

VERIFIED STATEMENT OF APPLICANT

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

PUC Application Docket No.			
Kevin R & Sheri D Bippus, TDBA Expressions Limousine of Lancaster			
Legal Name of Applicant			
Expressions Limousine of Lancaster			
Trade Name, if any			
1030 Pointview Avenue	Ephrata	PA	17522
Street Address (principal place of business)	City or Municipality	State	Zip Code

The Verified Statement of the Applicant is more or less a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

At minimum, the Verified Statement of the Applicant should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person making the Verified Statement on behalf of the applicant. If the applicant is a sole proprietor making the statement, this will be the same information as provided above. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number, and indicate that the applicant's directors/owners/partners/etc. have authorized the witness to speak for the business.

Kevin R Bippus\
Partner
1030 Pointview Avenue
P.O.Box 297
Ephrata, PA 17522

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2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.

Applicant has NO AFFILIATIONS of any kind with any other carrier.

3. Describe your business experience, particularly any experience relating to the operation of a transportation service. You may also include an explanation of education or training that you believe may be relevant.

Applicant has owned and successfully operated *Expressions Limousine of Lancaster* (PA PUC #A00116363) since its approval by the Commission on August 8, 2000. We have provided Limousine and Group and Party service since this date. In 2009, we applied for, and received approval from the Commission for Large Group and Party Authority.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to include the office area, office machines that will be utilized, and the facility to house vehicles. Household goods in use carriers should include a description of their storage facilities, if applicable. Please include an explanation of your plan to maintain records required by the PUC, as well as normal business records. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and how you will maintain continuous communication with your drivers. Finally, please state your intended business hours.

We currently own and maintain a 1.2 acre garaging facility. Minor maintenance is performed in house, however all PA State inspections and major repairs are provided by an independent third party facility. All maintenance is recorded in accordance with USDOT regulations on "Vehicle Maintenance Logs"(Attachment "A") and kept in individual vehicle files. All records, including trip logs are bound and kept in accordance with Pennsylvania Public Utility Commission regulations as they have been since we began operation. Transportation requests are received via telephone, text message, or email. All reservations for service must be made in advance. Drivers are assigned their trips via telephone, text message or email. Confirmation of all trip assignments is required. All drivers have or are provided cel phones to have the ability to communicate with office personnel. We currently accept reservations 24 hours a day, seven days a week, including holidays. We will maintain these hours under our additional authority, if approved.

5. Please state the number of employees you intend to use, along with a description of their duties. Please explain why that number of employees is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. **(Do not address drivers in your explanation about this item; drivers are addressed separately in item # 6).**

Sheri and I have operated this company and handled all aspects of it's daily operations since it's beginning. We have no immediate changes anticipated, as this is not a "new" service we are providing. We are applying for this authority to properly segregate "airport transfers" from our "limousine" and "group and party" authorities. As our current staffing has sufficiently provided this service, we see no reason for staffing changes. As this division develops unto its own, staff will be added accordingly .

6. Please state the number of drivers you intend to use or hire in your business and explain why that number of drivers is appropriate for the size of the geographical territory you will be serving. In addition, please explain:
 - a. Your hiring standards for drivers;
 - b. Your system to ensure prospective drivers will be subject to a criminal background check;
 - c. Your driver training program;
 - d. Your system for ensuring that your drivers are properly licensed at all times;
 - e. Your system to ensure that all drivers will be subject to a criminal background check every two years;
 - f. Your policies regarding alcohol and drug use by your drivers.

