

PO Box 3265  
Harrisburg, PA 17105-3265  
(717) 787-3834 or FAX (717) 787-5961

## 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.

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1. L AND V SMITH INC.  
Full Name of Applicant (Individual, Partnership or Corporation)
2.  Trade Name if Any  
The trade name, if fictitious, \_\_\_\_\_ been registered with the  
(Has or has not)  
Secretary of the Commonwealth on \_\_\_\_\_ Attach a date  
(Date)  
stamped copy of the registration form.
3. 811 Beartown Rd  
Painted Post NY 14870 607-973-2053  
Physical Address (Street, City, County and Zip Code) Telephone Number (Required)
4. \_\_\_\_\_  
Mailing Address if Different from Physical Address
5. \_\_\_\_\_  
Attorney's Name & Telephone Number for this Filing  
(Do not supply Attorney's name if you want all correspondence & notice of process mailed directly to you.)  
\_\_\_\_\_  
Attorney's Address
6. Applicant Does NOT hold interstate operating authority at docket  
(Does or does not)  
number \_\_\_\_\_.
7. Applicant Does Not have a current safety rating issued by the US  
(Does or does not)  
DOT, PA PUC or other state regulatory agency. (Attach Copy)

8. Approximate number of commercial vehicles to be operated in Pennsylvania:  
Owned 2 Leased \_\_\_\_\_.

9. 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 below.)

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(Attach a separate sheet if space provided is not sufficient.)

**Corporation** Organized under the laws of the state of New York  
qualified to do business in Pennsylvania by registering with the Secretary  
of the Commonwealth on September, 17, 2010  
(Date)

Attach a date-stamped copy of the Application for Certificate of Incorporation **or**  
Certificate of Authority. Include a list of corporate officers with titles, names of  
shareholders and number of shares held, and addresses.

10. Attachment Checklist:

**For Corporations Only:**

Date-stamped copy of Application for Certificate of Incorporation or  
Certificate of Authority.

List of corporate officers/titles and distribution of shares.

**For Partnerships Only:**

Copy of Partnership Agreement.

**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.

11. 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 application.**

### Verification of Application

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.

Lucas Smith & Victoria Smith  
(Print Name)

 &   
(Signature) Sept. 23, 2011  
(Date)

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).

PUC 189  
Revised 10/00

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NEW DECLARATIONS

AGENT	ITEM 2. POLICY PERIOD	POLICY NUMBER
NN1067 PIPER INSURANCE AGY INC	04/27/11 TO 04/27/12	Q04 7730229 NY7
ITEM 1. NAMED INSURED AND ADDRESS		ITEM 3. OTHER INTEREST
L AND V SMITH LLC 811 BEARTOWN RD PAINTED POST NY 14870-8586		AS LISTED BELOW

ITEM 4. AUTOS COVERED

AUTO	YR	MAKE	VIN	ST	TER	SYM	CM	CL	RATING	CLASS
10	06	PETE CONVENTIO	1NP5XBEX66N877308	NY	16	16			2	
11	07	PETE CONVENTIO	1NP5LBEXX7N651673	NY	16	15			2	
12	00	HIRED AUTO	IF ANY	NY	16					
13	00	NON-OWNED AUTO	1 - 25 EMPLS	NY	16					

ITEM 5. INSURANCE IS PROVIDED WHERE A PREMIUM, OR INCL, IS SHOWN FOR THE COVERAGE. COVERAGES, LIMITS AND ANNUAL PREMIUMS ARE AS FOLLOWS-

