

**Pennsylvania Public Utility Commission
Bureau of Transportation & Safety
PO Box 3265
Harrisburg, PA 17105-3265
(717) 787-3834**

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.

1. **Legal Name of Applicant** (Individual, Partnership or Corporation)

LATSHAW WATER DELIVERY LLC

2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

3. **Physical Address** (do not use PO Box)

390 Quarry Drive
Street Address

Greensburg PA 15601
City, State and Zip Code

724-668-2382
Telephone Number

Westmoreland
County

4. **Mailing Address** (if different from Physical Address)

Street Address

City, State and Zip Code

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2013 JUN -3 AM 11:33
PA P.U.C.
SECRETARY'S BUREAU

5. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address

6. Does applicant currently hold PA PUC authority? Yes **No** (circle one)

If yes, enter current docket number A-00 _____

7. What type of commodity do you intend to transport? WATER

8. **Form of Organization** (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.

Corporation

Attach a copy of the Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration. Include a list of all corporate officers/titles and distribution of shares.



LLC or LLP

Attach a copy of the Certificate of Incorporation, Certificate of Authority, or foreign corporation registration. Include a list of all members (even if there is only one member) and title of each member.

9. **Attachment Checklist**

For Corporations:

- Copy of Certificate of Incorporation, Certificate of Authority, or the foreign corporation registration.
- List of all corporate officers/titles, names of shareholders and distribution of shares.

For LLPs and LLCs Only:

- Copy of Certificate of Incorporation, Certificate of Authority, or foreign corporation registration.
- List of all members (even if there is only one member) and title of each member.

For Partnerships Only:

- Copy of Partnership Agreement.
- List the names and addresses of ALL partners.

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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.

10. 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 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) or by the President or Secretary (if a corporation).

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.

(Print Name) Joseph L Pinsky Jr

4/22/2013
- 3 -



Policy Q05-0330734 Declaration effective 05/03/2013

COMMERCIAL AUTO POLICY
NON-FLEET

REVISED DECLARATIONS
AA6639 BERKEPILE INS AGY INC 05/03/13 TO 05/03/14 Q05 0330734 P7
LATSHAW WATER DELIVERY LLC AS LISTED BELOW
390 QUARRY DR
GREENSBURG PA 15601-8465

* YOUR COLLISION COVERAGE AND DEDUCTIBLE APPLY TO PRIVATE PASSENGER *
* AUTOS YOU, A PARTNER OR EXECUTIVE OFFICER RENT FOR 45 DAYS OR LESS. *
* THIS IS SUBJECT TO LIMITS, TERMS AND CONDITIONS IN THE POLICY. *

ITEM 4. AUTOS COVERED

Table with columns: AUTO, YR, MAKE, VIN, ST, TER, SYM, CM, CL, RATING, CLASS. Rows include Ford Conventio, Mack Tank Trk, and Unit Trlr.

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

Table listing insurance coverages and annual premiums for items 10, 11, and 12. Includes Liability Protection, Uninsured Motorists Coverage, and Physical Damage Coverages.

ITEM 6. APPLICABLE POLICY, ENDORSEMENTS, EXCEPTIONS TO DECLARATIONS ITEMS
ALL AUTOS - CAP 04/96, ACPA01 05/13*, UF0190* 06/11, UFB304* 05/13*,
UF2106* 04/08.

AUTO 10 - AHPU01 11/11, ABPN01 10/98.
AUTO 11 - AHPU01 11/11, ABPN01 10/98.

MISCELLANEOUS INFORMATION

TRUCKS TRACTORS TRAILERS RADIUS OF OPERATIONS
50 MILES UNLESS OTHERWISE SPECIFIED

ITEM 7. EACH AUTO WE INSURE WILL BE PRINCIPALLY GARAGED AT THE ADDRESS SHOWN
IN ITEM 1, UNLESS ANOTHER ADDRESS IS SHOWN BELOW.

ITEM 8. EACH AUTO WE INSURE IS USED IN THE BUSINESS AS SHOWN BELOW.

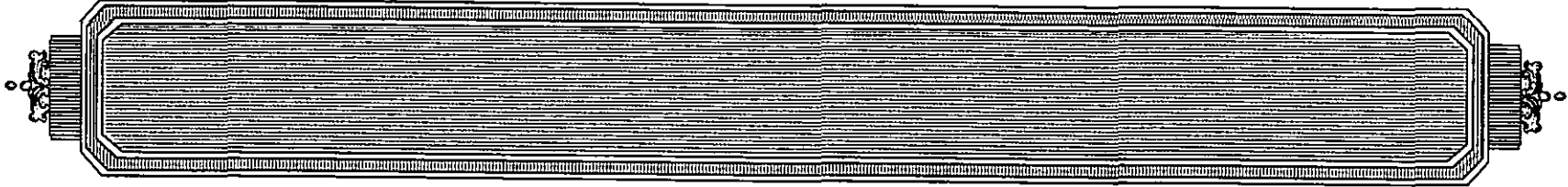
ITEM 8 WATER DEALERS - BULK DELIVERY (NOT FOR HIRE)

ITEM 9. UNLESS OTHERWISE INDICATED BELOW, THE NAMED INSURED IS THE SOLE
OWNER OF EACH AUTO WE INSURE.