We currently have three fulltime and nine part time drivers on staff. Each of them, as well as all future drivers are required to submit their three year driving history and criminal background check with their initial application. If, after reviewing these documents and interviewing the applicant, they are deemed acceptable, each is required to complete two hours of classroom "Chauffer training" and an additional three hours of Driving skills training and review. If those are acceptable, then and only then are they permitted to transport passengers. Copies of all driver's licenses, medical certificates. Driving histories, and criminal background checks are kept in each drivers file. Expiration dates for each are computer filed with automatic reminders 30, 15 and 7 days prior to their expiration. Driving records and criminal checks are renewed annually, coinciding with our insurance premium and Philadelphia Parking Authority renewals. All drivers are required to inform us of any changes in any of these. Failure to comply with this directive will result in an immediate removal from duty. We strictly adhere to PA Public Utility Commission and US DOT rules and regulations concerning drug and alcohol screening and use. All drivers are prescreened prior to training and subject to random testing provided by National Diagnostics, an independent, third party testing facility with whom we have contracted as our consortium. Our contract with them is renewed each January 1st. I personally have attended and successfully completed PennTrain's classes regarding

substance use and abuse regulations.

7. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below. Taxicabs and limousines may not be used if the vehicle's age is greater than eight model years.

We intend to utilize vehicles currently in use under our current Limousine and Group & Party authorities. Should additional business dictate, additional vehicles will be obtained.

Vehicle ID	Year	Make	Model	Color	VIN	Plate	Seating
S03	2003	Chevrolet	Suburban	Black	3GNFK16Z13G149363	LM25233	7
S04	2006	Cadillac	DTS	Silver	1G6KD57Y76U101675	LM24309	6
L08	2003	Lincoln	Towncar	Black	1L1FM81WX3Y673824	BA50687	11
L10	2005	Lincoln	Towncar	White	1L1FM88W65Y660121	BA64173	12
L11	2003	Ford	Excursion	Black	1FMNU40S93EA35450	BA51239	15
L13	2006	Lincoln	Town Car	Black	1L1FM88W36Y601870	LM20513	10
B05	2000	Ford	F550	White	1FDAF56F8YEB96176	BA64181	29
V02	2000	Ford	E350	Burgundy	1FBSS31L2YHA48842	BA59262	15
V03	2003	Chevrolet	Express 3500	Gold	1GAHG35UX31128779	BA64180	12

8. Describe your vehicle safety program. Please include the following in your explanation:
- Your periodic vehicle maintenance plan;
 - Your system for ensuring your vehicles will continuously comply with Pennsylvania's equipment standards (67 Pa. Code, Chapter 175) that are applicable to the type of vehicles used in your business;
 - Your system for ensuring your vehicles will maintain compliance with the PUC's requirements for passenger service at 52 Pa. Code, Section 29.403 (applicable to passenger applicants only);
 - Your system for replacing vehicles once they are greater than eight model years in age in compliance with 52 Pa. Code, Section 29.314(d) (applicable to taxicabs) or 52 Pa. Code, Section 29.333(e) (applicable to limousines);
 - Your system for ensuring the filing of an annual vehicle list (taxicabs and limousines);
 - Your system for ensuring your vehicles will comply with the requirements of 49 CFR Parts 393 and 396, as adopted by the PUC at 52 Pa. Code, Chapter 37 (applicable to HHG applicants).

The only thing more important than service is safety. It is never worth risking injury to make someone happy. In respect to this, each vehicle is both pretripped and posttripped by the driver in accordance to the standards set by the PA Public Utility Commission and USDOT commercial vehicle regulations. No driver is to take a vehicle which they deem to unsafe for any reason. Any and all deficiencies noted will be corrected prior to the vehicle returning to service. Additionally, each week we have adopted "Maintenance Monday" where each vehicle is checked bumper to bumper for vehicle defects and equipment wear. Any and all defects noted are corrected immediately or scheduled for service. Such vehicles are placed out of service until such repairs are made. This is truly a situation where "an ounce of prevention is worth a pound of cure". Maintenance logs for each, as well as vehicle files are kept in accordance with PA Public Utility Commission and USDOT rules and regulations. We have successfully been examine and passed a safety audit by the Commission in 2009.

9. Please explain what steps you have taken to determine if you can obtain and pay the premiums to maintain insurance coverage for the proposed number of vehicles for your business.

Our insurance has been properly in place since our inception as a business. We currently maintain 1.5 million coverage on all vehicles and 5 million on all CDL registered vehicles. We have never allowed coverage to lapse, although sometimes the Form "E" filings from our carrier have not been as prompt as the Commission would like.

