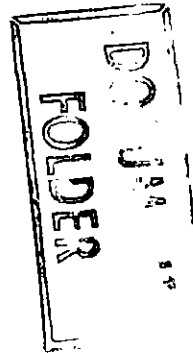


COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
JUNE 27, 1990

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602



IN REPLY PLEASE
REFER TO OUR FILE

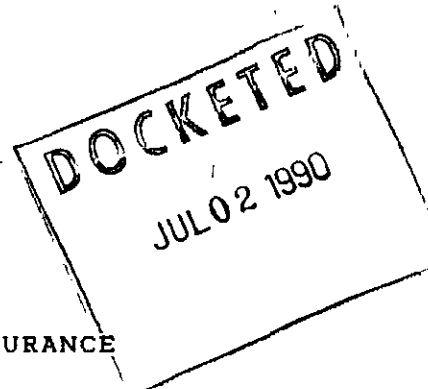
A-00109837

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE JULY 01, 1990

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,


Jerry Rich
Secretary

cc: Enforcement Division

Certified Mail

SENDER: Complete items 1 and 2 when additional services are desired and complete items 3 and 4.

Put your address in "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

<p>3. Article Addressed to:</p> <p>A-00105837</p> <p>PIONEER TRANSPORT, INC.</p>	<p>4. Article Number</p> <p>044336</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured</p> <p><input type="checkbox"/> Certified <input type="checkbox"/> COD</p> <p><input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and <u>DATE DELIVERED</u>.</p>
<p>5. Signature - Address</p> <p>X</p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature - Agent</p> <p>X <i>Winnie Liberty</i></p>	
<p>7. Date of Delivery</p> <p><i>6/28/90</i></p>	

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
JULY 03, 1990

IN REPLY PLEASE
REFER TO OUR FILE

A-00105837

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602

DOCKETED

JUL - 6 1990

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,

James J. McCarthy
Insurance Section
(717) 787-1227

cc: Enforcement Division

DOCUMENT
FOLDER

File
A 105837

October 12, 1990

Mr. Joseph E. Lauver
Administrative Supervisor
Bureau of Safety & Compliance
Pennsylvania Public Utility Commission
P. O. Box 3265
Harrisburg, PA 17120

RE: RC 43381 & 48336

Dear Mr. Lauver:

Enclosed please find a copy of my letter to all Pioneer Terminal Managers in regards to the display of placards.

We will be monitoring this situation internally as well.

I trust this will meet with your approval.

Sincerely,

Ray Weygand Jr.

Ray Weygand Jr.
Traffic Manager

RW/rc

DOCUMENT
FOLDER

RECEIVED
OCT 16 1990
Safety & Compliance
Operational Division

PIONEER TRANSPORT, INC.

Date: 10/12/90
To: All Terminal Managers
From: Ray Weygand, Jr. - Traffic Manager
RE: Display of Placards

It has been brought to my attention by the Pennsylvania Public Utility Commission that our placards are not being displayed by trip leased operators.

Effective immediately, all Pioneer trip lease operators must have the required placards properly displayed before they leave your yard.

Failure to comply may result in penalties imposed by the Public Utility Commission.

Please post.

/kb

RECEIVED
OCT 16 1990
Safety & Compliance
Established October 1988



ATTACHMENT

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P. O. BOX 3265, HARRISBURG, Pa. 17120

September 27, 1990

IN REPLY PLEASE
REFER TO OUR FILE
A. 105837
R.C. 48336

Pioneer Transport, Inc.
543 Strasburg Pike
Lancaster, PA 17602

RECEIVED
OCT 16 1990
Safety & Compliance
Technical Division

Gentlemen:

This is to advise you that on or about July 17, 1990, a certain motor vehicle, herein identified as a Marmon truck, bearing Pennsylvania License No. AA94132, Vehicle Identification No. B1004302, was checked by Ralph Cooper, a duly authorized enforcement officer of this Commission, at Chester County, Pennsylvania.

It was found that you failed to display your name and certificate of public convenience number upon the above described vehicle as is required by 52 Pa. Code §31.33(b).

