

**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)

Mulhern's Moving Inc

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

U-Call We Haul U-Save

3. **Physical Address** (do not use PO Box)

1579 W. County Line Rd.

Street Address

Hatboro PA 19040

City, State and Zip Code

215-675-2513

Telephone Number

Bucks

County

4. **Mailing Address** (if different from Physical Address)

Street Address

City, State and Zip Code

RECEIVED
BUREAU OF SAFETY
TRANSPORTATION &
2011 MAY 11 AM 11:07

RECEIVED

MAY 11 2011

5. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address

6. Does applicant currently hold PA PUC authority? Yes No (circle one)

If yes, enter current docket number A-00 _____

7. What type of commodity do you intend to transport? _____

- General & Commercial Property, Removal of unwanted items
- ~~Household goods~~

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.
↳ Daniel Mulhern President 100% 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:

- Fictitious Trade Name Registration (if applicable).
- Copy of Current Safety Rating (if available).
- Proof of Insurance (See item 5 on instruction sheet).
- Certified check, money order or attorney's check. - 100

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.

Daniel Mulhern
(Print Name)
[Signature]
(Signature) 5/6/2011
(Date)

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
PHILADELPHIA PA 19255

DATE OF THIS NOTICE: 03-09-1999
NUMBER OF THIS NOTICE: CP 575 A
EMPLOYER IDENTIFICATION NUMBER: 23-2993332
FORM: SS-4
2877707079 B

FOR ASSISTANCE CALL US AT:
1-800-829-1040

MULHERNS MOVING INC
1579 W COUNTYLINE RD
HATBORO PA 19040

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 23-2993332. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN as shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

Form 1120

03/15/2000

Your Form 2290 becomes due the month after your vehicle is put into use.

Please file your Form by the due date shown above. If this date has passed and you have not yet filed, please file your Form by 03-24-1999. If we don't receive your form by that date, we will charge additional penalties and interest. We charge penalties and interest from the due date of the return until it is filed.

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the Service. If you want a determination on your tax classification, you may seek a private letter ruling from the Service under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have any questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply. Start your business off right - pay your taxes the easy way. Pay through the Electronic Federal Tax Payment System (EFTPS). For information about EFTPS, call 1-800-829-3676 and request Publication 966, EFTPS Answers to the Most Commonly Asked Questions.

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU
ROOM 308 NORTH OFFICE BUILDING
P.O. BOX 8722
HARRISBURG, PA 17105-8722

107

U-CALL WE-HAUL U-SAVE

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT.
PLEASE NOTE THE FILE DATE AND THE SIGNATURE OF THE SECRETARY OF THE
COMMONWEALTH. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS
TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA. IF YOU HAVE ANY
QUESTIONS PERTAINING TO THE CORPORATION BUREAU, CALL (717) 787-1057.

ENTITY NUMBER: 2785957

MICROFILM NUMBER: 09785

0444-0445

DANIEL & ALICE MULHERN
1579 W COUNTY LINE RD
HATBORO PA 19040-1009

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU
ROOM 308 NORTH OFFICE BUILDING
P.O. BOX 8722
HARRISBURG, PA 17105-8722

268

MULHERN'S MOVING INC.

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT.
PLEASE NOTE THE FILE DATE AND THE SIGNATURE OF THE SECRETARY OF THE
COMMONWEALTH. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS
TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA. IF YOU HAVE ANY
QUESTIONS PERTAINING TO THE CORPORATION BUREAU, CALL (717) 787-1057.

ENTITY NUMBER: 2865561

MICROFILM NUMBER: 09920

1521-1522

DANIEL J MULHERN
1579 W COUNTY LINE RD
HATBORO PA 19040



Underwritten by: Infinity Auto Insurance Company 1400 Provident Tower, One E. 4th St. Cincinnati, OH 45202

Customer Service: (800) 722-3391

Claims Service: (800) 334-1661

Commercial Auto Declaration



**MULHERNS MOVING INC
1579 W COUNTY LINE RD
HATBORO PA 19040-1009**

POLICY NUMBER: 537-70000-1271-001

POLICY PERIOD: 07/30/2010 To 07/30/2011

This policy incepts on the date and time that the application for insurance is executed and shall expire at 12:01 a.m. on the last day of the policy period.

The following coverages and limits apply to each described vehicle as shown below. Coverages are defined in the policy and are subject to the terms and conditions contained in the policy, including amendments and endorsements. No changes will be effective prior to the time changes are requested.

#	Yr	Make - Model	Serial Number	COL/COM/FTC	#	Driver Name	DOB	Excl
2	02	GMC C-SERIES C7H042	1GDJ7H1C62J510093	N/A / N/A / N/A	1	Dan Mulhern	09/16/1973	No
3	93	GMC TOPKICK C6H042	1GDJ6H1P5PJ507005	N/A / N/A / N/A	2	Alice Mulhern	02/04/1972	No

COVERAGES - LIMITS OF LIABILITY				PREMIUMS FOR VEHICLES	
THE COVERAGE IS APPLICABLE ONLY IF A PREMIUM IS INDICATED				VEH 2	VEH 3
BI/PD Liability	\$750,000 CSL			3149	1070
Uninsured Motorist	\$35,000 each person	\$35,000 each accident		61	61
Underinsured Motorist	\$35,000 each person	\$35,000 each accident		107	107
Medical Benefits w/Worker's Comp		\$5,000 Limit		44	44
PREMIUM BY VEHICLE:				3361	1282

PUC: No

TOTAL VEHICLE PREMIUM	\$ 6722.00
POLICY FEES	\$ 44.00
TOTAL POLICY PREMIUM	\$ 6766.00

SEE REVERSE FOR ADDITIONAL INFORMATION

ENDORSEMENTS MADE A PART OF THIS POLICY:
53750AE101; 53750POL02

IF YOU PURCHASE COLLISION COVERAGE, THIS POLICY PROVIDES COLLISION COVERAGE FOR RENTAL VEHICLES WHEN RENTAL VEHICLES ARE USED AS A TEMPORARY SUBSTITUTE VEHICLE FOR YOUR INSURED AUTO.