10. Please describe your customer service standards. Within your description, please explain:
- Your plan to inform customers of the procedures for filing complaints with the PUC;
 - Your intended customer complaint resolution procedure.

In this business, customer service is paramount. The PA Public Utility Commission may set equipment and cleanliness standards, but we like to believe our standards are even higher. Every vehicle is personally checked by Sheri or I and pretripped by the driver. Our motto for arrival times is, "If we're not 15 minutes early, we're late". Occasionally acts of God and unforeseen circumstances may cause a tardy arrival. Should this occur, the driver is to call the customer and explain the circumstances, phone the office and we will take whatever measures needed to help rectify the situation. In the rare event a customer is dissatisfied with our services, every attempt is made to appease them and correct whatever problem they feel has occurred. In the unlikely event we are nit able to resolve, or should the customer prefer to circumvent this step, the PA Public Utility Commission complaint phone number and information is printed on all customer receipts in accordance with PA Public Utility Commission regulations.

11. Criminal Record. Have you been convicted of a misdemeanor or felony for which you remain subject to supervision by a court or correctional institution?

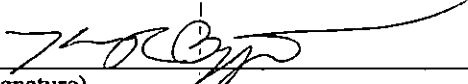
YES NO

12. Financial Data. In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation service. Therefore you must complete both parts of the "Statement of Financial Position", which follows this page. The first part is the Balance Sheet. You need only provide the applicable information. The second part of the Statement of Financial Position is the Projected Income Statement. The projection is your estimation of expected revenues and specific expenses for one year. You should use the projected information, along with the financial data reported on your balance sheet to help you determine if proposed business can be feasible. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

In closing, I would like to again reiterate that providing service to airports is not new to us. During our eleven years of operation, we have provided literally thousands of these trips to thousands of customers. We are seeking separate Airport Transfer Authority to separate this portion of our tariff and service from our other authorities. We feel by doing so, we can better serve our existing customers and provide a better opportunity for future ones. In 2010, approximately forty percent of our total gross revenue was from transportation to or from an airport. We trust that this information will clarify why we have not provided an abundance of customer statements in support of our application. They are already utilizing it. If the commission feels the necessity for the names of these clients, they will be provided. However, we felt such discretion should be used for the privacy of these passengers. As most customers are not familiar with the Public Utility Commission authorities, many were confused when asked to provide a statement in support of an application for a service they are already provided. I personally thank the Commission for their review of this application and respectfully request their approval.

Verification of Statement

The undersigned deposes and says 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 penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.



(Signature)
Kenn Bippus-Partner

(Name and Title, printed or typed)

5-18-11

(Date)

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Statement of Financial Position (Balance Sheet)

As of (date) 5/19/2011

ASSETS

Current Assets			
Cash		27819	
Accounts Receivable		5200	
Notes Receivable		0	
Other Current Assets (specify)		0	
	Total Current Assets		<u>33019</u>
Tangible Assets			
Motor Vehicle Equipment		203700	
Less: Accumulated Depreciation		included	203700
-			=
Building and Structures		170000	
Less: Accumulated Depreciation			170000
-			=
Office Equipment		12000	
Less: Accumulated Depreciation			12000
-			=
Land			140000
Investments and Funds (stocks)			1939
Intangible Assets(value of business)			250000
Other Assets (advances and idle equipment – specify)			
	TOTAL ASSETS		<u>810658</u>

LIABILITIES

Current Liabilities (Due within one year of date)			
Accounts Payable		55668	
Notes Payable		28332	
Equipment Obligations		0	
Other Liabilities (Attach schedule)		0	
	Total Current Liabilities		<u>84000</u>
Long Term Liabilities (Due after one year of date)			
Accounts Payable		0	
Notes Payable		44328	
Equipment Obligations		0	
Other Liabilities (Attach Schedule)		0	
	Total Long Term Liabilities		44328
	TOTAL LIABILITIES		<u>128328</u>

NET WORTH (Partnerships and individuals, only)

OWNER'S EQUITY (Corporations only)

