

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

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SECRETARY'S BUREAU

## Application for Motor Common Carrier of Persons in Paratransit Service

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE WHEN PROVIDING TRANSPORTATION ON A NONEXCLUSIVE, ADVANCE RESERVATION BASIS.

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

Bedford Area Ambulance Service, Inc.

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

\_\_\_\_\_

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

130 Vondersmith Ave.

Street Address

Bedford, PA 15522-1727

City, State and Zip Code

814-623-6534

Telephone Number

Bedford

County

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

P.O. 625

Street Address

Bedford, PA 15522-0625

City, State and Zip Code

5. **Attorney** (if applicable)

\_\_\_\_\_  
Attorney's Name & Telephone Number for this Filing

\_\_\_\_\_  
Attorney's Address

6. Does applicant currently hold PA PUC authority?

No       Yes, at PUC No. A- \_\_\_\_\_

7. Does applicant hold interstate operating authority?

No       Yes, at No. \_\_\_\_\_

8. **Have you registered with the PA Department of State?**

If **YES**, please check below the type of business that applies to this Application and provide the Entity ID Number given to you by the PA Department of State:

Individual      (not applicable)

Partnership      (not applicable)

Limited Partnership      \_\_\_\_\_  
Corporation Bureau Entity ID Number

Limited Liability Partnership      \_\_\_\_\_  
Corporation Bureau Entity ID Number

Limited Liability Company      \_\_\_\_\_  
Corporation Bureau Entity ID Number

Corporation – For Profit      \_\_\_\_\_  
Corporation Bureau Entity ID Number

Corporation – Nonprofit      30502      EIN# 25-1217897  
Corporation Bureau Entity ID Number

If **NO**, contact the PA Department of State and apply according to how you will do business in PA:

PA Corporations (Profit or Non-Profit) –      File for Articles of Incorporation

Foreign Corporations –      File for a Certificate of Authority

PA Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies – File for a Certificate of Organization

Foreign Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies – File for an Application of Registration

Fictitious Name Registration – File **only** if Trade Name will be different than the business name you register with the Department of State

## 9. Attachment Checklist

Individual:  Certified Check, money order, or check from attorney  
 Copy of Current Safety Rating (if available)

Partnership:  Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)

Limited Partnership:  Corporation Bureau Entity Number as entered above in #8  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)

Limited Liability Partnership:  Corporation Bureau Entity Number as entered above in #8  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Partners  
 Copy of Current Safety Rating (if available)

Limited Liability Company:  Corporation Bureau Entity Number as entered above in #8  
 Certified Check, money order, or check from attorney  
 List of names and addresses of ALL Members and Title of each Member (even if only one member)  
 Copy of Current Safety Rating (if available)

Corporation – For Profit:  Corporation Bureau Entity Number as entered above in #8  
 Certified Check, money order, or check from attorney  
 List of ALL Corporate Officers and Titles, name of each Shareholder and distribution of shares  
 Copy of Current Safety Rating (if available)

Corporation – Non-Profit:  Corporation Bureau Entity Number as entered above in #8  
 Certified Check, money order, or check from attorney  
 List of ALL Corporate Officers and Titles and those serving on Board of Directors  
 Copy of Current Safety Rating (if available)

10. Describe the service area proposed by this application.

(Use the space below or attach additional sheet if space provided is not sufficient).

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To transport people from the local hospital, extended care facilities and personal care homes in the Bedford, PA area to non-emergency medical care facilities in PA and return.

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11. Certification:

Applicant certifies that it is not now engaged in unauthorized intrastate transportation 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 Passengers; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the certificate.

## Verification of Application

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.

Robert Harclerode, President of Board of Directors  
(Print Name)

  
(Signature)

6/11/2014  
(Date)

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, a member (if a limited liability company), or by the President or Secretary (if a corporation).

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## VERIFIED STATEMENT OF APPLICANT

RECEIVED

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

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Bedford Area Ambulance Service, Inc.

