

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

Application for Motor Common Carrier of Persons in Group and Party Service

Exclusively using vehicles with a seating capacity of 16 or more
passengers, including the driver.

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)

Mainstreet Leasing, Inc.

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

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

445 Business Park Lane

Street Address

Allentown, PA 18109

City, State and Zip Code

610-776-1516

Telephone Number

Lehigh

County

RECEIVED

JUN 03 2011

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

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

Street Address

City, State and Zip Code

5. **Attorney** (if applicable)

Kenneth A. Olsen, Esq., (908) 832-9207

Attorney's Name & Telephone Number for this Filing

33 Philhower Road, Lebanon, NJ 08833

Attorney's Address

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

If yes, enter current docket number A-00 _____

7. Applicant will be operating vehicles with a seating capacity of:

16 to 28 passengers including the driver
(Requires carrier to maintain a minimum of \$1 million in liability insurance coverage. Checking this box will limit authority to providing service in vehicles having a seating capacity of no more that 28 passengers including the driver)

More than 28 passengers including the driver
(Requires carrier to maintain a minimum of \$5 million in liability insurance coverage)

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. See attached.

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. See Attached.

List of all corporate officers/titles, names of shareholders and distribution of shares. See Attached

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). See attached.
- Proof of Insurance (See item 5 on instruction sheet). See attached.
- Certified check, money order or attorney's check. Attached.

Also see attached list of equipment.

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.

Applicant must sign the following Verification of Application.

Verification of Application

The Verification of Application must be completed by the applicant appearing on Line 1 of the application: 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.

Denise Cali, Vice President

(Print Name)

Denise Cali

(Signature)

5-20-2011

(Date)



PENNSYLVANIA
Department of State

Corporations

[Online Services](#) | [Corporations](#) | [Forms](#) | [Contact Corporations](#) | [Business Services](#)

- Search
- By Business Name
- By Business Entity ID
- Verify
- Verify Certification
- Online Orders
- Register for Online Orders
- Order Good Standing
- Order Certified Documents
- Order Business List
- My Images
- Search for Images

Business Entity Filing History

Date: 6/3/2011

(Select the link above to view the Business Entity's Filing History)

Business Name History

Name	Name Type
MAINSTREET LEASING, INC.	Current Name

PA Close Corporation - Domestic - Information

Entity Number:	2157680
Status:	Active
Entity Creation Date:	11/12/1992
State of Business.:	PA
Registered Office Address:	1313 HANOVER AVE BLDG 3 ALLENTOWN PA 18103-0 Lehigh
Mailing Address:	No Address

Officers

Name: DENISE SAMCALI
Title: President
Address: 445 BUSINESS PARK LN
 ALLENTOWN PA 18103-39

Name: DENISE SAM
Title: Treasurer
Address: [Address Not Available]

RECEIVED
 JUN 03 2011
 PA PUBLIC UTILITY COMMISSION
 SECRETARY'S BUREAU



Mainstreet Leasing, Inc.
List of Corporate Officers and Shareholders

Denise Cali - President, Treasurer, Shareholder -51%, 445 Business Park Lane,
Allentown, PA 18109

John Cali - Vice President and Shareholder - 49%, 445 Business Park Lane,
Allentown, PA 18109

RECEIVED

JUN 03 2011

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU



MAIN STREET LEASING INC
 U.S. DOT #: 508433

Review Date:
 03/13/2010

Part B Violations

Your proposed safety rating is :

SATISFACTORY

Rating Factors		Acute	Critical
Factor 1:	S	0	0
Factor 2:	S	0	0
Factor 3:	S	0	0
Factor 4:	S	0	0
Factor 5:	N	0	0
Factor 6:	S	-	-

Corrective actions must be taken for any violations (deficiencies) identified on Part B of this report.





CERTIFICATE OF LIABILITY INSURANCE

OP ID: AC

DATE (MM/DD/YYYY)
05/26/11

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

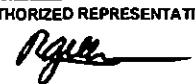
PRODUCER MBI/TIB 20 South Terminal Drive Plainview, NY 11803-2309 Sean Grady	516-349-8799 516-349-9227	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: MAINS-3	FAX (A/C, No):
	INSURED Main Street Leasing, Inc. 445 Business Park Lane Allentown, PA 06032	INSURER(S) AFFORDING COVERAGE INSURER A: Lancer Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR (INSR, WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		BA162874#2	12/06/10	12/06/11	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Issued as per request of holder.