Capital Stock	
Additional Paid-in Capital	
Retained Earnings	
Less: Treasury Stock	
	Total Owner's Equity

TOTAL LIABILITIES & OWNER'S EQUITY

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STATEMENT OF FINANCIAL POSITION
One Year Projected Income Statement

REVENUE and GAINS

Operating Revenue	<u>274794.00</u>
Net Revenue from non-carrier operations	<u>4696.00</u>
Dividend and interest revenues	<u>0</u>
Other non-operating revenue	<u> </u>
Gains	<u> </u>
Total Revenue and Gains	<u>279460.00</u>

EXPENSES

Equipment Maintenance and Garage Expense	<u>22157.00</u>
Insurance Expense	<u>19116.00</u>
Drivers Salaries	<u>40402.00</u>
Supervisory Salaries	<u>0</u>
Officer Salaries	<u>0</u>
Fuel Expense	<u>51088.00</u>
Purchased Transportation (Lease Expense)	<u>0</u>
Materials and Supplies Expense	<u>8997.00</u>
General Office Expense	<u>12378.00</u>
Advertising Expense	<u>12146.00</u>
Telephone Expense	<u>8971.00</u>
Accounting Expense	<u>0</u>
Legal Expense	<u>721.00</u>
Uncollectible Revenue	<u>2748.00</u>
Depreciation Expense	<u>47235.00</u>
Amortization	<u>0</u>
Operating Taxes and Licenses	<u>8793.00</u>
Rent Expense	<u>0</u>
Loss	<u>0</u>
Total Operating Expenses and Losses	<u>234752.00</u>

Net Income Before Taxes

Provision for Income Taxes	<u>5000.00</u>
<u>Net Income (Loss)</u>	<u>39708.00</u>

VERIFIED STATEMENT IN SUPPORT OF THE APPLICATION

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.

Liberty Travel
 Name of Supporter

122 Park City Mall *Lancaster* *PA* *17601*
 Street Address City or Municipality State Zip Code

Kevin R. & Sheri D. Bippus T/A Expressions Limousine of Lancaster
Existing PUC #A000116363
 Name of Applicant

- Describe the type of transportation service needed.

Limo

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

Lancaster Township / Philadelphia / Baltimore
PA *MD*

- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?

a few times a month

- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?

N/A

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

n/a

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

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.

Jennifer Lindeman
 (Signature)

Jennifer Lindeman
 (Name, printed or typed)

7/16/09
 (Date)

Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

Application for Airport Transfer Authority

Existing PUC# A000116363

VERIFIED STATEMENT IN SUPPORT OF THE APPLICATION

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.

Kathy A. Toney

Name of Supporter

2000 Alexis Drive

Street Address

Harrisburg PA

City or Municipality

State

17110

Zip Code

Expressions Limousine of Lancaster

Name of Applicant

- Describe the type of transportation service needed. *Transportation to and from airports.*
- What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships. *Phila, PA.*
- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis? *Semi-annual.*
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them? *Confidence in drivers. Dependable service.*
- Have you supported similar applications in the past? If so, please supply name and docket number. *No.*

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Kathy A. Toney

(Signature)

Kathy A. Toney

(Name, printed or typed)

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05/01/09

(Date)

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Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

Application for Airport Transfer Authority

Existing PUC# A000116363

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Rachel Miller

Name of Supporter

38 E James St

Lancaster

PA

17602

Street Address

City or Municipality

State

Zip Code

Name of Applicant

- Describe the type of transportation service needed.

airport

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

philly

- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?

yearly

- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?

No

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

No

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Rachel Miller

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7/15/09

(Signature)

RACHEL MILLER

MAY 18 2011

(Date)

(Name, printed or typed)

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

Application for Airport Transfer Authority

Existing PUC# A000116363

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Robert C. Steinman

Name of Supporter

412 Ruth Ridge Drive LANCASTER PA 17601

Street Address

City or Municipality

State

Zip Code

Name of Applicant

- Describe the type of transportation service needed.