In light of the above, you are hereby directed to comply with the aforesaid regulation within fifteen (15) days of receipt of this letter and submit proof of compliance to this office forthwith. Failure to comply may subject you to the penalties as may be imposed by this Commission for violation of our regulations.

Very truly yours,

Joseph E. Lauver
Administrative Supervisor
Bureau of Safety & Compliance
(717) 783-1948

WW:mac

cc: Philadelphia



ATTACHMENT
 COMMONWEALTH OF PENNSYLVANIA
 PENNSYLVANIA PUBLIC UTILITY COMMISSION
 P. O. BOX 3265, HARRISBURG, Pa. 17120

September 26, 1990

IN REPLY PLEASE
 REFER TO OUR FILE

A-00105837
 R.C. 43381

Pioneer Transport, Inc.
 543 Strasburg Pike
 Lancaster, PA 17602

RECEIVED
 OCT 16 1990
 Safety & Compliance
 Technical Division

Gentlemen:

This is to advise you that on or about December 6, 1989, a certain motor vehicle, herein identified as a 1977 Kenworth truck, bearing Pennsylvania License No. AA67029, Vehicle Identification No. 253747K, was checked by David Loucks, a duly authorized enforcement officer of this Commission, at Route 81, Hazleton, Luzerne County, Pennsylvania.

It was found that the name and address of the motor carrier and the number of the certificate of public convenience were not on each side of the vehicle as required by 52 Pa. Code §31.33(b).

In light of the above, you are hereby directed to comply with the aforesaid regulation(s) within fifteen (15) days of receipt of this letter and submit proof of compliance to this office forthwith. Failure to comply may subject you to the penalties as may be imposed by this Commission for violation of our regulations.

Very truly yours,

Joseph E. Lauver
 Administrative Supervisor
 Bureau of Safety & Compliance
 (717) 783-1948

WMW:dk

cc: Scranton District Office/Loucks

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

APRIL 08 1994

RECEIVED

9: APR -8 AM 11:24

PA. P. U. C.
INFO. CONTROL DIV.

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE APRIL 12, 1994

FOR EXPIRATION OR CANCELLATION OF
CARGO 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.

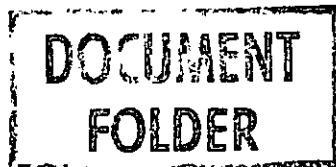
Very truly yours,



John G. Alford
Secretary

cc: Enforcement Division

Certified Mail



DOCKETED
APR 12 1994

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
A-00105837

PIONEER TRANSPORT, INC.

4a. Article Number
044585

- 4b. Service Type
- Registered Insured
 - Certified COD
 - Express Mail Return Receipt for Merchandise

7. Date of Delivery
1/11/94 BK

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
Debbie Resala

Thank you for using Return Receipt Service.

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

APRIL 19, 1994

RECEIVED

96 APR 19 AM 11:30

PA. P. U. C.
INFO. CONTROL DIV.

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602

NOTICE TO LIFT SUSPENSION

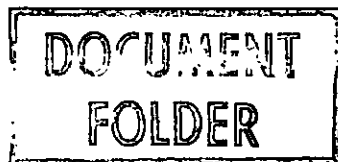
This is to notify you that we have received proof of insurance coverage. Therefore, you may disregard the Notice of Suspension previously issued.

Very truly yours,

Julie Byndas

Insurance Section
(717) 787-1227

cc: Enforcement Division



DOCKETED
APR 20 1994

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
JULY 29, 1994

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602

DOCKETED
AUG 3 1994

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

RECEIVED
94 AUG -2 AM 10:01
PA. P. U. C. DIV.
INFO. CONTROL DIV.

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE AUGUST 02, 1994

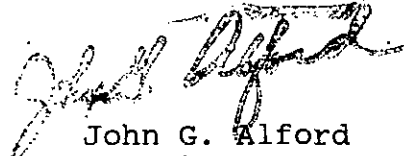
FOR EXPIRATION OR CANCELLATION OF
BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE.

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,


John G. Alford
Secretary

cc: Enforcement Division

Certified Mail

DOCUMENT
FOLDER

BTG

20

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

A-105837

Pioneer Transport
Inc.

