				
1070 J Chatham Park Dr. Pgh PA 15216				
Street Address City or Municipality State Zip Code				
Name of Applicant				
Describe the type of transportation service needed.				
ride Shaving				
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.  Scott twish DA 15216 - typically  Ao a downtown location or special eventual in  How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  Weekly > munthly  weekly > munthly				
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  Yes. They do not like to come to neighborhoods!  Suburbs. They are unreliable. I have almost misse.  Have you supported similar applications in the past? If so, please supply name and docket number. Special events du to thus.				
VERIFICATION OF STATEMENT				
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Una Doughton July 10, 2014				
(Signature) (Date) (Date)				
(Name printed or typed)				

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

	Name of Supporter		
	McKees Rocks, PA	15136	
Street Address	City or Municipality	State	Zip Code
	Name of Applicant		

• Describe the type of transportation service needed.

Lyft taxi ride is beneficial to Pittsburgh because it has provided the residents with a safe and reliable way of transportation. Lyft has not only given intoxicated people a safe way of transportation, but has helped Pittsburgh financially. I have not gone out in Pittsburgh since Lyft has been shut down. I never feel like I have a safe way home. Every time a Lyft driver has picked me up, they have been helpful and friendly. I have even reconnected with an old friend from my hometown who became a Lyft driver. I cannot stress how great this service has been to me. I can travel through Pittsburgh without stressing about directions, feeling unsafe, or having money on me.

 What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.

The origin would be somewhere in the suburbs of Pittsburgh (i.e. North Hills, McKees Rocks, Robinson Twp) and the destination is downtown Pittsburgh, Oakland, South Side, Station Square, etc.

- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? The service is needed every weekend
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? I have attempted to use Yellow Cab and Classy Cab in the Pittsburgh area. They are 100% unreliable and can't even guarantee that they are going to pick you up. You talk to the dispatcher, not the driver. I would never recommend the Pittsburgh taxi services to anyone.
- Have you supported similar applications in the past? If so, please supply name and docket number. I downloaded the Uber app but it was not necessary. Lyft has been so helpful and provided me with a ride every single time I needed one. I recently attempted to use Classy Cab to get a ride to the airport. It not like took over an hour to get to me but it took another 30 minutes because they could not find my place. I have NEVER had this issue with Lyft because they know exactly where you live without any complications.

# **VERIFICATION OF STATEMENT**

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Revised 9/11

Oper Edun	7/10/14
(Signature)	(Date)
Rachel Edman	
(Name, printed or typed)	<del></del>

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THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS

A NEED FOR THE APPLICANT'S SERV	/ICES. STATE	EMENT SHOULD BE TYPED (	OR PRINTE	D.	
DOSMUA FLA	VIV				
	Name of S	Supporter			
229 N GRAH	AM ST	P, 775BUKGH City or Municipality	PA	15206	
Street Address		City or Municipality	State	Zip Code	
	Name of A	Applicant			
Describe the type of transportation	n service needed	1			
RIDE SHAKE SERVICE	(٤) وي	G CYFT, UBERX)			
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>					
PITTSBUKGH, PA					
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> <li>WETKLY (PEKSONALLY)</li> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>YES, YELLOWCAB &amp; CLASSY CAB &amp; DETS CAB</li> <li>WETS CAB</li> <li>WETS CAB</li> <li>Have you supported similar applications in the past? If so, please supply name and docket number.</li> </ul>					
VERIFIC	CATION	OF STATEMEN	NT		
The undersigned deposes captioned applicant/application and that h forth therein are true and correct to the best	e/she is authori				
C. S. Section 4904 relating to unsworn fals		statements herein are made sub norities.	ject to the p	enalties of 18 Pa.	
(Signature)			7.00	2014	
(Signature)			(Date)	2014	

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

	Name of Supporter		<u> </u>
1010 Rebecca Ave, Apt 5	Pittsburgh	PA	15221
Street Address	City or Municipality	State	Zip Code
	Lyft		
	Name of Applicant		

• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.

Greater Pittsburgh Region, Borough of Wilkinsburg and Edgewood township, Allegheny County, PA

• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Weekly, sometimes up to three times a week, larger trips bi-monthly.

do not have another means of transporting myself and my goods safely.

- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? Yes, Public transportation does not accommodate the large number of bags or bulky items. The transit stops are not close to my location or destination. Traveling these distances or foot is not possible with the normal about of groceries a person needs. The Yellow Cab Company has never been reliable often arriving after several hours of initial request. The cab drivers have a right to refuse rides and do so often. Delivery services are too expensive. I do not qualify for ACCESS Para-transit services.
  - Have you supported similar applications in the past? If so, please supply name and docket number. N/A

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Star Feel	7/9/14
(Signature)	(Date)
Steven Fowler	
(Name, printed or typed)	

Revised 9/11 1

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Ellie Gordon
Name of Supporter
6525 Northumberland st. Pittsburgh PA 15217 Street Address City or Municipality State Zip Code
Ly († Name of Applicant
••
Describe the type of transportation service needed.
Lytt
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>
Pittsburgh and surrounding area
How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?
24/7
Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?
Tes, taxi + bvs. taxis dorital show up and aren't reliable buses aren't available in Have you supported similar applications in the past? If so, please supply name and docket number. are as a ave timited to
Have you supported similar applications in the past? If so, please supply name and docket number. and a so a s
yes, Lytt
VERIFICATION OF STATEMENT
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C. S. Section 4904 relating to unsworn falsification to authorities.
7/10/14
(Signature) Elix Gordan (Date)
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

Br	adle y	Hoffman			
			of Supporter		
1520	Rockland	Ave	Pittsburgh	RA	15216
	Street Addres	is .	City or Municipality	State	Zip Code
		T ALT			
		Name	of Applicant		

- Describe the type of transportation service needed. Ride 5haring
- What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.

  Pi++5bank

  Great
- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?

  Yes, they are unreliable furtheredy
- Have you supported similar applications in the past? If so, please supply name and docket number.

No

# **VERIFICATION OF STATEMENT**

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Signature)
(Signature)
(Signature)
(Date)

(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED. Meliese Marchionne Name of Applicant Describe the type of transportation service needed. Ride sharing community What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. PHOWIGH, PA (30041Side, Shadyside) How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? 24/71 Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? Us. Cabs don't pick me up! Have you supported similar applications in the past? If so, please supply name and docket number. 1/6 VERIFICATION OF STATEMENT The undersigned deposes and says that he/she is the person who signed the Statement for the abovecaptioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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. (Name, printed or typed)

Revised 9/11

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Name of Supporter
1321 FreePost lead Chemick Par 15024
Name of Supporter  1321 Flee Post lead Chesnick Pa 15024  Street Address City or Municipality State Zip Code  Name of Applicant
Name of Applicant
Describe the type of transportation service needed.
ride shaling
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. Chelinick/haderacks, to prontens pathonage, cb.
tup, homestead.
• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?
Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  Yellow (Gb is a dis grace to transit. If they even  Have you supported similar applications in the past? If so, please supply name and docket number.  Yellow (Gb is a dis grace to transit of the past), for and by to extent you have you supported similar applications in the past? If so, please supply name and docket number.  Yellow (Gb is a dis grace to transit of the past), for a display to extent you can be a displayed to the past of the past
VERIFICATION OF STATEMENT
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Ryn Mi 7/10/14
(Signaturé) Lyan Un (Cinn) (Date)
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.		
Lauren Moran		
Name of Supporter		
100 Anderson St #637 Pittsburgh PA 15212		
Street Address City of Municipality J State Zip Code		
Name of Applicant		
Describe the type of transportation service needed.		
Safe ride home after than dark or from		
entertainment vienues.		
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>		
Within the any of pittsburgh, speakcarry		
Within the any of pittsburgh, specifically the East End (Bloomfield, Shadyside, Lawrenceville, East How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?		
1-2 times per week		
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  Taxi— unreliable feel unsafe at times, they fend to only be downtown or in souther de  Have your supported similar applications in the past? If so, please supply name and docket number.		
NA		
VERIFICATION OF STATEMENT		
The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.		
7/10/14		
(Signature) Lauren Moran (Date)		
(Name, printed or typed)		

Revised 9/11

1

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED. Name of Supporter Name of Applicant Describe the type of transportation service needed. What will be the usual origin and destination? Please give specific locations, such as names of cities boroughs, or townships. How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? Have you supported similar applications in the past? If so, please supply name and docket number. VERIFICATION OF STATEMENT The undersigned deposes and says that he/she is the person who signed the Statement for the abovecaptioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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. 7/10/14 (Date) (Signature) (Name, printed or typed)