LIMOUSINE TO AIR PORT

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

PHILADELPHIA AIR PORT ↔ Lancaster
HSBC AIR PORT ↔ Lancaster

- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?

Few times per year

- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?

YES — CONVENIENCE

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

NO

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Robert C Steinman

(Signature)

Robert C Steinman

(Name, printed or typed)

7.15.09

(Date)

Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

Application for Airport Transfer Authority

Existing PUC# A000116363

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JUDITH SOPHER

Name of Supporter

2501 BROOKSIDE DR, LANCASTER, PA 17601

Street Address

City or Municipality

State

Zip Code

Name of Applicant

- Describe the type of transportation service needed.

Trip to Airport

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

LANCASTER

- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?

Twice/yr

- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?

No

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

No

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Judith Sopher

(Signature)

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7/15/09

(Date)

JUDITH SOPHER

(Name, printed or typed)

MAY 18 2011

PA PUBLIC UTILITY COMMISSION
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Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

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Mark Orlando Rudenstein
Name of Supporter

1650 Ridgeview Ave, Lancaster Pa 17603
Street/Address City or Municipality State Zip Code

Mark Orlando Rudenstein
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.

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[Signature]
(Signature)

Mark Orlando Rudenstein
(Name, printed or typed)

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July 15th 2009
(Date)

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

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PAUL WENGER

Name of Supporter

224 Bambergen Road

AKRON

PA

47501

Street Address

City or Municipality

State

Zip Code

Kevin R & Sheri D Bippus T/A Expressions Limousine of Lancaster

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.

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(Signature)

MAY 18 2011

(Date)

(Name, printed or typed)

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Month-_____

Expressions Limousine of Lancaster Vehicle Maintenance Log

Vehicle #-_____

Date	Mileage	Repair Description	Part Cost	Labor Cost	Total Cost

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Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATION OF INSURANCE
(Electronic Filing)

Filed with Pennsylvania Public Utility Commission (herein after called Agency)
(Name of Agency)

This is to certify that the Lancer Insurance Company
(Name of Company)
(herein after called Company) of 370 West Park Avenue, Long Beach, NY, 11561
(Home Address of Company)

(DBA) T/A Expressions Limousine of Lancaster
Kevin R. And Sheri D.
has issued to Bippus of PO Box 297, Ephrata, PA, 17522
(Name of Motor Carrier) (Address of Motor Carrier)

A policy or policies of insurance effective from 05/16/2011 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Agency has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Agency a duplicate original of said policy or policies and all endorsements thereon. This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effective by the Company or the Insured giving thirty (30) days' notice in writing to the State Agency, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Agency.

Countersigned at 370 W. Park Ave.
LONG BEACH NY 11561 This 18th day of May 20 11
(Address) (Day) (Month) (Year)

Insurance Company File No. BA162495 Wayne S. Ricci
(Policy No) (Authorized Company Representative)

Underlying Limit :0.00

Liability Limit :1,500,000.00

RECEIVED

MAY 18 2011

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

CERTIFICATE OF ENROLLMENT

NATIONAL DIAGNOSTICS, INC. HEREBY CERTIFIES THAT

**EXPRESSIONS LIMOUSINE OF
LANCASTER**

IS A CURRENT PARTICIPANT, IN GOOD STANDING, IN ITS

DOT RANDOM DRUG & ALCOHOL TESTING PROGRAM

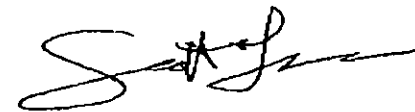
**ADMINISTERED BY NATIONAL DIAGNOSTICS, INC. IN ACCORDANCE WITH
THE REQUIREMENTS OF THE U. S. DEPARTMENT OF TRANSPORTATION AND
THE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
SET FORTH IN 49 CFR PARTS 40 AND 382.**

THIS MEMBERSHIP IS VALID FROM FEBRUARY 22, 2011 TO DECEMBER 31, 2011.

