



COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA 17105-3265

IN REPLY PLEASE  
REFER TO OUR FILE

August 9, 1993

YELLOW CAB COMPANY OF LEBANON, INC  
28 E CUMBERLAND STREET  
LEBANON PA 17042

*File Room*

**DOCUMENT  
FOLDER**

Re: A-00023233

Gentlemen:

During the review of your recent rate increase, it was noticed that the sample log sheets which were submitted in support of the proposed increase, did not contain complete information as required by Pennsylvania Public Utility Commission regulations.

The regulations require drivers of call or demand vehicles to keep a log sheet or manifest for each shift operated. Drivers shall fill out the log sheets with the following information:

- (1) The date.
- (2) The time he commenced the shift and the time he ended the shift and ceased driving.
- (3) The vehicle identification number.
- (4) The times and places of origin and destination of each trip including the odometer or meter mileage at the origin and destination of each passenger trip.
- (5) The number of passengers and the fare collected on each trip, indicating separately each fare collected from each passenger or party of passengers sharing the ride.
- (6) Each trip on which packages were delivered and the charge for the trip.
- (7) The meter readings at the beginning and end of each shift, if applicable.

- (8) The name and number of the driver.
- (9) The signature of the driver attesting to the accuracy of the data recorded.
- (10) Other information as may be required by this title.

The log sheets shall be filled out on a form supplied by the certificate holder and should be retained for at least two (2) years.

Your logs appear to be lacking the notation of mileage for each trip, i.e. mileage at origin and mileage at destination.

Your tariff contains a surcharge for trips after 10:00 PM and also an additional passenger charge. Your log sheets should have a space to record these items separately.

Failure to keep this information means the carrier cannot provide the Commission with sufficient financial and operational data in the filing of annual reports, rate increase proposals, etc.

Noncompliance with Commission regulations may result in future annual reports being returned for completion and the Commission taking some type of enforcement action against the responsible certificate holder.

We are attaching herewith a copy of a blank log sheet that outlines the various charges that can be charged on various trips. This is being provided for your information. Perhaps you can utilize some aspects of this form in revising your current log sheets.

If you have any questions regarding this matter, please contact me at (717) 787-6872.

Very truly yours,



John C. Keiter, Chief  
Financial Review Section  
Finance Division

JCK:jas

ATTACHMENTS

cc: File Room

## DRIVER LOG SHEET

COMPANY: \_\_\_\_\_ CERTIFICATE NO: A DATE: \_\_\_\_\_

NAME OF DRIVER (PRINT)	CAB NO.	DRIVERS NO.		
DRIVER'S LICENSE NO.	SHIFT TIMES			
	START:	STOP		

TRIP NO.	NO. PASS.	FROM	TO	TIME OF CALL		MILEAGE *			METER CHARGE	NIGHT CHARGE	EXTRA PASS.	TOTAL PAID
				BEGAN	ENDED	BEGAN	ENDED					
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
<b>TOTALS</b>												

\* MILEAGE EITHER BY ODOMETER OR METER

(carried over to back page)

### DRIVER LOG SHEET (cont'd.)

TRIP NO.	NO. PASS.	FROM	TO	TIME OF CALL		MILEAGE %		METER CHARGE	NIGHT CHARGE	EXTRA PAYS	TOTAL PAID
				BEGAN	ENDED	BEGAN	ENDED				
21											
22											
23											
24											
25											
26											
27											
28											
29											
30											

#### EQUIPMENT TO BE CHECKED

Check These Items	OK	Not OK	Check These Items	OK	Not OK
Head Lights			Brakes		
Rear Side Lights			Wipers		
Rear & Side Mirror			Turn Signals—Front		
Horn			Turn Signals—Rear		
All Radio Equipment			Tire Pressure		

BACK PAGE TOTALS

FRONT PAGE TOTALS

COMBINED TOTALS

IF INVOLVED IN AN ACCIDENT  
COMPLETE INFORMATION BELOW

Other Vehicle Make \_\_\_\_\_ Year \_\_\_\_\_ License Number \_\_\_\_\_  
 Insured? Yes \_\_\_ No \_\_\_ Insurance Co. \_\_\_\_\_  
 Time \_\_\_\_\_ Policy No. \_\_\_\_\_  
 Accident Place \_\_\_\_\_ Hospital \_\_\_\_\_  
 Doctor \_\_\_\_\_ Policy Name \_\_\_\_\_ District \_\_\_\_\_ Badge No. \_\_\_\_\_