4a. Article Number

044152

4b. Service Type

- Registered Insured
- Certified COD
- Express Mail Return Receipt for Merchandise

7. Date of Delivery

8-4-94 R.I.S.M.

5. Signature (Addressee)

Sharon Scheid

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Thank you for using Return Receipt Service.

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
AUGUST 08, 1994

PIONEER TRANSPORT, INC.
543 STRASBURG PIKE
LANCASTER PA 17602

DOCKETED
AUG 8 1994

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837
RECEIVED
AUG 9 11:02
INFO. CONTROL DIV.

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,

Julia Byndas

Insurance Section
(717) 787-1227

cc: Enforcement Division

DOCUMENT
FOLDER

ATL

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
NOVEMBER 02, 1995

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE MAY 22, 1995

FOR EXPIRATION OR CANCELLATION OF
CARGO 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,



John G. Alford
Secretary

DOCUMENT
FOLDER

cc: Enforcement Division

Certified Mail

DOCKETED
NOV 09 1995

BTL

RECEIVED

NOV 03 1995

PUBLIC UTILITY COMMISSION
SECRETARY BUREAU

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on reverse of this form so that we can return this card to you.
- Attach this form to the front of mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

A-00105837

KJR

Pioneer Transport, Inc.

4a. Article Number

P 916 264 523

4b. Service Type

CERTIFIED

7. Date of Delivery

1/2

5. Signature -- (Addressee)

8. Addressee's Address
(ONLY if requested and fee paid.)

6. Signature -- (Agent)

PS Form 3811, November 1990

DOMESTIC RETURN RECEIPT

RECEIVED

NOV 1990

NOV 1990

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
DECEMBER 27, 1995

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

RECEIVED
DEC 27 1995

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

SECRETARY'S OFFICE
Public Utility Commission

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE DECEMBER 31, 1995

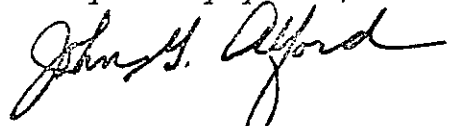
FOR EXPIRATION OR CANCELLATION OF
BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE

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,



John G. Alford
Secretary

cc: Enforcement Division

Certified Mail

DOCKETED

JAN 04 1996

DOCUMENT
FOLDER

018

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

A-00105837

Pioneer TRANSPORT, Inc.

4a. Article Number

P 918 085 105

4b. Service Type

CERTIFIED
5-15-95

7. Date of Delivery

12-29-95 RC

5. Signature - (Addressee)

8. Addressee's Address

(ONLY if requested and fee paid.)

6. Signature - (Agent)

[Handwritten Signature]

PS Form 3811, November 1990

DOMESTIC RETURN RECEIPT

12-29-95
9305

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
FEBRUARY 13, 1996

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

DOCUMENT
FOLDER

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

DUCKETED

FEB 16 1996

KJR

RECEIVED
FEB 15 1996
PUBLIC UTILITY COMMISSION
SECRETARYS BUREAU

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
FEBRUARY 08, 2000

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

DOCUMENT
FOLDER

DOCKETED

FEB 09 2000

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE FEBRUARY 11, 2000

FOR EXPIRATION OR CANCELLATION OF
CARGO LIABILITY INSURANCE

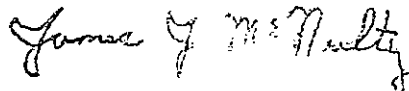
This is to notify you that as of the above effective date, the authority granted to you by the Pennsylvania Public Utility Commission is hereby suspended as more thoroughly described on the attached sheet.

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.

EEF

Very truly yours,



James J. McNulty
Secretary

cc: Enforcement Division

Certified Mail

SENDER:

- Check box at right if you require restricted delivery.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PIONEER TRANS. INC.
A-00105837

4a. Article Number

P 971 201 863

4b. Special Service REGISTERED

7. Date of Delivery

8. Addressee's Address

5. Received By: (Print Name)

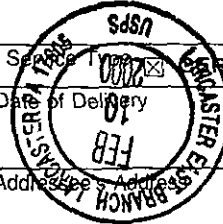
6. Signature: (Addressee or Agent)

X *Cory Fisher*

PS Form 3811, December 1994

SRB

Domestic Return Receipt



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
MARCH 28, 2000

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE APRIL 01, 2000

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.