Legal Name of Applicant

Trade Name, if any

130 Vondersmith Ave.

Bedford

PA 15522-1727

Street Address (principal place of business)

City or Municipality

State

Zip Code

The Verified Statement of the Applicant is more or less a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

At minimum, the Verified Statement of the Applicant should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person making the Verified Statement on behalf of the applicant. If the applicant is a sole proprietor making the statement, this will be the same information as provided above. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number, and indicate that the applicant's directors/owners/partners/etc. have authorized the witness to speak for the business.

Sheldon Benton, EMT-P, Medical Manager; 130 Vondersmith Ave., Bedford, PA (814)623-6534

2. Robert Harclerode, President of the Board of Directors; 130 Vondersmith Ave., Bedford, PA (814)623-6534
3. Richard Hite, Chairperson of the Personnel Committee, Board of Directors; 130 Vondersmith Ave., Bedford, PA (814)623-6534
4. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.

We have no affiliation with any other carriers or services.

5. Describe your business experience, particularly any experience relating to the operation of a transportation service. You may also include an explanation of education or training that you believe may be relevant.

We have been an emergency ambulance service since 1971. In the past, we provided non-emergency, non-medically necessary transport services to the residents of Bedford County, PA from the time of our incorporation

until the PA Department of Health and PUC laws and rules changed to the current standards at which time we ceased that practice.

6. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to include the office area, office machines that will be utilized, and the facility to house vehicles. Household goods in use carriers should include a description of their storage facilities, if applicable. Please include an explanation of your plan to maintain records required by the PUC, as well as normal business records. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and how you will maintain continuous communication with your drivers. Finally, please state your intended business hours.

We currently have a 12,060 sq. ft. ambulance station located at 130 Vondersmith Ave in Bedford, PA. This is the physical location where an Invalid Coach will be housed if we are successful in obtaining a PUC license. We have an established business office including a telephone system, two fax machines with dedicated lines, a copy machine, several computers and printers. We have a Medical Records room to store in-active records which is locked at all times and only the office staff has access. We also have several file cupboards that are located in the office where active files are stored. When the office is closed the file cupboards are locked as well as all access points to the interior of the office. The records for the PUC license will be stored and maintained in this environment. We do all of our ambulance service billing in house by highly trained individuals that are constantly attending continuing education in order to keep up with the latest billing trends and standards. We currently bill Medicare, Medicaid, auto insurance carriers and both private and corporate insurance companies. We have an employee lounge and bunk rooms so that our medical staff may rest and sleep when they are on call. (They work 24 hour shifts.) We also have a room dedicated to training with conventional teaching techniques as well as computer and other electronic capabilities. Our building also has 2 separate garages. The primary garage is an additional 3,100 sq. ft. and has three (3) double stack bays that we can easily house six (6) full size advanced life support ambulances if needed. We also have a seventh bay on the opposite end of the building that can easily house a wheel chair/stretching van. We have both radio, telephone and cell phone access available and we will use these communication adjuncts to receive customer requests and dispatch drivers to those customer requests. Our intended business hours will be Monday through Friday 08:00 hrs to 17:00 hours (8:00 a.m. to 5:00 p.m.).

7. Please state the number of employees you intend to use, along with a description of their duties. Please explain why that number of employees is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. **(Do not address drivers in your explanation about this item; drivers are addressed separately in item # 6).**

We are planning on hiring two (2) part-time drivers. The supervisory aspects, building and vehicle maintenance, licensing, billing and other clerical duties will be handled by our current staff. We believe this will be sufficient because we only have one (1) hospital, two (2) skilled nursing homes and four (4) assisted living homes in our service area. We have three (3) other PUC licensed invalid coach services on our entire county. Initially, we will be only getting the over-flow clients. At any time in the future, we can add administrative staff, maintenance staff, drivers and vehicles as necessary.

8. Please state the number of drivers you intend to use or hire in your business and explain why that number of drivers is appropriate for the size of the geographical territory you will be serving. In addition, please explain:

We are figuring on initially hiring two (2) part-time drivers. We will initially putting a limit on the hours of operation to Monday through Friday at a maximum of ten (10) hours per day. Each driver would be responsible for a maximum of twenty five (25) hours per week. No overnight service will be offered.

- a. Your hiring standards for drivers;

The drivers will be a minimum of twenty one (21) years of age, with a clean driving record, clear background checks and a minimum of CPR trained.