Table comparing Lienholder information for Auto 10 and Auto 12, including address and location details.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE OR DEFRAUD ANY INSURER
FILES AN APPLICATION OR CLAIM CONTAINING ANY FALSE, INCOMPLETE OR
MISLEADING INFORMATION SHALL, UPON CONVICTION, BE SUBJECT TO IMPRISONMENT

NUMBER



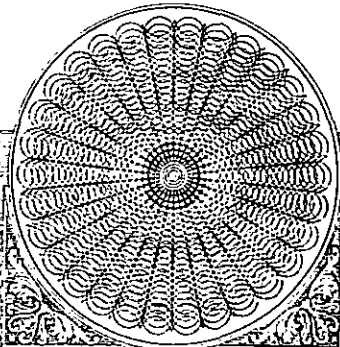
MEMBERSHIP CERTIFICATE

This Certifies that JOSEPH L PINSKEY JR is the registered holder of LATSHAW WATER DELIVERY LLC Membership Interest(s) of the above named Company, transferable only on the books of the Company by the holder hereof in person or by Attorney upon surrender of this Certificate properly endorsed and in accordance with the terms and conditions of the Articles of Organization and the Operating Agreement of the Company, as amended to the date of transfer, copies of which may be inspected and copied during normal business hours at the principal office of the Company.

In Witness Whereof, the said Company has caused this Certificate to be signed by its duly authorized Manager(s) or Officer(s) and its Seal to be hereunto affixed

this 13 day

of APRIL A.D. 2012



Date of this notice: 04-13-2012

Employer Identification Number:
45-5038626

Form: SS-4

Number of this notice: CP 575 G

LATSHAW WATER DELIVERY LLC
JOSEPH L PINSKEY JR SOLE MBR
390 QUARRY DR
GREENSBURG, PA 15601

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 45-5038626. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.

**PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU**

**Certificate of Organization
Domestic Limited Liability Company
(15 Pa.C.S. § 8913)**

Name Eileen Gallo, Legalzoom.com, Inc.		
Address 100 W. Broadway, Suite 100.		
City Glendale, CA	State CA	Zip Code 91210

Commonwealth of Pennsylvania
CERTIFICATE OF ORGANIZATION 3 Page(s)



Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (<i>designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation</i>): Latshaw Water Delivery LLC
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2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:				
(a) Number and Street 390 Quarry Drive,	City Greensburg,	State Pennsylvania	Zip 15601,	County Westmoreland
(b) Name of Commercial Registered Office Provider c/o:				County

3. The name and address, including street and number, if any, of each organizer is (<i>all organizers must sign on page 2</i>):	
Name Eileen Gallo, Legalzoom.com, Inc.	Address 101 N. Brand Blvd., 11th Floor, Glendale, CA 91203

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PA DEPT OF STATE

4. *Strike out if Inapplicable term*
A member's interest in the company is to be evidenced by a certificate of membership interest.

~~5. *Strike out if Inapplicable:*
Management of the company is vested in a manager or managers.~~

6. The specified effective date, if any is: _____
month date year hour, if any

~~7. *Strike out if Inapplicable:* The company is a restricted professional company organized to render the following restricted professional services:~~

8. For additional provisions of the certificate, if any, attach an 8½ x 11 sheet.

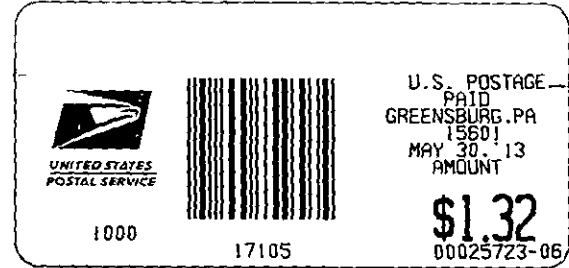
IN TESTIMONY WHEREOF, the organizer(s) has (have)
signed this Certificate of Organization this
23rd day of March, 2012.

Eileen Gallo, Organizer, Legalzoom.com, Inc.

Signature

Signature

390 QUARRY DR
GREENSBURG, PA 15601



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P.O. BOX 3265
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