

PO Box 148, Slatington, PA 18080-0148

Business Office: (610) 769-7920

Fax Line: (610) 769-7887

December 4, 2012

RECEIVED

Rosemary Chiavetta, Secretary
Pennsylvania Public Utilities Commission
400 North Street, 2nd Floor
Harrisburg, PA 17120

DEC - 4 2012

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

RE: C2012-2332938

Dear Madam Secretary:

I am in receipt of the above mentioned complaint, dated November 16, 2012. Due to financial hardships, we have laid off most employees and will be operating with minimal staff. Due to the cancellation of the insurance, we were in a position to apply for new insurance. It took a few weeks to obtain, however we have secured insurance with Knightbrook Insurance, effective on November 27, 2012. Our intention is to continue our service within our service area.

The insurance company is to file the Form E on December 4, 2012 to be compliant.

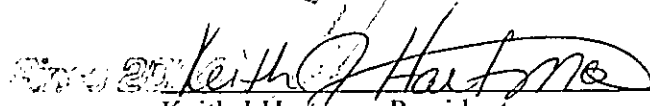
I would like to request that the penalty of \$500.00 be waived. The services provided by Northern Lehigh Ambulance Service, Inc. are crucial to the residents we serve. This would also be an additional financial hardship should we have to pay this penalty.

Should you have any questions, you may contact me at (484) 357-6326.

VERIFICATION

I, Keith J. Hartman, President of Northern Lehigh Ambulance Service, Inc. hereby state that the fact above set forth are true and correct to the best of my knowledge, information and belief and that I expect that I will be able to prove the same at any hearing held in this matter. I understand that the statements herein are made subject to penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

Date: December 4, 2012


Keith J. Hartman, President

Northern Lehigh Ambulance Service, Inc.

PENNSYLVANIA FINANCIAL RESPONSIBILITY IDENTIFICATION CARD

NAIC NUMBER

COMPANY

COMMERCIAL

PERSONAL

13722

KnightBrook Insurance, Co

POLICY NUMBER

EFFECTIVE DATE

NOT VALID MORE THAN ONE (1)
YEAR FROM EFFECTIVE DATE

150000119

11/27/2012

YEAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

2001

Chevrolet Express

1GAHG39R411131213

AGENCY/COMPANY ISSUING CARD

Beneficial Insurance Services

AGENCY/COMPANY TELEPHONE NUMBER

(610) 356-8600

INSURED

**Northern Lehigh Ambulance Service, Inc.
P.O. Box 148**

Slatington, PA 18080

SEE IMPORTANT NOTICE ON REVERSE SIDE

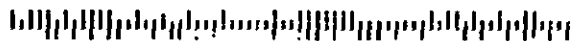


Northern Lehigh Ambulance
 PO Box 148
 Slatington PA 18080-0148

CERTIFIED MAIL™



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Rosemary Chiavetta, Secretary
 Pa Public Utilities Commission
 400 North St Floor 2nd
 Harrisburg PA 17120-0093



\$5.750
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