RECEIVED

MAY 18 2011

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU



SCOTT LOWDER
RANDOM PROGRAM MANAGER
NATIONAL DIAGNOSTICS, INC.
6407 IDLEWILD ROAD, SUITE 211
CHARLOTTE, NORTH CAROLINA 28212
Telephone: (704) 364-7550

Airport Transfer - PA P.U.C No1

Docket # _____

**Kevin R. & Sheri D. Bippus, CoPartners,
T/D/B/A**

*Expressions Limousine of
Lancaster*

Airport Transfer Tariff Naming Rates, Rules, and Regulations Governing the
Transportation of Person From Points Within Lancaster, York, Lebanon,
Berks, Dauphin, and Cumberland Counties to Philadelphia, Harrisburg,
Allentown, and Lancaster Airports.

Issued _____

Effective _____

Issued By

Kevin R. & Sheri D. Bippus T/D/B/A
Expressions Limousine of Lancaster
107 Buchland Road
Ephrata, PA 17522

717-556-5466

RECEIVED

MAY 18 2011

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

New Tariff

1. The Addition of Fixed Rates for Airport Transfers from Points within Lancaster, Lebanon, Berks, York, Dauphin, and Cumberland Counties to Philadelphia International, Harrisburg International, Allentown, and Lancaster Airports
2. The addition of Fixed Rates for Local Frequent User Transfers from Points within Lancaster, Lebanon, Berks, York, Dauphin, and Cumberland Counties to Philadelphia International, Harrisburg International, Allentown, and Lancaster Airports
3. The Addition of "Rules and Regulations" regarding the Acceptance of Reservations, Deposits and Cancellation, Payment, Holiday Assessment, Driver Gratuity, Additional Out of Pocket Expenses, Cleaning Fees & Damage Charges, Promotional Fares, and Vehicle Descriptions.
4. The addition of the Definition of a Frequent User.

Operating Authority

Certificate No. A- _____

To transport, as a common carrier, persons in Airport Transfer Service from Points within Lancaster, Lebanon, Berks, York, Dauphin, and Cumberland Counties to Philadelphia International, Harrisburg International, Allentown, and Lancaster Airports

Explanation of Abbreviations

No.	-	Number
P.U.C.	-	Public Utility Commission
PA	-	Pennsylvania
PHL	-	Philadelphia International Airport
MDT	-	Harrisburg International Airport
ABE	-	Lehigh Valley International Airport
LNC	-	Lancaster Airport

Explanation of Reference Marks

(C) - Denotes Change or Addition

\$ - Denotes Dollars

New Tariff

Operating Authority

Certificate No. A- _____

To transport, as a common carrier, persons in Airport Transfer Service from Points within Lancaster, Lebanon, Berks, York, Dauphin, and Cumberland Counties to Philadelphia International, Harrisburg International, Allentown, and Lancaster Airports

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PHL	-	Philadelphia International Airport
MDT	-	Harrisburg International Airport
ABE	-	Lehigh Valley International Airport
LNC	-	Lancaster Airport

