

Pennsylvania Public Utility Commission
PO Box 3265
Harrisburg, PA 17105-3265
(717) 787-1227

Application for Motor Common Carrier of Property

Please complete all parts of the following application. For questions, please call the Commission at (717) 787-3834.

1. **Legal Name of Applicant** (Individual, Partnership, LP, LLP, Corporation, or LLC)

JIMBERLINE LAWN + RV INC.

2. **Trade Name** (if using a fictitious trade name, it must be registered with the Dept. of State)

Fictitious name and Registration number (if applicable)

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

17149 SR 706

Street Address

MONT ROSE PA 18801

City, State and Zip Code

570-278-7888

Telephone Number

County

SUSQUEHANNA

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

Street Address

City, State and Zip Code

5. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address

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

If yes, PUC NO. A- _____

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

TRACTORS + UTILITY VEHICLES

8. Are you one of the following? If yes, check below.

Individual

Partnership

9. Are you a business entity registered with the PA Department of State?

If YES, please check below the type of business that applies to this Application and provide the Entity ID Number given to you by the PA Department of State:

Limited Partnership

Corporation Bureau Entity ID Number

Limited Liability Partnership

Corporation Bureau Entity ID Number

Limited Liability Company

Corporation Bureau Entity ID Number

Corporation – For Profit

3150984

Corporation Bureau Entity ID Number

Corporation – Nonprofit

Corporation Bureau Entity ID Number

Fictitious Name (if applicable)

If NO, contact the PA Department of State and apply according to how you will do business in PA:

PA Corporations (Profit or Non-Profit)

- File for Articles of Incorporation

Foreign Corporations

- File for a Certificate of Authority

- PA Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies - File for an Application of Registration
- Fictitious Name Registration - File **only** if Trade Name will be different than the business name you register with the Department of State

10. Attachment Checklist

- Individual: Certified Check, money order, or check from attorney
 Copy of Current Safety Rating (if available)
- Partnership: Certified Check, money order, or check from attorney
 List of names and addresses of ALL Partners
 Copy of Current Safety Rating (if available)
- Limited Partnership: Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney
 List of names and addresses of ALL Partners
 Copy of Current Safety Rating (if available)
- Limited Liability Partnership: Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney
 List of names and addresses of ALL Partners
 Copy of Current Safety Rating (if available)
- Limited Liability Company: Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney
 List of names and addresses of ALL Members and Title of each Member (even if only one member)
 Copy of Current Safety Rating (if available)
- Corporation – For Profit: Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney
 List of ALL Corporate Officers and Titles, name of each Shareholder and distribution of shares
 Copy of Current Safety Rating (if available)
- Corporation – Non-Profit: Corporation Bureau Entity Number as entered above in #9
 Certified Check, money order, or check from attorney
 List of ALL Corporate Officers and Titles and those serving on Board of Directors
 Copy of Current Safety Rating (if available)

11. Certification

Applicant certifies that it is not now engaged in intrastate transportation of property for compensation between points in Pennsylvania without Pennsylvania Public Utility Commission authorization and will not engage in any transportation not previously authorized by the Pennsylvania Public Utility Commission unless and until such authorization is obtained.

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, LP, or LLP), a member (if LLC), or by any officer (if a corporation).

I/we hereby state that the statements made in this application 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.

Dennis O'Reilly

 (Print Name)

[Signature]

 (Signature)

9-13-2011

 (Date)

**Timberline Lawn & RV, Inc.
RR7, Box 7111, RT. 706E
Montrose, PA 18801
570-278-2888
Fax: 570-278-2898**

Dennis J. O'Reilly, President

TO Whom It May Concern:

As of June 18, 2003, Timberline Lawn & RV, sole proprietorship, incorporated into Timberline Lawn and RV, Inc. Dennis J. O'Reilly, President of corporation is authorized to make business decisions for corporation.



CONTINUATION NOTICE

Erie Insurance Place
9, PA 16530

ERIE INSURANCE EXCHANGE
PIONEER GARAGE/AUTO POLICY

AGENT		ITEM 2. POLICY PERIOD	POLICY NUMBER
AA7855	S.M. SMITH & CO, INC.	09/24/11 TO 09/24/12	Q09 2480096 H7
ITEM 1. NAMED INSURED AND ADDRESS		ITEM 3. OTHER INTEREST	
TIMBERLINE LAWN & RV INC DENNIS O'REILLY PRESIDENT 17149 STATE ROUTE 706 MONTROSE PA 18801-6620		AS LISTED BELOW	

 * YOUR COLLISION COVERAGE AND DEDUCTIBLE APPLY TO PRIVATE PASSENGER *
 * AUTOS YOU, A PARTNER OR EXECUTIVE OFFICER RENT FOR 45 DAYS OR LESS. *
 * THIS IS SUBJECT TO LIMITS, TERMS AND CONDITIONS IN THE POLICY. *

ITEM 4. COVERAGES UNDER THIS POLICY INCLUDE:

- GARAGE LIABILITY PACKAGE, WHICH INCLUDES: GARAGE PREMISES- OPERATIONS/PRODUCTS-COMPLETED OPERATIONS/TENANTS LEGAL LIABILITY/TRUTH IN LENDING & LEASING/ODOMETER/AUTO DAMAGE DISCLOSURE/COMPETITIVE AUTO PARTS LAWS & FEDERAL USED CAR "BUYER'S GUIDE" REGULATION
- AUTOS WE INSURE: ANY AUTO--OWNED, HIRED & NON-OWNED AUTOS
- CUSTOMERS AUTOS - LOCATION(S) SHOWN BELOW
- GARAGE AUTOS PHYSICAL DAMAGE - LOCATION(S) SHOWN BELOW
- DESCRIBED AUTOS - VEHICLES SHOWN BELOW

ITEM 5. INSURANCE IS PROVIDED WHERE A PREMIUM OR "INCL" (INCLUDED) IS SHOWN FOR THE COVERAGE.