- b. Your system to ensure prospective drivers will be subject to a criminal background check;

All perspective employees of Bedford Area Ambulance Serve must provide a state and federal criminal back ground check, a child abuse back ground check and a vehicle operator back ground check before being considered for employment.

- c. Your driver training program;

Perspective employees must successfully complete an Emergency Vehicle Operator's course (EVOC) that is recognized by the Commonwealth of Pennsylvania. After the EVOC, every perspective vehicle operator must successfully complete a "behind the wheel" driving test, following recommendations from our insurance company, and will be administered by a Service appointed Driver Trainer (EVOC Instructor).

- d. Your system for ensuring that your drivers are properly licensed at all times;

Periodic random driving record back ground checks as well as a copy of the driver's license will be kept on file. Periodic drug/alcohol tests will also be completed.

- e. Your system to ensure that all drivers will be subject to a criminal background check every two years;

A computer program to flag when an employee is due for back ground checks, the checks will be completed. If any convictions or plea of nolo-contendere is returned, the employee will be terminated from employment.

- f. Your policies regarding alcohol and drug use by your drivers.

Our policy is of no-tolerance. Any driver suspected of alcohol and/or drug use will get an alcohol/drug screen immediately and if the results come back positive, the driver will be terminated from employment.

- 9. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below. Taxicabs and limousines may not be used if the vehicle's age is greater than eight model years.

Initially, we are going to purchase one (1) stretcher/wheel chair van. We feel that is an appropriate fleet for the limits of our area where we have only one (1) hospital, two (2) skilled nursing homes and four (4) assisted living centers. We may need to increase the van fleet if the need arises. We currently have four (4), PA Department of Health licensed ambulances we can use for transports for patients with oxygen requirements.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY</u>	<u>VEHICLE ID #</u>
1997	Ford	F450	Stretcher	1FDLF47F4VEA54503
2000	Ford	F450	Stretcher	1FDXF46F4YEA67985
2003	Ford	F450	Stretcher	1FDXF46F93EB16011
2009	Ford	F450	Stretcher	1FDAK46R09EA11897

- 10. Describe your vehicle safety program. Please include the following in your explanation:

- a. Your periodic vehicle maintenance plan;

We have a Vehicle Maintenance Supervisor which their responsibility is to schedule any maintenance that cannot be done in house. State inspections, oil changes, tire rotations, etc are done by the local dealership. The vehicles go into the dealership on a 3000 mile basis for preventative maintenance check. Changing light bulbs, tire pressures, fluid level checks, changing windshield wipers, etc are completed in house.

- b. Your system for ensuring your vehicles will continuously comply with Pennsylvania's equipment standards (67 Pa. Code, Chapter 175) that are applicable to the type of vehicles used in your business;

We require an equipment check to verify that all equipment is serviceable and stowed properly. A vehicle "walk around" is completed on every shift checking exterior lighting, fluid leakage and tire pressure.

- c. Your system for ensuring your vehicles will maintain compliance with the PUC's requirements for passenger service at 52 Pa. Code, Section 29.403 (applicable to passenger applicants only);

The local dealership is certified to maintain vehicles that carry passengers. In the type of business we are embarking, the vehicles we will have to purchase will be purchased from that dealer.

- d. Your system for replacing vehicles once they are greater than eight model years in age in compliance with 52 Pa. Code, Section 29.314(d) (applicable to taxicabs) or 52 Pa. Code, Section 29.333(e) (applicable to limousines);

This is not applicable for an invalid coach for non-medically necessary transports.

- e. Your system for ensuring the filing of an annual vehicle list (taxicabs and limousines);

This is not applicable for an invalid coach for non-medically necessary transports.

- f. Your system for ensuring your vehicles will comply with the requirements of 49 CFR Parts 393 and 396, as adopted by the PUC at 52 Pa. Code, Chapter 37 (applicable to HHG applicants).

11. Please explain what steps you have taken to determine if you can obtain and pay the premiums to maintain insurance coverage for the proposed number of vehicles for your business.

We have contacted our insurance carrier for medically necessary vehicles and we may add a rider on our existing policy.