Explanation of Reference Marks

\$ - Denotes Dollars

PUC Filed

Airport Rates

Effective July 1, 2011

	From Points Within Dauphin County to;				From Points Within York County to;				From Points Within Lancaster County to;			
	MDT	PHL	ABE		MDT	PHL	ABE	LNC	MDT	PHL	ABE	LNC
Miles	40	105	100		40	105	100		39	79	79	10
Drive Time	1.25	2.50	2.50		1.25	2.50	2.50		1.00	2.00	2.50	0.50
1-3 Pass. (Sedan)	\$80.00	\$190.00	\$140.00		\$100.00	\$180.00	\$150.00	\$70.00	\$90.00	\$160.00	\$130.00	\$30.00
Frequent User	\$72.00	\$171.00	\$126.00		\$90.00	\$162.00	\$135.00	N/A	\$81.00	\$144.00	\$117.00	N/A
4-7 Pass. (Van/SUV)	\$100.00	\$230.00	\$180.00		\$130.00	\$230.00	\$200.00	\$100.00	\$120.00	\$210.00	\$180.00	\$50.00
Frequent User	\$90.00	\$207.00	\$162.00		\$117.00	\$207.00	\$180.00	N/A	\$108.00	\$189.00	\$162.00	N/A
8-14 Pass. (Van)	\$130.00	\$300.00	\$240.00		\$170.00	\$300.00	\$250.00	\$90.00	\$170.00	\$270.00	\$230.00	\$60.00
Frequent User	\$117.00	\$270.00	\$216.00		\$153.00	\$270.00	\$225.00	N/A	\$153.00	\$243.00	\$207.00	N/A
15 - 28 Pass. (Bus)	\$240.00	\$580.00	\$470.00		\$340.00	\$580.00	\$510.00	\$160.00	\$340.00	\$530.00	\$450.00	\$120.00
Frequent User	\$216.00	\$522.00	\$423.00		\$306.00	\$522.00	\$459.00	N/A	\$306.00	\$477.00	\$405.00	N/A
6 Pass. Limousine	\$150.00	\$290.00	\$250.00		\$150.00	\$270.00	\$250.00	\$100.00	\$130.00	\$260.00	\$240.00	\$60.00
Frequent User	\$135.00	\$261.00	\$225.00		\$135.00	\$243.00	\$225.00	N/A	\$117.00	\$234.00	\$216.00	N/A
8 Pass. Limousine	\$170.00	\$330.00	\$280.00		\$170.00	\$300.00	\$280.00	\$100.00	\$150.00	\$290.00	\$270.00	\$60.00
Frequent User	\$153.00	\$297.00	\$252.00		\$153.00	\$270.00	\$252.00	N/A	\$135.00	\$261.00	\$243.00	N/A
10 Pass. Limousine	\$210.00	\$410.00	\$350.00		\$210.00	\$370.00	\$350.00	\$120.00	\$180.00	\$350.00	\$330.00	\$80.00
Frequent User	\$189.00	\$369.00	\$315.00		\$189.00	\$333.00	\$315.00	N/A	\$162.00	\$315.00	\$297.00	N/A
14 Pass. Limousine	\$300.00	\$590.00	\$520.00		\$300.00	\$540.00	\$520.00	\$180.00	\$260.00	\$510.00	\$490.00	\$110.00
Frequent User	\$270.00	\$531.00	\$468.00		\$270.00	\$486.00	\$468.00	N/A	\$234.00	\$459.00	\$441.00	N/A
20 Pass. Limousine	\$380.00	\$760.00	\$670.00		\$380.00	\$690.00	\$670.00	\$230.00	\$330.00	\$660.00	\$640.00	\$150.00
Frequent User	\$342.00	\$684.00	\$603.00		\$342.00	\$621.00	\$603.00	N/A	\$297.00	\$594.00	\$576.00	N/A