CERTIFICATE HOLDER PENNSYL Pennsylvania Public Utility Commission PO Box 3265 Harrisburg, PA 17105-3265	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

© 1988-2009 ACORD CORPORATION. All rights reserved.

5/25/2011

Main Street Leasing Equipment**Main Street Limo Coaches (LUXURY)**

VEH #	# PASS	VIN #	PLATE	YEAR	MAKE
115	20	1FDAF56F71EC24913	BA58091	2001	FORD KRYSTAL
157	26	IEBJ5Y1215F515259	BA55633	2005	CHEVROLET
158	26	IGBJ5V1245F515126	BA55634	2005	CHEVROLET
169	23	1GBJ5V1245F515482	BA57132	2005	CHEVROLET

Main Street Small Coaches

172	33	1GBJ5V12X6F409233	BA54703	2006	CHEVEROLET
173	33	1GBJ5V1276F412817	BA54052	2006	CHEVEROLET

Main Street MEDIUM Coaches

114	47	1M8SDMRA8RP046763	BA49226	1994	MCI BUS
120	47	1M8SDMPA9TP048290	BA65069	1996	MCI BUS

Main Street LARGE Coaches

181	55	1M8PDMPA3XP052153	BA58089	1999	MCI BUS
188	55	1M8PDMPA5TP047949	BA66729	1996	MCI BUS
196	55	1M8PDMA1XP051843	BA58213	1999	MCI BUS

Main Street LARGE Coaches CONT.

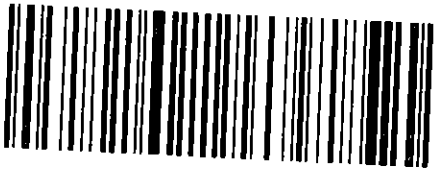
206	55	1M8PDMPASVP049163	BA62467	1997	MCI BUS
212	55	1MP8PDMPA3XP051357	BA63592	1998	MCI BUS
214	55	1M8PDMPA8XP052195	BA63707	1999	MCI BUS
233	55	1M8PDMPA41P053545	BA67637	2001	MCI BUS
235	55	1M8PDMPA1WP050755	BA67638	1998	MCI BUS
237	55	1M86DMPA86P057052	BA67643	2006	MCI BUS
238	72	1HVBBABP7YH287851	BA67645	2000	INTERNATIONAL

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

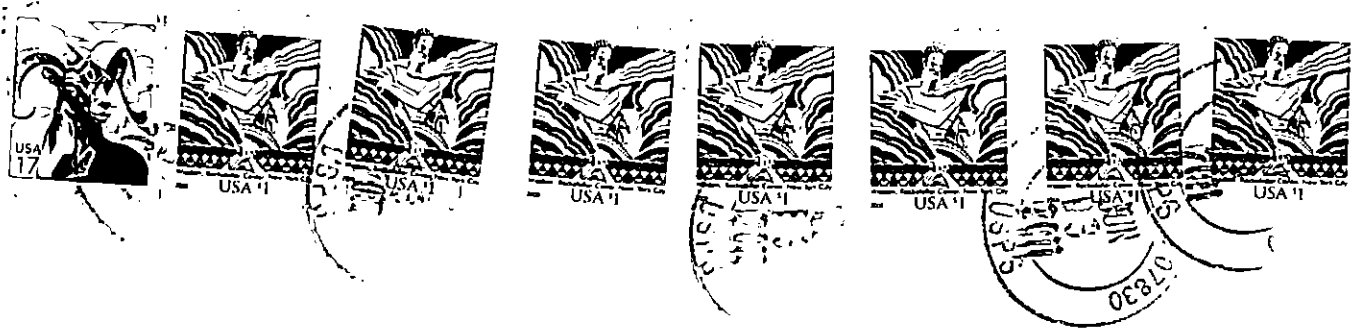
JUN 03 2011

RECEIVED

CERTIFIED MAIL™



7009 0080 0001 7175 3909



From

Kenneth A. Olsen
Attorney At Law
33 Philhower Road
Lebanon, NJ 08833

To

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265