12. Please describe your customer service standards. Within your description, please explain:

- a. Your plan to inform customers of the procedures for filing complaints with the PUC;

A sign or signs will be placed in the patient/passenger compartment easily visible to the patient/passenger stating that any complaints they have with our service can reported to the PUC and the PCU Complaint Department telephone number and web site.

- b. Your intended customer complaint resolution procedure.

The nature of the problem will dictate the resolution of the complaint. Any personnel issues will be dealt with immediately with as little as instructional mediation to a maximum of termination of employment. Any complaints about the vehicle, the problem will be confirmed by a licensed mechanic. After being confirmed by a licensed mechanic, the vehicle will be taken out of service and the problem resolved prior to return to the fleet.

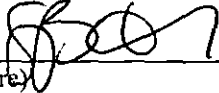
13. **Criminal Record.** Have you, any members (if LLC or LLP), shareholders, or officers (corporations) been convicted of a misdemeanor or felony for which you remain subject to supervision by a court or correctional institution?

\_\_\_ YES    X NO

14. **Financial Data.** In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation service. Therefore you must complete both parts of the "Statement of Financial Position", which follows this page. The first part is the Balance Sheet. You need only provide the applicable information. The second part of the Statement of Financial Position is the Projected Income Statement. The projection is your estimation of expected revenues and specific expenses for one year. You should use the projected information, along with the financial data reported on your balance sheet to help you determine if the proposed business can be feasible. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

### Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.



(Signature)

Sheldon K. Benton, Medical Manager

(Name and Title, printed or typed)

11 JUNE 2014

(Date)

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Bedford Area Ambulance Service  
 Balance Sheet  
 As of January 31, 2014

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	<u>Jan 31, 14</u>
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
FNB - Payroll Account	2,060.34
FNB of PA checking	6,943.94
FNB of PA credit card	2,332.02
FNB CD 100513060	35,527.65
FNB CD 100873216	22,393.67
FNB CD 101180234	147,977.62
Altoona 1st Scholarship Savings	3,715.94
Edward Jones	683,667.96
American Funds	158,120.53
Petty cash	300.00
Driver's Association	
Susquehanna checking	928.84
Altoona 1st CD #02-24000422	1,645.14
Altoona 1st CD #02-13001673	1,465.04
Driver's Association - Other	35.05
<u>Total Driver's Association</u>	<u>4,074.07</u>
<u>Total Checking/Savings</u>	<u>1,067,113.74</u>
Total Current Assets	1,067,113.74
Fixed Assets	
Fixed Assets	
Land	82,458.95
Building	1,001,735.46
Ambulance	544,271.00
Equipment	382,743.00
<u>Total Fixed Assets</u>	<u>2,011,208.41</u>
Accumulated Depreciation	(959,549.04)
<u>Total Fixed Assets</u>	<u>1,051,659.37</u>
<b>TOTAL ASSETS</b>	<b><u><u>2,118,773.11</u></u></b>
<b>LIABILITIES &amp; EQUITY</b>	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	35.05
<u>Total Accounts Payable</u>	<u>35.05</u>

Bedford Area Ambulance Service  
Balance Sheet  
As of January 31, 2014

	<u>Jan 31, 14</u>
Other Current Liabilities	
Payroll Liabilities	10,409.52
Total Other Current Liabilities	<u>10,409.52</u>
Total Current Liabilities	10,444.57
Long Term Liabilities	
FNB of PA loan 5200	86,750.00
FNB of PA loan 2085	38,931.54
FNB of PA loan 8520	8,111.40
Total Long Term Liabilities	<u>133,792.94</u>
Total Liabilities	144,237.51
Equity	
Retained Earnings	1,930,472.35
Net Income	44,063.25
Total Equity	<u>1,974,535.60</u>
TOTAL LIABILITIES & EQUITY	<u><u>2,118,773.11</u></u>

**VERIFIED STATEMENT IN SUPPORT OF THE APPLICATION**

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

Bedford Colonial Courtyard  
Name of Supporter

880 Donahue Manor Rd. Bedford PA 15522  
Street Address City or Municipality State Zip Code

Bedford Area Ambulance Service  
Name of Applicant

- Describe the type of transportation service needed.  
*wheelchair/stretcher*
- What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.  
*Bedford Colonial Courtyard to facilities in Bedford & Everett*
- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  
*Daily*
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  
*Yes we desire them but not available all of the time*
- Have you supported similar applications in the past? If so, please supply name and docket number.  
*No*

**VERIFICATION OF STATEMENT**

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to, and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.