M EQUALS THOUSAND \$	# 10	# 11	# 12	# 13
LIABILITY PROTECTION-				
- BOD INJ & PROP DAMAGE \$1000M/ACC	1604	1604		
HIRED AUTOS LIABILITY-				
BOD INJ & PROP DAMAGE \$1000M/ACC			47	
EMPLOYERS NON-OWNED AUTOS LIABILITY-				
BOD INJ & PROP DAMAGE \$1000M/ACC				66
PERSONAL INJURY PROTECTION (PIP)-				
MANDATORY BASIC ECONOMIC LOSS \$50M				
LESS \$200 FAMILY DED/PER PERSON	74	74		
OPTIONAL BASIC ECONOMIC LOSS (OBEL) \$25M	3	3		
AGGREGATE PIP BENEFITS AVAILABLE \$ 75M				
MAXIMUM MONTHLY WORK LOSS \$2M				
MAX OTHER NECESSARY EXPENSES (PER DAY) \$25				
MAXIMUM DEATH BENEFIT \$2M				
SUPPLEMENTARY UNINSURED/UNDERINSURED MOTORISTS (SUM)*				
BODILY INJURY \$1000M/ACC	56	56		
PHYSICAL DAMAGE COVERAGES-				
COMPREHENSIVE - \$1M DED	458	458		
COLLISION - \$1M DED	1458	1458		
TOTAL ANNUAL PREMIUM FOR EACH AUTO	3653	3653	47	66
NY REQUIRED MOTOR VEHICLE LAW ENFORCEMENT FEE		20		
TOTAL AMOUNT DUE	\$ 7,439			

\*THE MAXIMUM AMOUNT PAYABLE UNDER SUM COVERAGE SHALL BE THE POLICY'S SUM LIMITS REDUCED AND THUS OFFSET BY THE MOTOR VEHICLE BODILY INJURY LIABILITY INSURANCE POLICY OR BOND PAYMENTS RECEIVED FROM, OR ON BEHALF OF, ANY NEGLIGENT PARTY INVOLVED IN THE ACCIDENT, AS SPECIFIED IN THE SUM ENDORSEMENT



Policy Q40-7730029 Declaration effective 04/27/2011

ERIE INSURANCE COMPANY
COMMERCIAL INLAND MARINE POLICY

AMENDED DECLARATIONS 00 \* \* EFFECTIVE 04/27/11
ATTACH THIS TO YOUR POLICY.

REASON FOR AMENDMENT - AMENDED DEDUCTIBLE TO \$1000

NN1067 PIPER INSURANCE AGY INC 04/27/11 TO 04/27/12 Q40 7730029 NY
L AND V SMITH INC
811 BEARTOWN RD
PAINTED POST NY 14870-8586

COVERAGE BEGINS AND ENDS AT 12.01 AM STANDARD TIME AT THE ADDRESS OF THE NAMED INSURED.

WE COVER THE FOLLOWING CLASSES

OF INLAND MARINE PROPERTY

MOTOR TRUCK CARGO COVERAGE

R MML

AMOUNT OF

INSURANCE

\$ 100,000

PREMIUM

\$ INCL

\$ 498.CR

PREMIUM REDUCTION DUE TO THIS CHANGE - - - - -

AMOUNT OF
INSURANCE

SCHEDULE OF COVERAGES BY ITEM

MOTOR TRUCK CARGO COVERAGE - COMPREHENSIVE PERILS

\$1,000. DEDUCTIBLE

UNDER 100 MILE RADIUS OF PAINTED POST, NY

OWNERS COVERAGE

PER VEHICLE

\$ 100,000

PER CASUALTY

\$ 100,000

CARGO CARRIED - STONE, SAND & DIRT
CARRIERS:

2006 PETERBILT TRI-AXLE VIN 1NP5XBEX66N877308

APPLICABLE FORMS - SEE SCHEDULE OF FORMS

SCHEDULE OF FORMS

Table with 3 columns: FORM NUMBER, EDITION DATE, DESCRIPTION. Includes forms like CIMNY, GU50, MT2010C, GU115, GU116, CIMDTFN, IL0952, UF4110, IL0985\*, UF4810.

ERIE INSURANCE COMPANY
COMMERCIAL INLAND MARINE POLICY

AMENDED DECLARATIONS 00 \* \* EFFECTIVE 04/27/11
ATTACH THIS TO YOUR POLICY.

REASON FOR AMENDMENT - AMENDED DEDUCTIBLE TO \$1000

NN1067 PIPER INSURANCE AGY INC 04/27/11 TO 04/27/12 Q40 7730029 NY
L AND V SMITH INC RALPH H KILSDONKBA
811 BEARTOWN RD 12076 STICKLER TOWN RD
PAINTED POST NY 14870-8586 CORNING NY 14830-9221

FORMS

CIMNY 0207 GU50 GU115 GU116 CIMDTFN IL0952 UF4110 IL0985\* UF4810

CERTIFICATE OF INCORPORATION

OF

**L AND V SMITH, INC.**

Under Section 402 of the Business Corporation Law

The undersigned, a natural person of the age of eighteen years or over, desiring to form a corporation pursuant to the provisions of the Business Corporation Law of the State of New York, hereby certifies as follows:

FIRST: The name of the corporation is:

**L AND V SMITH, INC.**

SECOND: The purpose for which it is formed is as follows:

To engage in any lawful act or activity for which corporations may be formed under the Business Corporation Law provided that the corporation is not formed to engage in any act or activity which requires the consent or approval of any state official, department, board agency or other body, without such approval or consent first being obtained.