Revised 9/11

1

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERWICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Andrea Pinion
Name of Supporter  Name of Supporter  Output  PHS by PA 1528  Street Address  City or Municipality  State  Zip Code
LYFT
• Describe the type of transportation service needed. Public + caspatation Sharm
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. Wak in down town a home in Swisshelm fall
• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  Takes we not depend able.
• Have you supported similar applications in the past? If so, please supply name and docket number.
VERIFICATION OF STATEMENT
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Under Kingin 7/10/14
(Signature) rea Piniqis
(Name, printed or typed)

	DLLOWING INFORMATION IS REQUIF D FOR THE APPLICANT'S SERVICES.				RE IS
	C 4				
<del></del>	elyser Sauchen,	Name of Supporter			
	104 Pentield Pl. Street Address		ugh !	A 15208	<u>/</u>
,	Sirect Address	City of Municipa	inty	State Zip Code	
	7	Name of Applicant			
•	Describe the type of transportation service	e needed. Lytt			
•	What will be the usual origin and destination boroughs, or townships.  Nouvete Marie Ristrict, Carrier				
•	How frequently is this service needed? Ex	xample: Is it on a daily, we	eekly, or monthly	basis?	
•	Have you tried to use other providers of se Tried Uhun Alb bu				
	Have you supported similar applications in $\mathcal{N}_{\mathcal{O}}$	n the past? If so, please sup	pply name and d	ocket number.	
	VERIFICATI	ION OF STAT	remen 1		
	The undersigned deposes and say applicant/application and that he/she is brein are true and correct to the best of his/h	authorized to and does m	ake this verifica		
C. S. Se	The undersigned understands that ction 4904 relating to unsworn falsification		are made subject	to the penalties of	18 Pa.
	Ma		09/	10/14	<del>_</del>
(Signatu	Elysa Sanchez		(Da	e)	
(Ivame,	printe∉or typed)				

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED. Name of Applicant Describe the type of transportation service needed. RIDE SHARE What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. bestruct How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? Have you supported similar applications in the past? If so, please supply name and docket number. VERIFICATION OF STATEMENT The undersigned deposes and says that he/she is the person who signed the Statement for the abovecaptioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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. 7-10-14 (Signatur, (Name, printed or typed

1

THE FOLLOWING INFORMATION IS REQUIRED BY A NEED FOR THE APPLICANT'S SERVICES. STATE			
CHARLETT SENIER			
Name of S	Supporter		
1570 ROCKLAND AVE	Pritissuciani City or Municipality	PA	1576 Zin Code
	ony or management	2.00	
Name of	Applicant		
•			
Describe the type of transportation service needed	1.		
RIDES TOWORK			
<ul> <li>What will be the usual origin and destination? Pl boroughs, or townships.</li> </ul>			
my Hime TO Loves AT	THE WATERCRIFT	AND	BACK HOME
<ul> <li>How frequently is this service needed? Example:</li> </ul>			
TWKE A DAY	•	•	
<ul> <li>Have you tried to use other providers of service in TAMIS NEVER SHOW ONT IS ON A SET SCHEDULE,</li> <li>Have you supported similar applications in the particle.</li> </ul>	IME AND PUBLIC AND DOESNTRUM	TRANS THROU	POSTATION 164 THE WIGHT
VERIFICATION	OF STATEME	NT	
The undersigned deposes and says that captioned applicant/application and that he/she is authoritorth therein are true and correct to the best of his/her known	ized to and does make this ver	ification and	
The undersigned understands that false C. S. Section 4904 relating to unsworn falsification to auth		oject to the	penalties of 18 Pa.
The		7/10/	14
(Signature) SENTER		(Date)	<del></del>
(Name, printed or typed)			

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED. Describe the type of transportation service needed. What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. PIHSbursh PA How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? EVOIX day Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? XCS, TAH, Slow service Have you supported similar applications in the past? If so, please supply name and docket number. No VERIFICATION OF STATEMENT The undersigned deposes and says that he/she is the person who signed the Statement for the abovecaptioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.