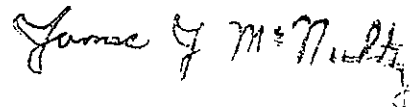
Please be advised that you may not operate until we have received evidence of renewed insurance coverage.

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.

EEF

DOCUMENT
FOLDER

Very truly yours,



James J. McNulty
Secretary

cc: Enforcement Division

Certified Mail

DOCKETED
MAR 29 2000

SENDER:

- Check box at right if you require restricted delivery.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PIONEER TRANSPORT INC.
A-00105837

4a. Article Number

P 972 156 154

4b. Service Type

CERTIFIED

7. Date of Delivery

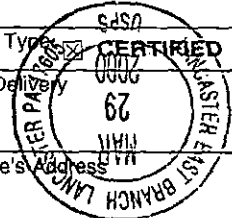
67

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Ray [Signature]*

8. Addressee's Address



EEF

PS Form 3811, December 1994

Domestic Return Receipt

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
APRIL 05, 2000

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

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
APR 05 2000

DOCUMENT
FOLDER

EEF

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17105-3265
MAY 08, 2000

IN REPLY PLEASE
REFER TO OUR FILE
A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER PA 17605

DOCKETED
MAY 09 2000

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

DOCUMENT
FOLDER



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

IN REPLY PLEASE
REFER TO OUR FILE

September 28, 2010

A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER, PA 17605

ORIGINAL

NOTICE OF SUSPENSION OF PUC OPERATING AUTHORITY

Effective 10/01/2010

**For expiration/cancellation of
Liability**

As of 10/01/2010, your PUC operating authority is **SUSPENDED** due to your failure to maintain evidence of insurance on file with this Commission. **You may not operate while under suspension.** Operating while under suspension is subject to prosecution, which may result in cancellation of your authority.

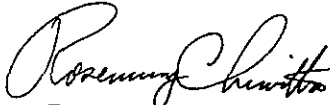
Your insurer must file appropriate evidence of insurance with the Commission. Appropriate evidence of insurance is a FORM E for bodily injury and property damage liability insurance, a FORM H for cargo liability insurance, or a Surety Bond. These forms must be filed with the PUC by the Insurance Company or Agent, **not by you.** Incomplete forms, incorrect forms and fax transmittals will NOT be accepted. The Commission does permit electronic filing of these forms.

If this Commission does not receive acceptable evidence of insurance within ten (10) days of the suspension date, a Complaint will be instituted against you for failure to comply with this Commission's insurance requirements. The Complaint may result in the cancellation of your PUC operating authority.

If your insurer timely files appropriate evidence of insurance, you will receive Notice from the PUC authorizing you to resume operations. **You may not resume operations until you receive this Notice from the Commission.**

If you believe that you have received this Notice of Suspension in error or if you have any questions regarding the suspension of your authority, please contact the Compliance Office of the Motor Carrier Services and Enforcement Division in the Bureau of Transportation and Safety at 717-787-1227.

Very truly yours,


Rosemary Chiavetta
Secretary

pc: Secretary's Bureau - File
T&S Bureau - Safety Office
T&S Bureau - Compliance Office, Insurance Section



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

IN REPLY PLEASE
REFER TO OUR FILE

October 02, 2010

A-00105837

PIONEER TRANSPORT, INC.
P.O. BOX 11388
LANCASTER, PA 17605

ORIGINAL

**NOTICE TO LIFT SUSPENSION
OF PUC OPERATING AUTHORITY**

This is to notify you that, as of the above date, the suspension of your operating authority is hereby **lifted**. We have received evidence of Liability insurance coverage. **You may immediately resume operations.**

If you have any questions regarding this notice, please contact the Compliance Office of the Motor Carrier Services and Enforcement Division in the Bureau of Transportation and Safety at 717-787-1227.

Very truly yours,

Rosemary Chiavetta
Secretary

pc: Secretary's Bureau - File
T&S Bureau - Safety Office
T&S Bureau - Compliance Office, Insurance Section

END