

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

PRECEDENCE
2012 JUL -6 AM 10:18
PA.P.U.C.
SECRETARY'S BUREAU

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)

Slow Ride Transport LLC

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)

2047 Old Lancaster Pike

Street Address

Reading PA 19608

City, State and Zip Code

717 587 3222

Berks

Telephone Number

County

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

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?**

Feed ingredients; ag commodities

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

4116851

Corporation Bureau Entity ID Number

Corporation – For Profit

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

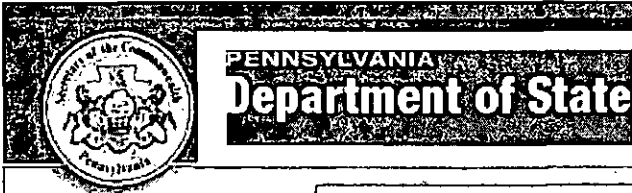
The verification of the application must be completed by the applicant appearing on Line 1 of the application by the named individual, all partners (if a partnership, LP, or LLP), a member (if LLC), or by any officer (if a corporation).

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.

Kurt L. Whitehead
(Print Name)
 Kurt L. Whitehead
(Signature) 6-1-12
(Date)

Ben send \$975.00
Thank You



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Business Entity Filing

History

Date: 7/3/2012 (Select the link above to view the Business Entity's Filing History)

Business Name History

Name	Name Type
Slow Ride Transport, LLC	Current Name

Limited Liability Company - Domestic - Information

Entity Number:	4116851
Status:	Active
Entity Creation Date:	6/21/2012
State of Business:	PA
Registered Office Address:	2047 Old Lancaster Pike Sinking Spring PA 19608 Berks
Mailing Address:	No Address



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Commonwealth of PA Privacy Statement

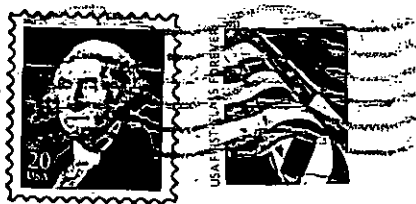


TRUCKER'S
PAPER TRAIL, INC.

745 G East Main Street
New Holland, PA 17557

HARRISBURG PA 171

NOV 20 2008 17105



PA Public Utility Commission
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Harrisburg PA 17105-3265

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