STATE	RATING	TERR	TOTAL NUMBER OF EMPLOYEES/PERSONS BY CLASS				
PA	6F		CL 1	CL 1A	CL 2	CL 3	CL 4
			FULL-TIME	4			2
			PART-TIME				

TOTAL NUMBER OF DEALER TAGS: 7

M EQUALS THOUSAND \$

	PREMIUM
DEALERS LIABILITY COVERAGES-	
PERSONAL INJ AND PROPERTY DAMAGE \$1000M/ACC	3,308
PREMISES MEDICAL PAYMENTS \$5M/PERSON	INCL
FIRST PARTY BENEFITS-	
MEDICAL EXPENSE \$10M	114
INCOME LOSS \$1M/MONTH, \$15M MAXIMUM	82
ACCIDENTAL DEATH \$5M	12
FUNERAL BENEFIT \$2.5M	12
UNINSURED MOTORISTS COVERAGE-	
BODILY INJURY \$100M/ACC-UNSTACKED	35
UNDERINSURED MOTORISTS COVERAGE-	
BODILY INJURY \$100M/ACC-UNSTACKED	196

001208

... (SEE REVERSE SIDE) ... RETURNED CHECK FEES WILL BE ADDED TO YOUR ACCOUNT

SAK 07/21/11

STATE: PA LOCATION: 01 RATING TERRITORY: 6F
 CUSTOMERS AUTOS - DIRECT PRIMARY
 COMPREHENSIVE \$ 500 DED/AUTO \$2500 DED/LOSS 359
 LIMIT \$100M
 COLLISION \$1000 DED/AUTO LIMIT \$100M 172
 GARAGE AUTOS - NON-REPORTING
 NON-STANDARD OPEN LOT
 COMPREHENSIVE \$500 DED/AUTO \$2500 DED/LOSS 1,995
 LIMIT \$350,000
 COLLISION \$1000 DED/AUTO LIMIT \$350,000 716

ITEM 4. AUTOS WE INSURE/ALSO INSURED - GARAGE PREMISES-OPERATIONS/PRODUCTS-
 COMPLETED OPERATIONS/TENANTS LEGAL LIABILITY/TRUTH IN LENDING &
 ODOMETER LAW LIABILITY

	ST	TER	SYM	CM	CL	RATING	CLASS
10 08 CHEV TAHOE 4WD	1GNFK13088R247628	PA	6F	G		CPI	
11 09 CHEV PU	1GCHK53669F174188	PA	6F	V4			8
12 11 CHEV PU	1GC4K0C8XBF112978	PA	6F	S2			8

M EQUALS THOUSAND \$	ANNUAL PREMIUMS		
	# 10	# 11	# 12
LIABILITY PROTECTION-			
PERS INJ & PROPERTY DAMAGE \$1000M/ACC	606	276	276
FIRST PARTY BENEFITS-			
MEDICAL EXPENSE \$10M	39	14	14
INCOME LOSS \$1M/MONTH, \$15M MAXIMUM	20	8	8
ACCIDENTAL DEATH \$5M	4	2	2
FUNERAL BENEFIT \$2.5M	2	2	2
UNINSURED MOTORISTS COVERAGE-			
BODILY INJURY \$100M/ACC-UNSTACKED	13	16	16
UNDERINSURED MOTORISTS COVERAGE-			
BODILY INJURY \$100M/ACC-UNSTACKED	46	42	42
PHYSICAL DAMAGE COVERAGES-			
COMPREHENSIVE - \$500 DED	348	94	78
COLLISION - \$1M DED	515	191	126
TOTAL ANNUAL PREMIUM FOR EACH UNIT	1593	645	564
TOTAL ANNUAL POLICY PREMIUM	\$ 9,803		

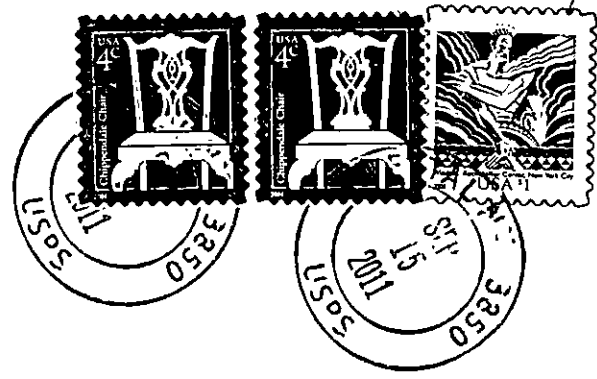
ITEM 6. APPLICABLE POLICY, ENDORSEMENTS, EXCEPTIONS TO DECLARATIONS ITEMS
 ALL AUTOS - GAP 11/96, AGPA01 05/03, AGPB04 07/96, UF2772* 09/11*,
 UF0190* 06/11*, UF2106* 04/08*, AHPU01 11/10*.
 AUTO 10 - AHPU01 11/10*, ABPN01 10/98.
 AUTO 11 - AHPU01 11/10*, ABPN01 10/98.
 AUTO 12 - AHPU01 11/10*, ABPN01 10/98.
 LOCATION 1 - ABPN01 10/98.

PASSIVE RESTRAINT DISCOUNT APPLIES - MULTIPLE AIRBAGS AUTO 10
 ANTI-LOCK BRAKE DISCOUNT APPLIED AUTO 10

Q09 2480096

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