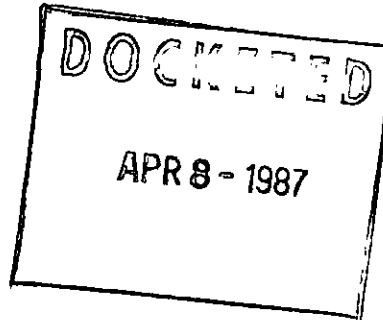


COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
APRIL 08, 1987

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114



IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE APRIL 01, 1987

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,

A handwritten signature in cursive script that reads "Jerry Rich".

Jerry Rich
Secretary

cc: Enforcement Division

Certified Mail

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "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 service(s) requested.

1. Show to whom, date and address of delivery.

2. Restricted Delivery. *A104919*

3. Article Addressed to:
James D. Morrissey

4. Type of Service:	Article Number
<input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	44742

Always obtain signature of addressee or agent and **DATE DELIVERED.**

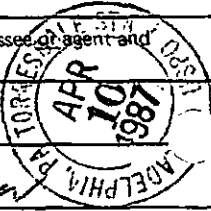
5. Signature - Addressee
X

6. Signature - Agent
X *R. Brown*

7. Date of Delivery

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

DOMESTIC RETURN RECEIPT



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 171
APRIL 24, 1987

IN REPLY PLEASE
REFER TO OUR FILE

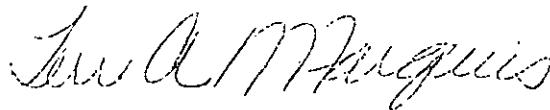
A-00104919

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114

NOTICE TO LIFT SUSPENSION

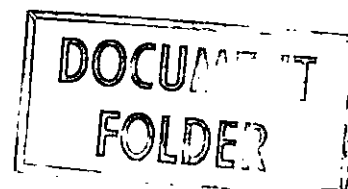
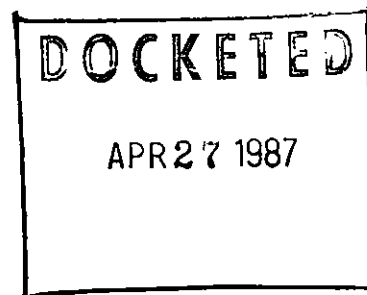
This is to notify you that we have received proof of insurance coverage. Therefore, you may disregard the Notice of Suspension previously issued.

Very truly yours,



Insurance Section
(717) 787-1227

cc: Enforcement Division



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
JULY 10, 1989

IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

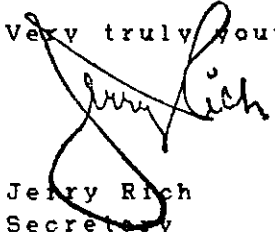
EFFECTIVE JULY 12, 1989
FOR EXPIRATION OR CANCELLATION OF
CARGO LIABILITY INSURANCE

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.

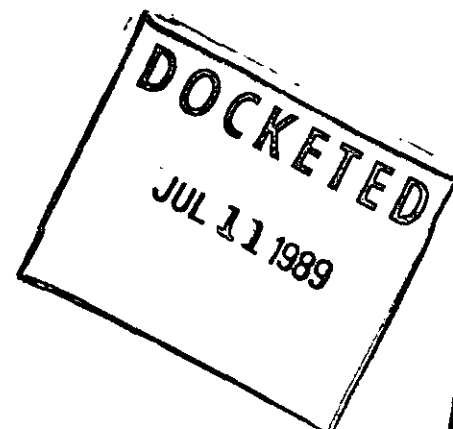
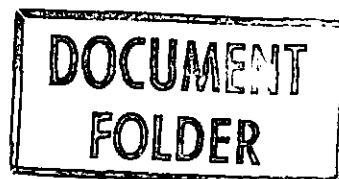
Upon receipt and acceptance of the required certificate of insurance, you will receive written notification that the suspension is lifted and that you may resume operations.

Very truly yours,


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 the "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)

3. Article Addressed to:
 A-00104919

 MORRISSEY, JAMES D., JR.

 N

4. Article Number **44435**

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
James D. Morrisey, Jr.

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

6. Signature - Agent
 X

7. Date of Delivery
 MAR 2 1988

D

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
JULY 28, 1989

IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114

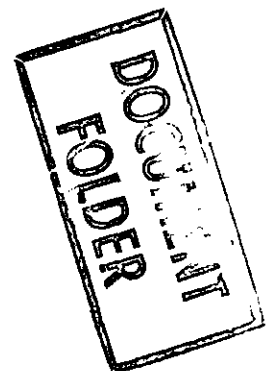
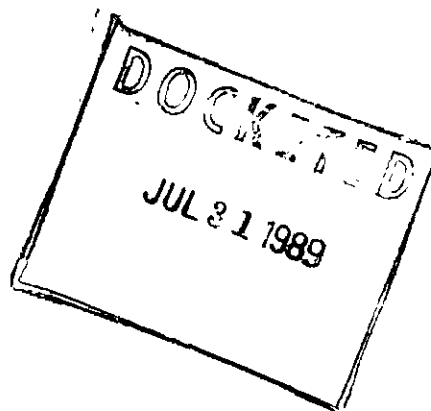
NOTICE TO LIFT SUSPENSION

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





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

July 3, 1991

IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

James D. Morrissey, Jr.
911 Frankford Avenue
Philadelphia, PA 19114

Re: Incorporation of a Sole Proprietorship or Partnership

Dear

The Pennsylvania Public Utility Commission has received notice that you have recently incorporated and that you are conducting public utility service as a corporation. In order to legally conduct business in this manner, your PUC authority must be officially transferred into the corporation.

