

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

May 28, 1985

IN REPLY PLEASE
REFER TO OUR FILE

A. 00105933
Folder 1

Donald D. Saxton, Jr. , Esquire
63 South Main Street
Washington, PA 15301-6881

Application of ROBERT MOLNAR, t/d/b/a ROBERT MOLNAR HAULING

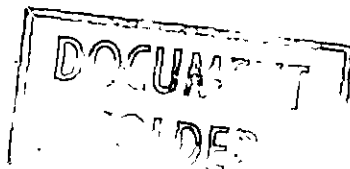
Dear Sir:

The records of the Commission show that applicant has complied with the necessary tariff and insurance requirements.

Enclosed is the contract carrier permit evidencing the Commission's approval of the right to operate.

Kindly attach the enclosures to the compliance order previously issued and mailed to you on April 10, 1985.

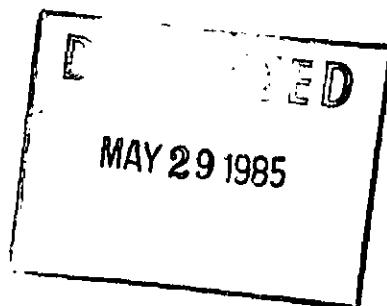
Very truly yours,



Jerry Rich
Secretary

Enclosures
Certified Mail

ROBERT MOLNAR HAULING
R. D. #1, Box 38A
Suttersville, PA 15038



PC-18

PENNSYLVANIA
PUBLIC UTILITY COMMISSION

IN THE MATTER OF THE APPLICATION OF

Robert Molnar, trading and doing business as
ROBERT MOLNAR HAULING

CONTRACT CARRIER
PERMIT

A. 00105933
Folder 1

The Pennsylvania Public Utility Commission hereby certifies that after an investigation had on the above entitled application, it has, by its order made and entered, a copy of which is attached hereto and made a part hereof, found and determined that the granting of said permit will be consistent with the public interest and the policy declared in Section 801 of the Public Utility Law, and this permit is issued evidencing its approval of the said application as set forth in said order.

In Testimony Whereof, The PENNSYLVANIA PUBLIC UTILITY COMMISSION has caused these presents to be signed and sealed, and duly attested by its Secretary at its office in the city of Harrisburg this 28th day of MAY 19 85.

PENNSYLVANIA
PUBLIC UTILITY COMMISSION

Attest:

John Lich
Secretary

DOCUMENT
FOLDER

RECEIVED
MAY 29 1985

PS Form 3871, 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, *Passant* date and address of delivery.
- Restricted Delivery *A-105933F1*

3. Article Addressed to:

Donald Sexton Jr Esq

4. Type of Service:

- Registered Insured
- Certified COD
- Express Mail

Article Number

44491

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

5. Signature - Addressee

X

6. Signature - Agent

J. Douglas

Date of Delivery

5-30-85



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

DOMESTIC RETURN RECEIPT