PENNSYLVANIA PUBLIC UTILITY COMMISSION

INSTRUCTIONS TO BE FOLLOWED IN PREPARING THE APPLICATION

- 1. A separate application must be filed for each type of service, such as airport transfer, TNC, scheduled route, paratransit, call or demand, limousine, group and party 11-15 passengers, broker, or household goods.
- 2. It is not required that applicant be represented by an attorney in order to file the application.
- 3. If the space provided on the form is not sufficient, prepare on a separate sheet, attach it to the application and give it the same number as the question or statement to which it refers.
- The original application signed at the place designated, duly verified by affidavit, must be filed at the Pennsylvania Public Utility Commission, 400 North Street, Harrisburg, PA 17120. Should you have an e-file account with the Commission, please e-file your request instead.

APPLICATION FOR APPROVAL OF ABANDONMENT OR DISCONTINUANCE OF SERVICE, IN WHOLE OR IN PART

BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

(See Instructions Before Preparing Application)

Utility # A_____ Docket # _____

For approval of the abandonment or discontinuance of common carrier service.

TO PENNSYLVANIA PUBLIC UTILITY COMMISSION:

1.

(Name of applicant, and trade name, as it appears on the Certificate of Public Convenience.)

(Business Street Address)

(City)

(State) (Zip)

(County)

2. If applicable, applicant's attorney (for this application) is:

(Name)

(Address)

(Telephone/ Email)

- 3. Any notice, process or order of the PUC should be served to: (Please mark one)
 - Mail to the address listed above.
 - Email to: ______
 - Mail to my new address as follows. (Note, the Commission will not serve documents to consultants or insurance agents.)

- 5. Approval of the application is necessary or proper for the following reasons:

Wherefore, Applicant requests the Commission to cancel, or amend the certificate of public convenience, as now held, in conformance with the application.

Applicant sign here:	

(If a partnership, each partner must sign; if a corporation, at least one officer must sign.)

VERIFICATION

hereby states that the statements made in the

(Name of Person)

foregoing are true and correct to the best of his/her knowledge, information and belief. The undersigned understands that the estimates therein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

Signature of Person

Date: _____