If there has been a change in the ownership or control of the business, it will be necessary to file an application for the transfer of authority. In order to obtain the necessary forms, please contact the Application Section at 717-787-3834.

If there has been no change in the ownership or control of the business, it will be necessary to submit a verified letter of notification to the Commission containing the following information:

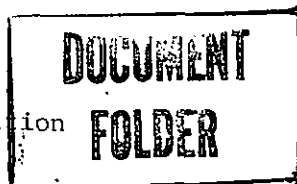
1. The docket number of the motor carrier and the name of the motor carrier as presently shown in Commission records.
2. A copy of the articles of incorporation.
3. The names of the owners of the stock and distribution of shares.
4. The names of the officers and directors of the corporation.
5. A statement that there has been no change in the ownership or control of the business.
6. A copy of the approved certificate of incorporation or certificate of authority from the Pennsylvania Department of State.

Upon the submission of this information to the Commission, the Commission will endorse your existing certificate or permit in the name of the new entity with no change to your existing docket number. Within 30 days of this endorsement, you must make the necessary changes on your insurance and tariff filings with the Commission.

Thanks for your attention to this matter.

Sincerely,

cc: Insurance Section



David Ehrhart, Supervisor
Application Section
Bureau of Transportation

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
AUGUST 29, 1991

BTL

IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE SEPTEMBER 02, 1991

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,


Jerry Rich
Secretary

cc: Enforcement Division

Certified Mail

DOCUMENT
FOLDER

DOCKETED
SEP 05 1991

SENDER:

- Complete items 1 and 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 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-00104919

JAMES D. MORRISSEY, JR.

4a. Article Number

044536

4b. Service Type

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

7. Date of Delivery

James D. Morrissey, Jr.

5. Signature (Addressee)

RECEIVED

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

6. Signature (Agent)

SEP 9 1991

BT

PS Form 3811, November 1990 U.S. GPO: 1991-287-066

DOMESTIC RETURN RECEIPT

JAMES D. MORRISSEY, INC.

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
SEPTEMBER 19, 1991

IN REPLY PLEASE
REFER TO OUR FILE

A-00104919

MORRISSEY, JAMES D., JR.
9119 FRANKFORD AVE.
PHILADELPHIA PA 19114

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) 797-1227

cc: Enforcement Division

DOCUMENT
FOLDER

DOCKETED
SEP 23 1991

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

IN REPLY PLEASE
REFER TO OUR FILE
A-00104919

June 06, 2006

JAMES D MORRISSEY JR
9119 FRANKFORD AVE
PHILADELPHIA PA 19114

DOCUMENT
FOLDER

Dear Sir/Madam:

On April 28, 2006, an enforcement officer of the Pennsylvania Public Utility Commission conducted a safety fitness review. As a result of that review, your safety fitness evaluation for this Commission is:

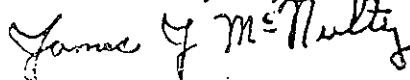
UNSATISFACTORY

An unsatisfactory review indicates that you have failed to demonstrate at least a +minimal compliance with this Commission's motor carrier safety regulations. In approximately **60 to 90 days**, a second safety fitness review must be conducted. An enforcement officer will contact you to schedule your second review. Failure to achieve a satisfactory evaluation, resulting from the second safety fitness review, will cause your certificate of public convenience to be **suspended immediately and cancellation proceedings begun**. If after failing your second safety fitness review, you choose to remain in the transportation business, you are required to file a new application, along with an explanation as to how you corrected any deficiencies listed on the Safety Fitness Review Recommendations page. If the explanation is deemed satisfactory, you will have 90 days, after your new certificate of public convenience is issued, with which to comply with a third and final safety fitness review. Failure to submit to or pass a third safety fitness review will result in final cancellation of your certificate of public convenience and any new applications will **NOT** be accepted.

Prior to the second review, please insure that all deficiencies identified on the Safety Fitness Review Report are corrected and that you have complied with the recommendations for correction.

If you have any questions, please call this Commission's Motor Carrier Safety Office at (717) 772-2254.

Very truly yours,



James J. McNulty
Secretary

DOCKETED
JUN 19 2006

pc: Motor Carrier Enforcement Division Safety Office
Philadelphia District Office \ Kane, Ralph \ SFR- 2006-046-01
Docket Room

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

IN REPLY PLEASE
REFER TO
A-00104919

September 18, 2006

JAMES D MORRISSEY JR
9119 FRANKFORD AVE
PHILADELPHIA PA 19114

Dear Sir/Madam:

On September 01, 2006, an enforcement officer of the Pennsylvania Public Utility Commission conducted a safety fitness review. As a result of that review, your compliance with the Commission's motor carrier safety requirements has been determined to be:

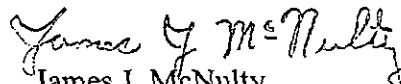
SATISFACTORY

A satisfactory review indicates that you have demonstrated at least a minimal compliance with this Commission's motor carrier safety regulations. The evaluation performed by this Commission is not a substitute for, or related in any way to, a rating issued by the Federal Highway Administration or any agency of another state.

If you have not already done so, to insure that all deficiencies identified on the Safety Fitness Review Recommendations page have been corrected, please send a letter outlining the measures taken to correct those deficiencies to the district office noted on that page. However, if no deficiencies are noted, no correspondence is required.

If you have any questions, please call this Commission's Motor Carrier Safety Office at (717) 772-2254.

Very truly yours,


James J. McNulty
Secretary

pc: Motor Carrier Enforcement Division Safety Office
Philadelphia District Office \ Kane, Ralph \ SFR- 2006-046-02
Docket Room

DOCUMENT
FOLDER

DOCKETED
SEP 20 2006