Kevin R. Sheri D. Bippus tdba
 Expression Limousine of Lancaster
 Docket #

PUC Filed

Airport Rates

Effective July 1, 2011

	From Points Within Berks County to;				From Points Within Lebanon County to;				From Points Within Cumberland County to;		
	MDT	PHL	ABE	LNC	MDT	PHL	ABE	LNC	MDT	PHL	ABE
Miles	70	75	60		30	95	75		25	125	100
Drive Time	1.00	2.00	2.50		1.00	2.00	2.50		1.00	2.50	2.50
1-3 Pass. (Sedan)	\$110.00	\$160.00	\$120.00	\$60.00	\$80.00	\$180.00	\$140.00	\$70.00	\$90.00	\$210.00	\$160.00
Frequent User	\$99.00	\$144.00	\$108.00	N/A	\$72.00	\$162.00	\$126.00	N/A	\$81.00	\$189.00	\$144.00
4-7 Pass. (Van/SUV)	\$150.00	\$200.00	\$150.00	\$80.00	\$100.00	\$220.00	\$180.00	\$100.00	\$120.00	\$270.00	\$210.00
Frequent User	\$135.00	\$180.00	\$135.00	N/A	\$90.00	\$198.00	\$162.00	N/A	\$108.00	\$243.00	\$189.00
8-14 Pass. (Van)	\$200.00	\$270.00	\$200.00	\$80.00	\$140.00	\$290.00	\$240.00	\$90.00	\$160.00	\$340.00	\$270.00
Frequent User	\$180.00	\$243.00	\$180.00	N/A	\$126.00	\$261.00	\$216.00	N/A	\$144.00	\$306.00	\$243.00
15-28 Pass. (Bus)	\$390.00	\$520.00	\$390.00	\$140.00	\$270.00	\$590.00	\$500.00	\$150.00	\$300.00	\$670.00	\$550.00
Frequent User	\$351.00	\$468.00	\$351.00	N/A	\$243.00	\$531.00	\$450.00	N/A	\$270.00	\$603.00	\$495.00
6 Pass. Limousine	\$180.00	\$240.00	\$200.00	\$80.00	\$150.00	\$270.00	\$250.00	\$90.00	\$180.00	\$350.00	\$250.00
Frequent User	\$162.00	\$216.00	\$180.00	N/A	\$135.00	\$243.00	\$225.00	N/A	\$162.00	\$315.00	\$225.00
8 Pass. Limousine	\$200.00	\$270.00	\$220.00	\$90.00	\$170.00	\$300.00	\$280.00	\$100.00	\$200.00	\$390.00	\$280.00
Frequent User	\$180.00	\$243.00	\$198.00	N/A	\$153.00	\$270.00	\$252.00	N/A	\$180.00	\$351.00	\$252.00
10 Pass. Limousine	\$240.00	\$330.00	\$280.00	\$100.00	\$210.00	\$370.00	\$350.00	\$110.00	\$240.00	\$480.00	\$350.00
Frequent User	\$216.00	\$297.00	\$252.00	N/A	\$189.00	\$333.00	\$315.00	N/A	\$216.00	\$432.00	\$315.00
14 Pass. Limousine	\$360.00	\$480.00	\$410.00	\$140.00	\$300.00	\$540.00	\$520.00	\$170.00	\$360.00	\$710.00	\$520.00
Frequent User	\$324.00	\$432.00	\$369.00	N/A	\$270.00	\$486.00	\$468.00	N/A	\$324.00	\$639.00	\$468.00
20 Pass. Limousine	\$460.00	\$620.00	\$530.00	\$180.00	\$380.00	\$690.00	\$670.00	\$210.00	\$460.00	\$910.00	\$670.00
Frequent User	\$414.00	\$558.00	\$477.00	N/A	\$342.00	\$621.00	\$603.00	N/A	\$414.00	\$819.00	\$603.00

Kevin R. Sheri D. Bippus tdba
 Expression Limousine of Lancaster
 Docket #

Expressions Limousine of Lancaster #21
Po Box 297
Ephrata PA 17522-0297

Pennsylvania Public Utility Commission

PO Box 3265

Harrisburg PA 17105-3265

Attn: Dave Thompson

EXTREMELY URGE



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EG687297855US



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ORIGIN (POSTAL SERVICE USE ONLY)			
PO ZIP Code 17501	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	Postage \$ 15.25	Return Receipt Fee \$ NONE
Date Accepted 05-18-11	Scheduled Date of Delivery Month 5 Day 19	CDD Fee \$	Insurance Fee \$
Mo. Day Year	Scheduled Time of Delivery <input checked="" type="checkbox"/> 9 AM <input type="checkbox"/> 3 PM	Total Postage & Fees \$ 15.25	Acceptance Emp. Initials FA
Time Accepted 1:30 PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Int'l Alpha Country Code	
First Rate <input type="checkbox"/> or Weight lbs. 12.1 ozs.			

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day		
Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day		
Delivery Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day		

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WAIVER OF SIGNATURE (Domestic Mail Only)
Additional merchandise insurance is void if customer requests waiver of signature.
I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

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 Weekend Holiday Mailing Signature

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Express Mail
10 Box 297
Lancaster PA 17422

TO: (PLEASE PRINT) PHONE ()

1716 4thly Commission
P.O. Box 3225
Harrisburg PA 17115-3225

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