1. Were you in an accident?  Yes  No  
 If yes, complete required information

2. If you purchased fuel and/or oil, complete and attach receipt(s):

Number of gallons \_\_\_\_\_ Total Paid \$ \_\_\_\_\_  
 Number of quarts of oil \_\_\_\_\_ Total Paid \$ \_\_\_\_\_

PERSON	INJURED YES/NO	NAME	COMPLETE ADDRESS TOWNSHIP & ADDRESS	PHONE
OWNER				
DRIVER				
PASS.				
PASS.				
CAB PASS				
CAB PASS				
CAB PASS				

**1. REPORT DATE:**

May 5, 1997

**2. BUREAU AGENDA NO.:**

MAY-97-TS-MC-98 REV.

**3. BUREAU:**

Transportation and Safety

**4. SECTION(S):**

Applications Review Section

**5. PUBLIC MEETING DATE:**

May 8, 1997

**6. APPROVED BY:**

Director: Nicely 3-3846

Supervisor: Marzolf 3-5945

**7. PERSONS IN CHARGE:**

Hawk 3-1763

**8. DOCKET NO.:** A-00023233

A-00099450

**9. (a) CAPTION (abbreviate if more than 4 lines)****(b) Short summary of history & facts, documents & briefs****(c) Recommendation****(a) YELLOW CAB COMPANY OF LEBANON, INC.**

A-00023233

**AND****SUPER CAB, INC.**

A-00099450

**Lebanon, Lebanon County****INCREASE IN RATES**

(b) Yellow Cab Company of Lebanon, Inc., and Super Cab, Inc., Lebanon, Lebanon County, furnishing call or demand taxicab service in the city of Lebanon; the townships of North and West Cornwall, North and South Lebanon, Annville, Heidleberg and Bethel; the boroughs of Cornwall, Myerstown, Jonestown, Cleona and the Indiantown Gap Military Reservation, Lebanon County; also township of Derry and the borough of Hummelstown, Dauphin County, have filed Tariff Call or Demand-PA P.U.C. No. 17 and Tariff Call or Demand-PA P.U.C. No. 12 respectively, proposing increases in fares and charges calculated by the carrier to produce an aggregate \$17,250 in additional PUC revenues in the projected year, reflecting a consolidate operating ratio of 86.7%

(c) Staff recommends that Tariff Call or Demand-PA P.U.C. No. 17 as filed by Yellow Cab Co. of Lebanon and Tariff Call or Demand-PA P.U.C. No. 12 filed by Super Cab, Inc., be permitted to become effective May 9, 1997.

**10. MOTION BY:** Commissioner Chm. Quain Commissioner Hanger - Yes

Commissioner Rolka - Yes

**SECONDED:** Commissioner Bloom

Commissioner Brownell - Yes

**CONTENT OF MOTION:** Staff recommendation adopted.

BTL

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17105-3265  
JANUARY 16, 2004

IN REPLY PLEASE  
REFER TO OUR FILE  
A-00023233

YELLOW CAB CO. OF LEBANON  
28 E. CUMBERLAND STREET  
LEBANON PA 17042

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE JANUARY 20, 2004

FOR EXPIRATION OR CANCELLATION OF  
BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE

This is to notify you that as of the above effective date, the authority granted to you by the Pennsylvania Public Utility Commission is hereby suspended as more thoroughly described on the attached sheet.

Please be advised that you may not operate until we have received evidence of renewed insurance coverage.

Upon receipt and acceptance of the required certificate of Insurance, you will receive written notification that the suspension is lifted and that you may resume operations.

Very truly yours,

**DOCKETED**  
JAN 21 2004

*James J. McNulty*

James J. McNulty  
Secretary

cc: Enforcement Division

**DOCUMENT  
FOLDER**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17105-3265  
JANUARY 28, 2004

IN REPLY PLEASE  
REFER TO OUR FILE  
A-00023233

YELLOW CAB CO. OF LEBANON  
28 E. CUMBERLAND STREET  
LEBANON PA 17042

NOTICE TO LIFT SUSPENSION

This is to notify you that we have received proof of insurance coverage. Therefore, you may disregard the Notice of Suspension previously issued.

Very truly yours,  
Insurance Unit  
Financial Responsibility Section  
Bureau of Transportation and Safety

DOCKETED  
JAN 30 2004

DOCUMENT  
FOLDER