

Pennsylvania Public Utility Commission Bureau of Transportation & Safety PO Box 3265 Harrisburg, PA 17105-3265 (717) 787-3834

Application for Motor Common Carrier of Property

Please complete all parts of the following application. Incomplete applications will be returned. All questions may be directed to the Bureau of Transportation & Safety at (717) 787-3834.

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

James E Ament

2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

We-Haul moving

3. Physical Address (do not use PO Box)

1866 Auburn Street Street Address Bethlehem PA 18015 City, State and Zip Code Northamp-610 - 868 - 3700 Telephone Number

4. Mailing Address (if different from Physical Address)

Street Address

City, State and Zip Code

5. **Attorney** (if applicable)

6.

7.

Car	men	C. M	arin	elli-	610-	838-4800
Attorney's Nan	e & Telephone N	umber for this Fi	ling			
656	Main	Street	t He	ller-to	wr P	A 18055
Attorney's Add	ess			—		
Does applica	ant currently ho	old PA PUC au	uthority?	Yes No	(circle one	;)
If yes, enter cu	rrent docket numb	oer A-00				
What type of	commodity do	you intend to	transport?	Appl	iane 5.	<u>es</u>

8. **Form of Organization** (Check one that applies to this application)

[] Individual

[] Partnership

Attach a copy of a Partnership Agreement and list the names and addresses of ALL partners.

[] Corporation

Attach a copy of the Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration. Include a list of all corporate officers/titles and distribution of shares.

[] LLC or LLP

Attach a copy of the Certificate of Incorporation, Certificate of Authority, or foreign corporation registration. Include a list of all members (even if there is only one member) and title of each member.

9. Attachment Checklist

For Corporations:

- [] Copy of Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration.
- [] List of all corporate officers/titles, names of shareholders and distribution of shares.

For LLPs and LLCs Only:

- [] Copy of Certificate of Incorporation, Certificate of Authority, or foreign corporation registration.
- [] List of all members (even if there is only one member) and title of each member.

For Partnerships Only:

- [] Copy of Partnership Agreement.
- [] List the names and addresses of ALL partners.

For ALL Applicants:

[T]	Fictitious Trade Name Registration (if applicable).
Ü.	Copy of Current Safety Rating (if available).
	Proof of Insurance (See item 5 on instruction sheet).
it i	Certified check, money order or attorney's check.

10. Certification

Applicant certifies that it is not now engaged in any intrastate transportation of property 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.

You must sign the following Verification of Application.

Verification of Application

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) or by the President or Secretary (if a corporation).

I/we hereby state that the statements 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.

Jame) $\frac{5-1.6-2011}{(\text{Date})}$ (Signature) PUC 189 - 3 -(Revised 4/09)

