

PENNSYLVANIA PUBLIC UTILITY COMMISSION
Uniform Cover and Calendar Sheets

1. <u>REPORT DATE:</u>	:	2. <u>BUREAU AGENDA NO.</u>
November 27, 1991	:	
3. <u>BUREAU:</u>	:	DEC-91-T-1134*
Transportation	:	
4. <u>SECTION</u>	:	5. <u>PUBLIC MEETING DATE:</u>
Application	:	
6. <u>APPROVED BY:</u>	:	December 12, 1991
	:	
Director: Ernst 7-2154	:	
Supervisor: Ehrhart 7-5129	:	
7. <u>MONITOR:</u>	:	
	:	
8. <u>PERSON IN CHARGE:</u>	:	
Bigelow 3-5935	:	
9. <u>DOCKET NO.:</u>	:	
A-00107235	:	

10. (a) CAPTION (abbreviate if more than 4 lines)
(b) Short summary of history & facts, documents & briefs
(c) Recommendation

(a) Request of Tri-County Transportation & Leasing, Inc. to change its name and add a trade name.

(b) Letter-request from certificate holder that its common carrier certificate be changed to stand in the name of Tri-County Transportation, Inc., t/d/b/a Happy Times Charter pursuant to 52. Pa. Code §3.381(a)(6) and §3.381(a)(7).

(c) The Bureau of Transportation recommends that the certificate issued to Tri-County Transportation & Leasing, Inc., at A-00107235 be changed to stand in the name of Tri-County Transportation, Inc., t/d/b/a Happy Times Charter and that Commission records should be changed to reflect the new name.

BAB:kmb

DOCUMENT
FOLDER

DOCKETED

FEB 04 1992

11. MOTION BY:	Commissioner Chm. Smith	Commissioner	Holland - Yes
		Commissioner	
SECONDED:	Commissioner Rhodes	Commissioner	Rolka - Yes

CONTENT OF MOTION: Staff recommendation adopted.



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

KJR

December 16, 1991

IN REPLY PLEASE
REFER TO OUR FILE

A. 00107235

LAWRENCE L. DAVIS, ESQUIRE
DAVIS AND DAVIS
103 SOUTH CENTER STREET
EBENSBURG PA 15931-0064

Request of Tri-County Transportation & Leasing, Inc. that its certificate of public convenience be changed to stand in the name of TRI-COUNTY TRANSPORTATION, INC., t/d/b/a HAPPY TIMES CHARTER

To Whom It May Concern:

Enclosed is an Order adopted by the Commission concerning the name change request of the subject motor carrier.

Please be advised that the Certificate or Permit will not be endorsed in the new or amended name until compliance has been made with the following requirements:

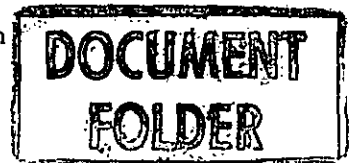
1. Arrange with the insurance company providing insurance coverage of PUC operations to file a new Form H and/or Form E reflecting the new or amended name.
2. Complete and return to the Commission the enclosed tariff adoption supplement.

Commission regulations require compliance with the above requirements within thirty (30) days of the date of this letter. Failure to comply within the thirty days will cause the Commission to rescind its action without further proceedings.

If you foresee problems in meeting these requirements, please direct your questions to the following contact persons:

Insurance Filings: Mr. James McCarthy-Insurance Section
(717) 783-5933

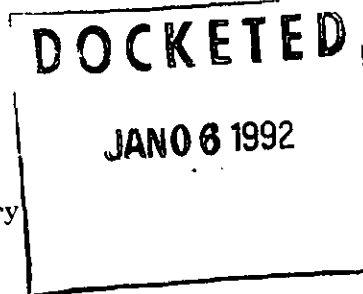
Tariff Filings: Mr. Joseph Machulsky-Tariff Section
(717) 787-5521



EMD
Enclosures
Certified Mail
Receipt Requested

Very truly yours,

Jerry Rich, Secretary



TRI-COUNTY TRANSPORTATION, INC.
t/d/b/a HAPPY TIMES CHARTER
404 19th STREET BOX 13
BARNESBORO PA 15714

PENNSYLVANIA
PUBLIC UTILITY COMMISSION
Harrisburg, PA 17105-3265

Public Meeting held December 12, 1991

Commissioners Present:

William H. Smith, Chairman
Joseph Rhodes, Jr., Vice-Chairman
Wendell F. Holland, Commissioner
David W. Rolka, Commissioner

Request of Tri-County Transportation & Leasing,
Inc. to change its name and add a trade name.

A-00107235

O R D E R

BY THE COMMISSION:

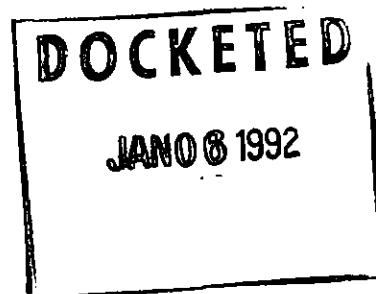
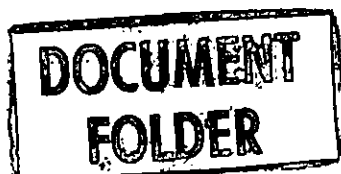
This matter comes before the Commission upon letter-request of Tri-County Transportation & Leasing, Inc. that its certificate of public convenience be changed to stand in the name of Tri-County Transportation, Inc., t/d/b/a Happy Times Charter pursuant to 52 Pa. Code §3.381(a)(6) and §3.381(a)(7).

Upon review of the request, it appears that the necessary filings have been made and that there is no change in the ownership or control of the business; THEREFORE,

IT IS ORDERED: That the request be and is hereby approved and that the certificate issued to Tri-County Transportation & Leasing, Inc. be changed to stand in the name of Tri-County Transportation, Inc., t/d/b/a Happy Times Charter.

IT IS FURTHER ORDERED: That the certificate holder shall effect the name change on its insurance and tariff filings with the Commission.

IT IS FURTHER ORDERED: That in event said certificate holder shall not effect the name change on its insurance and tariff filings within thirty (30) days from the date of service of this order, the request shall be deemed denied without further proceedings.



IT IS FURTHER ORDERED: That upon compliance with the requirements of this order, the certificate shall be endorsed to stand in the name of Tri-County Transportation, Inc., t/d/b/a Happy Times Charter.

BY THE COMMISSION,


Jerry Rich
Secretary

(SEAL)

ORDER ADOPTED: December 12, 1991

ORDER ENTERED: December 16, 1991

SENDER:

- Complete items 1 and 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

A-107235

4a. Article Number

044921

4b. Service Type

- Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery

DEC 19 1991

5. Signature (Addressee)

Lawrence Davis Esq.

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

AAA

6. Signature (Agent)

PS Form 3811, November 1990 * U.S. GPO: 1991-287-066 **DOMESTIC RETURN RECEIPT**

SENDER:

- Complete items 1 and 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

A-107235

4a. Article Number

044922

4b. Service Type

- Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery

12-23-91

5. Signature (Addressee)

Lin County Transportation Inc.

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

GJR

6. Signature (Agent)

PS Form 3811, November 1990 * U.S. GPO: 1991-287-066 **DOMESTIC RETURN RECEIPT**