

May 7, 1983

Application of Pitt-Ohio Express, Inc., a corp. of the Commonwealth
of Pennsylvania

A. 102471

Pitt-Ohio Express, Inc.
24-27 & A.V. R. R.
Pittsburgh, Pennsylvania 15222

Gentlemen:

NOTICE OF SUSPENSION

- Bodily Injury and Property Damage
- Cargo

This is to notify you that effective as of the above date your Certificate of Public Convenience or Permit is suspended because of your failure to have filed with this Commission a Certificate of Insurance to renew expired or cancelled insurance as indicated above. Operation without insurance coverage is subject to prosecution as unauthorized operation.

If evidence of insurance coverage is not received by the Commission within ten (10) days, a complaint will be instituted against you for failure to comply with the Commission's insurance requirements.

Any one of the following may be submitted as evidence of insurance coverage pending the Commission's receipt of a Certificate of Insurance:

1. A copy of your insurance identification card (for vehicles registered in Pennsylvania only);
2. A copy of the declaration page of your insurance policy;
3. A copy of a valid binder of insurance; or
4. A copy of a valid application for insurance to the Pennsylvania Automobile Insurance Plan.



If you wish to submit one of the listed items as evidence of insurance, you must submit it in verified form, i.e. it must be attached to an affidavit attesting to its authenticity and validity.

The submission of evidence of insurance in any of the foregoing forms does not relieve you of your responsibility to have filed with this Commission a Certificate of Insurance. If this Commission has not received a Certificate of Insurance within 45 days of the date of service of this Notice, a complaint will be instituted against you for failure to comply with the Commission's insurance requirements.

Such a complaint may result in cancellation of your Certificate of Public Convenience or Permit. A carrier who has forfeited its rights through failure to comply with insurance requirements and who desires to regain his rights must file a new application accompanied by the filing fee of \$125.00. This application will follow the usual procedure, including, if required, formal hearings.

Very truly yours,

Jerry Rich
Secretary

Insurance Section
Phone 717-787-3113
cc: enforcement division
cc: Certified Mail