Amend	Ficilitious Name Iment, Withdrawal, Cancellation
	(54 Pa.C.S.) <u>Amendmont (§ 312)</u> Withdrawal (§ 313) Cancellation (§ 313)
Northe-Have moving.	Document will be returned to the name and addrear you enter to the loft.
Bethlehem PA (Image: control of permission ZIP Code Commonwealth of Pennsylvania YOUS FICTITIOUS NAME AMENDMENT 3 Page(s)
\$70	T1113064128
In compliance with the requirements of 18 to amend, withdraw or cancel from 1	of 54 Ps.C.S. Ch.3 (relating to fictitious names), the undersigned entity or amilties, a flotitious name registration, hereby state(s) that:
1. The flotitious name is: We-Haul Mov	ring
authorized to conform to the record	of business, Including number and street, if any, is (the Department is ds of the Department): <u>Street Coopersburg PA 18056 L.t.h.; gh.</u> City State Zip County
authorized to conform to the record 314 North Ma., Number and street	de of the Department): <u>Street Coopersburg PA 18056 Lehigh</u> City State Zip County oct to this fictitious name was made in the Department on
authorized to conform to the record <u>314</u> <u>Nor 4</u> <u>Ma.</u> Number and street 3. The last proceeding filling with respec- <u>Jan 15</u> <u>3003</u> (Date) at	de of the Department): <u>Street Coopersburg PA 18056 Lehigh</u> City State Zip County oct to this fictitious name was made in the Department on
A brief statement of the character of the fictivious name is:	de of the Department): <u>Street Coopersburg PA 18056 LAhigh</u> City State Zip County ect to this fictifious name was made in the Department on (Roll and Film).
A brief statement of the character of the fictivious name is:	de of the Department): <u>Street Coopersburg PA 18056 Lahigh</u> <u>City</u> <u>State</u> <u>Zip</u> <u>County</u> ect to this fictitious name was made in the Department on (Roll and Film). or nature of the business or other activity to be carried on under or through <u>Sec Vice</u> <u>Deliver</u> <u>Applicnces</u> <u>E</u> <u>Mattcesses</u> .
authorized to conform to the record <u>314</u> North Ma.n Number and street 3. The last proceeding filling with respective <u>Jan 15</u> , 2003 (Date) at <u>Cate</u>) at <u>Delivery</u> <u>furniture</u>	de of the Department): <u>Street Coopersburg PA 18056 Lahigh</u> <u>City</u> <u>State</u> <u>Zip</u> <u>County</u> ect to this fictitious name was made in the Department on (Roll and Film). or nature of the business or other activity to be carried on under or through <u>State</u> <u>Applicnces</u> <u>E</u> <u>Mattcesses</u> . STATE

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5. Chack one or more of the following, as appropriate:					
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Street Bethleh	cm PA 15	1015 - No	cthampto	2	
City	Sta	te Zip	County		
has (have) been added to the r	egistration and t	heir signature(s) ap	pear(s) at the end	of	
Number and street	City	Stato	Zip		
) has (have) withdrawn from the	a business and th	eir signature(s) ap	pear(a) at the end	of	
Number and streat	City	State	Zip		
stration is cancelled.					
	been changed to: usiness set forth in paragraph 2 <u>Street Bethlehi</u> City thas (have) been added to the r Number and street thas (have) withdrawn from the Number and street	been changed to: usiness set forth in paragraph 2 has been change Street Bethlehem PA 15 City Sta thas (have) been added to the registration and the Number and street City thas (have) withdrawn from the business and the Number and street City	been changed to: usiness set forth in paragraph 2 has been changed to (PO Box alon Street Bethlehem PA 18015 - No City State Zip thas (have) been added to the registration and their signature(s) ap Number and street City State thas (have) withdrawn from the business and their signature(s) ap Number and street City State	been changed to: usiness set forth in paragraph 2 has been changed to (PO Box alone not acceptable): <u>Street Bethlehem PA 18015 - Northampto</u> City State Zip County thas (have) been added to the registration and their signature(s) appear(s) at the end Number and street City State Zip thas (have) withdrawn from the business and their signature(s) appear(a) at the end Number and street City State Zip	

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6. Check box for Application for Amendment Only:

This amondment, without reference to any other filing, sets forth all information with respect to the fictitious name which would be required in an original filing under the Fictitious Names Act.

7. Optional-See Instruction F: This application has been executed by an agent heretofore designated for that purpose in a prior filing in this registration.

MAY.09.2011 04:08 AM

ł	IN TESTIMONY WHEREOF, the under Cancellation of from Fictulious Name to 28 day of Apr. 2011	signed has (have) caused this Application f be executed this	or Amendment, Withdrawal or
	Adding party(ies) signature(s)	Withdrawing party(ies) signature(s)	All current party(ies) signature(s)
1	We-Have Moving Name of Entity	We-Haul Moving Name of Entity Del- In Omen Signature	Name of Entity Signature
	Dwner Title	<u>Owner</u> Tide	Title

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We-Have Moving 1866 Auburn St. Bethlehem, PA 18015