**CRANBROOK INSURANCE COMPANY
PRIMARY FACILITY
COMMERCIAL GENERAL LIABILITY COVERAGE PART
SUPPLEMENTAL DECLARATIONS**

These Supplemental Declarations form a part of policy number

CBGL40506R3

LIMITS OF INSURANCE	
General Aggregate Limit (other than Products/ Completed Operations)	\$ <u>2,000,000</u>
Products/ Completed Operations Aggregate Limit	\$ <u>INCLUDED</u>
Personal and Advertising Injury Limit	\$ <u>1,000,000</u>
Each Occurrence Limit	\$ <u>1,000,000</u>
Damage to Premises Rented to You Limit	\$ <u>100,000</u>
Medical Expense Limit	\$ <u>5,000</u> any one person

BUSINESS DESCRIPTION AND LOCATION OF PREMISES	
Form of business:	
<input type="checkbox"/> Individual <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Organization (other than Partnership or Joint Venture) <input type="checkbox"/> Corporation <input type="checkbox"/> LLC	
Business description: TRUCKERS	
Location of all premises you own, rent or occupy: 1579 W. COUNTY LINE ROAD, HATBORO, PA 19040	

PREMIUM							
Classification	Code No.	*Premium Basis	PR/ Co	Rate All Other	Advance Pr/ Co	Premium All Other	
TRUCKERS INCLUDING PRODUCTS/ COMPLETED OPERATIONS	99793	P) 9,793	INCL	21.869	\$ INCL	\$ 75dMP	

FORMS AND ENDORSEMENTS (other than applicable forms and endorsements shown elsewhere in the policy)

Forms and endorsements applying to this Coverage Part and made part of this policy at time of issue:

SEE SCHEDULE OF FORMS AND ENDORSEMENTS

DEDUCTIBLE: \$ 500 Per Claim

* (a) Area, (c) Total Cost, (m) Admission, (p) Payroll, (s) Gross Sales, (u) Units, (o) Other

THIS SUPPLEMENTAL DECLARATIONS AND THE COMMERCIAL LIABILITY DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS COMPLETE THE ABOVE NUMBERED POLICY.

CRANBROOK INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AMENDMENT - AIRCRAFT, AUTO OR WATERCRAFT EXCLUSION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Number	Inception Date 04/21/2010	Expiration Date 04/21/2011
Endorsement Effective 04/21/2010	Policy Number CBGL40506R3	
Named Insured U-CALL WE HAUL U-SAVE MULHERN'S MOVING INC.		

SECTION I – COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions, paragraph (g.) Aircraft, Auto Or Watercraft is deleted and replaced with the following:

g. Aircraft, Auto Or Watercraft

This insurance does not apply to:

- (1) "Bodily injury" or "property damage" arising out of or in connection with any aircraft or watercraft.
- (2) "Bodily injury" or "property damage" arising out of or in connection with any "auto".
- (3) The "loading or unloading" of any aircraft, "auto" or watercraft.

This exclusion applies to "bodily injury" or "property damage" arising out of any aircraft, "auto" or watercraft, whether or not owned, maintained, used, rented, leased, hired, loaned, borrowed or entrusted to others or provided to another by any insured.

This exclusion applies even if the claims allege negligence or other wrongdoing in the supervision, hiring, employment, entrustment, permitting, training or monitoring of others by an insured.

This exclusion does not apply to:

- (1) A watercraft while ashore on premises you own, rent or on any premises while being worked upon;
- (2) A watercraft you do not own that is:
 - (a) Less than 26 feet long; and
 - (b) Not being used to carry persons or property for a charge;
- (3) Parking an "auto" on, or on the ways next to, premises you own or rent, provided the "auto" is not owned by or rented or loaned to you or any insured;
- (4) Liability assumed under any "insured contract" for the ownership, maintenance or use of aircraft or watercraft; or
- (5) "Bodily injury" or "property damage" arising out of:
 - (a) The operation of machinery or equipment that is attached to, or part of, a land vehicle that would qualify under the definition of "mobile equipment" if it were not subject to a compulsory or financial responsibility law or other motor vehicle insurance law in the state where it is licensed or principally garaged; or
 - (b) The operation of any of the machinery or equipment listed in Paragraph f. (2) or f. (3) of the definition of "mobile equipment".

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

MAY 11 2011

RECEIVED

Mulhearn's Moving Inc.
1579 W. County Line Rd
Hatboro PA 19040



Pennsylvania Public Utility Commission
Bureau of Transportations & Safety
PO Box 3265
Harrisburg, PA 17105-3265