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THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

	Kimberly:	Sonnie		
<b>-</b>	lo	Name of Supporter	Δ	,
321	Freepart 331	Chesnick	Pa	15024
	Street Address	City or Municipality	State	Zip Code
		Name of Applicant		
•	Describe the type of transportation service	ce needed.		
	ride shaving			
•	What will be the usual origin and destina boroughs, or townships.			
	Chequit to fe	Ex chapel, Pittsburgh.	15 noit	h side, h
•	How frequently is this service needed? E	Example: Is it on a daily, weekly, or mo	onthly basis?	
	Daily			
•	Have you tried to use other providers of s	service in this area, and if so, why do yo	ou prefer not to	o use them?
	Yes, yellow cab	and its subsidia	rys are	not this
	Have you supported similar applications		·	
•			and docket nui	mber.
	P	) <b>0</b>		
	VERIFICAT	ION OF STATEME	NT	
	The undersigned deposes and seed applicant/application and that he/she is derein are true and correct to the best of his/		rification and	
C. S. Se	The undersigned understands the ction 4904 relating to unsworn falsification	nat false statements herein are made su on to authorities.	bject to the po	enalties of 18 Pa.
Kn	mlesly & muie		7-10	-14
Signati	mb et/() Shows		(Date)	
Name.	printed or typed)			

A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
TOTO CONTROL COURT POR IN STRAITED
Name of Supporter
647 CHELLY WAY BLINGEVILLE PA 15017
Street Address City or Municipality State Zip Code
Name of Applicant
Describe the type of transportation service needed.
Raiable
<ul> <li>What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.</li> </ul>
Pgh & SURLAINDING ARDAS
<ul> <li>How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?</li> </ul>
24/7
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?
THE TAXI DID NOT ALLIVE
Have you supported similar applications in the past? If so, please supply name and docket number.
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Edin 2 Stony 10 7/10/2014
(Signature) (Date)
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Elizabeth Mathews Surmacz
Name of Supporter    Compared to the Compared to the Compared to the City of Municipality   State   Zip Code
Describe the type of transportation service needed.
and - L.A.
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.
How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  AIL NOWS
<ul> <li>Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?</li> <li>Have you supported similar applications in the past? If so, please supply name and docker number.</li> </ul>
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(Signature) July 10,2014  (Date) July 10,2014
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Jonathan Surmact Name of Supporter
Name of Supporter
161 Victory Lune Lostsdale PA 15056
Street Address / City or Municipality State Zip Code
Name of Applicant
Name of Applicant
• Describe the type of transportation service needed.  Also Sharing!
• What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.  Although Africa
• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  Daily - All hours!
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  Yellow the holes finewer and is unreliable  - Use fort Anthonity to get work in down tow  • Have you supported similar applications in the past? If so, please supply name and docket number.
$\mathcal{N}_{\mathcal{O}}$
VERIFICATION OF STATEMENT
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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.
7/10/14
(Signature) on Dan Surna (Z
(Name, printed or typed)

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

Diane Torbich		
	Name of Supporter	N
1302 Bellaire 71.	brookline	PA 15226
Street Address	City or Municipality	State Zip Code
	Name of Applicant	
Describe the time of transportation	/	
• Describe the type of transportation	,	
doctor appt, gro	aries stare	
<ul> <li>What will be the usual origin and d boroughs, or townships.</li> </ul>	destination? Please give specific location	s, such as names of cities,
Rittsburgh		
/	dado Evenandas Indis en e della succisia	or monthly basis?
• now frequently is this service need	ded? Example: Is it on a daily, weekly,	or monthly basis?
- · · · · · · · · · · · · · · · · · · ·	ers of service in this area, and if so, why	do you prefer not to use them?
rellow cab, class	s V cab	
,	•	
. 1	ations in the past? If so, please supply na	ame and docket number.
Mo		
VERIFIC	ATION OF STATEN	1ENT
The undersigned deposes captioned applicant/application and that he forth therein are true and correct to the best		is verification and that the facts set
The undersigned understa C. S. Section 4904 relating to unsworn falsis	ands that false statements herein are madification to authorities.	de subject to the penalties of 18 Pa.
Quane Torbich		7/10/14
(Signature)		(Date)
(Name, printed or typed)		

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THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.
Emily Winn Name of Supporter
Name of Supporter
270 Service Way Pittsburgh PA 15201 Street Address City or Municipality State Zip Code
Ly t
Name of Applicant
Describe the type of transportation service needed.
Safe, Reliable themportation around the city
What will be the usual origin and destination? Please give specific locations, such as names of cities,  here years are to work inc.
east end (shedyside, east liberty, fixeredship,  How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Laurence Vill.
• How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? Cauxence!///
daily-wiske frequently during nights and welkeneds-but daily
• Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?
yes-they have not answered cales, not shown up, have been pude
<ul> <li>SNOWN WP, Newe been pude</li> <li>Have you supported similar applications in the past? If so, please supply name and docket number.</li> </ul>
NO
VERIFICATION OF STATEMENT
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(Signature) 7/10/14 (Date)
EMILY NINUX
(Name, printed or/typed)