Stacy Frederick  
(Signature) STACY FREDERICK  
(Name, printed or typed)

2-24-14  
(Date)

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**VERIFIED STATEMENT IN SUPPORT OF THE APPLICATION**

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

Donahoe Manor  
Name of Supporter

136 Donahoe Manor Rd, Bedford Pt 15522  
Street Address City or Municipality State Zip Code

Bedford Area Ambulance Service  
Name of Applicant

- Describe the type of transportation service needed.  
 Wheelchair & stretcher
- What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.  
 Origin: Donahoe  
 Destination: medical facilities in Bedford & Everett
- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  
 Daily for appointments
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  
 yes: Some do not run on holidays or are unavailable
- Have you supported similar applications in the past? If so, please supply name and docket number.  
 UNKNOWN

**VERIFICATION OF STATEMENT**

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.

Nancy Linette Dow  
(Signature)  
NANCY LINETTE DOW  
(Name, printed or typed)

2/18/14  
(Date)

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**VERIFIED STATEMENT IN SUPPORT OF THE APPLICATION**

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THAT THERE IS A NEED FOR THE APPLICANT'S SERVICES. STATEMENT SHOULD BE TYPED OR PRINTED.

Carrol's Rest Home  
Name of Supporter  
7741 Lincoln Hwy Bedford PA 15522  
Street Address City or Municipality State Zip Code

Bedford Area Ambulance Service  
Name of Applicant

- Describe the type of transportation service needed.  
For a hospital return, or MD appt. where CART is not available
- What will be the usual origin and destination? Please give specific locations, such as names of cities, boroughs, or townships.  
From Carrol's Rest Home - UPMC Bedford Hospital  
Altoona, Roaring Spring, Johnstown
- How frequently is this service needed? Example: Is it on a daily, weekly, or monthly basis?  
Usually on an urgent basis
- Have you tried to use other providers of service in this area, and if so, why do you prefer not to use them?  
COST OF AMBULANCE HARDSHIP FOR RESIDENTS
- Have you supported similar applications in the past? If so, please supply name and docket number.  
Not to the best of my recollection.

**VERIFICATION OF STATEMENT**

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, 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.

Dawn E. Lester  
(Signature)  
Dawn E. Lester  
(Name, printed or typed)

2-20-2014  
(Date)

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SECRETARY'S BUREAU

Bedford Area Ambulance Service, Inc.

Board of Directors:

Robert Harclerode – Board President

Robert Dibert – Board Vice-President

Timothy Berkibile – Secretary

James Gonsman – Treasurer

Richard Hite – Chairman, Personnel/Public Relations Committee

Dwayne Smith – Chairman, Vehicle Maintenance Committee

Daniel Datesman

Jane Dimond

Larry Johnson

Linda Mortimer

Rudy Plummer

Steven Myers

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Managers and Supervisors (non-Board members):

Sheldon Benton, Medical Manager and Building/Grounds Supervisor

Brandy Wertz, Office Manager

Linda Vensel, Billing Clerk

Donald Rose, Equipment and Supplies Supervisor

James Meden, Vehicle Maintenance Supervisor

Michelle Lange, Training Supervisor

IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

To the Honorable Richard C. Snyder, President Judge of said Court:

The Petition  
of

Thomas E. Bailey, Wayne Bennett, Richard Berkebile, Charles W. Carney, Ernest Grubb, Herbert R. Imler, Terry Leach, and Clyde A. Ressler, Incorporators of BEDFORD AREA AMBULANCE SERVICE, respectfully represents:

1. That they are the Incorporators under Articles of Incorporation of Bedford Area Ambulance Service, which Articles, together with the Certificate from the Department of State relating to the registration of the above Corporate name, were filed in the Office of the Prothonotary on the 15th day of November, 1971.

2. That said Incorporators advertised their intention to make application for a Charter in accordance with the provisions of the 'Non-profit Corporation Law' of 1933, and proof of said advertisement is submitted herewith.