For the accomplishment of the aforesaid purposes, and in furtherance thereof, the corporation shall have and may exercise all of the powers conferred by the Business Corporation Law upon corporations formed thereunder, subject to any limitations contained in Article 2 of said law or in accordance with the provisions of any other statute of the State of New York.

THIRD: The office of the corporation in the State of New York is to be located in the County of Steuben.

FOURTH: The aggregate number of shares which the corporation shall have the authority to issue is 200 no par value.

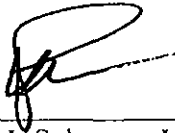
FIFTH: The Secretary of State is designated as agent of the corporation upon whom process against the corporation may be served, and the address to which the Secretary of State shall mail a copy of any process against the corporation served upon him is:

811 Beartown Road  
Painted Post, NY 14871

SIXTH: A director of the corporation shall not be personally liable to the corporation or its shareholders for damages for any breach of duty in such capacity except for liability if a judgment or other final adjudication adverse to a director establishes that his or her acts or omissions were in bad faith or involved intentional misconduct or a knowing violation of law or that the director personally gained in fact a financial profit or other advantage to which he or she was not legally entitled or that the director's acts violated Section 719 of the Business Corporation Law; or liability for any act or omission prior to the adoption of this provision.

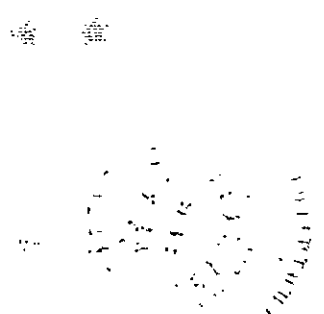
IN WITNESS WHEREOF, I hereunto sign my name and affirm that the statements made herein are true under the penalties of perjury.

**Dated:** September 17, 2010



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Scott J. Schuster, Incorporator  
283 Washington Avenue  
Albany, NY 12206



**CORPORATE DATA  
FOR**

**L AND V SMITH, INC.**

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Date of Incorporation: September 17, 2010

State of Incorporation: New York

Principal Place of Business: 811 Beartown Road, Painted Post, New York 14870

Directors: LUCAS A. SMITH  
VICTORIA M. SMITH

Officers:

President LUCAS A. SMITH  
Vice President NONE  
Secretary VICTORIA M. SMITH  
Treasurer VICTORIA M. SMITH

Bank Accounts:

Fiscal Year:

Annual Meeting Date:

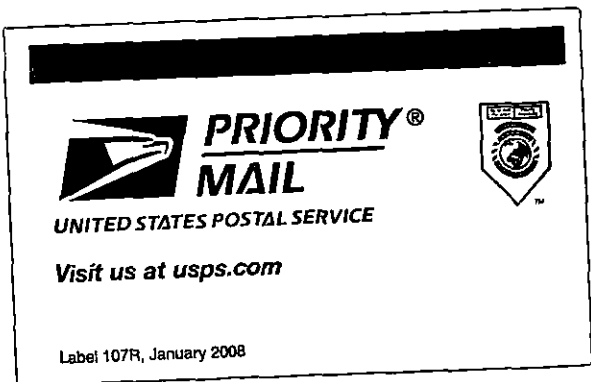
Shareholders:

<u>Name</u>	<u>Number of Shares</u>
LUCAS A. SMITH	20
VICTORIA M. SMITH	20

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L and V Smith Inc.  
607-973-2253  
811 Beartown Rd.  
Painted Post, NY 14870

110



Pennsylvania Public Utility Commission  
PO Box 3265  
Harrisburg, PA 17105-3265



**THIS HAS BEEN SCANNED**  
 ARRIVED IN UNIT  
 ATTEMPTED  
 DELIVERED

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