3. That the Articles of Incorporation of Bedford Area Ambulance Service filed in the Office of the Prothonotary are submitted herewith.

WHEREFORE, your petitioners pray your Honorable Court to enter a Decree approving the said Articles of Incorporation and granting a Charter to Bedford Area Ambulance Service.

/s/ Thomas E. Bailey (SEAL)  
Thomas E. Bailey

/s/ Ernest Grubb (SEAL)  
Ernest Grubb

/s/ Wayne Bennett (SEAL)  
Wayne Bennett

/s/ Herbert R. Imler (SEAL)  
Herbert R. Imler

/s/ Richard Berkebile (SEAL)  
Richard Berkebile

/s/ Terry Leach (SEAL)  
Terry Leach

/s/ Charles W. Carney (SEAL)  
Charles W. Carney

/s/ Clyde A. Ressler (SEAL)  
Clyde A. Ressler

COMMONWEALTH OF PENNSYLVANIA:  
: SS:  
COUNTY OF BEDFORD :

Before me, a Notary Public, in and for the County aforesaid, personally appeared THOMAS E. BAILEY, WAYNE BENNETT, and CLYDE A. RESSLER, three of the above-named Incorporators who, in due form of law, acknowledged the foregoing instrument to be their act and deed for the purposes specified.

/s/ Thomas E. Bailey  
Thomas E. Bailey

/s/ Wayne Bennett  
Wayne Bennett

/s/ Clyde A. Ressler  
Clyde A. Ressler

WITNESS my hand and seal of office the 15th day of November, 1971.

/s/ Mary M. Imler (SEAL)  
Notary Public  
(Title of Officer)

My Commission expires: February 13, 1974.

## TO THE COMMONWEALTH OF PENNSYLVANIA

## DEPARTMENT OF STATE:

In compliance with the provisions of Article II of the Non-profit Corporation Law ( Act of May 5, 1933, P.L. 289 ) the undersigned incorporators desiring to make application for the registration of a proposed corporate name, do hereby certify:

1st: The name which the incorporators desire to use is

**BEDFORD AREA AMBULANCE SERVICE**

2nd: The address of the proposed registered office of the Corporation is 125 East Pitt Street (Rear), in the Borough of Bedford, County of Bedford, and Commonwealth of Pennsylvania; Post Office address: P. O. Box 625, Bedford, Pennsylvania (15522)

<u>/s/ Thomas E. Bailey</u> (SEAL) Thomas E. Bailey	<u>/s/ Ernest Grubb</u> (SEAL) Ernest Grubb
<u>/s/ Wayne Bennett</u> (SEAL) Wayne Bennett	<u>/s/ Herbert R. Imler</u> (SEAL) Herbert R. Imler
<u>/s/ Richard Berkebile</u> (SEAL) Richard Berkebile	<u>/s/ Terry Leach</u> (SEAL) Terry Leach
<u>/s/ Charles W. Carney</u> (SEAL) Charles W. Carney	<u>/s/ Clyde A. Ressler</u> (SEAL) Clyde A. Ressler

Filed in the Office of the Secretary of the Commonwealth,

October 12, 1971.

Commonwealth of Pennsylvania  
Department of State

/s/ C. DeLores Tucker  
~~XXXXXX~~ Secretary of the Commonwealth  
jlw.

IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

ARTICLES OF INCORPORATION

BE IT KNOWN that the undersigned, all of whom are residents of the Commonwealth of Pennsylvania and citizens of the United States, and all of whom are of full age, having associated themselves together for the purpose of organizing the Bedford Area Ambulance Service, and being desirous of becoming incorporated in accordance with the provisions of the act of the General Assembly of the Commonwealth of Pennsylvania, known as the "Non-profit Corporation Law," approved May 5, 1933, as amended, do hereby declare, set forth, and certify as follows:

ARTICLE I. The name of the corporation is BEDFORD AREA AMBULANCE SERVICE, which name has been registered with the Department of State of the Commonwealth of Pennsylvania within six months of the date of the application for this charter.

ARTICLE II. The location and post office address of the initial registered office of the corporation shall be 125 East Pitt Street (Rear), Bedford Borough, Bedford County, Pennsylvania; Post Office address: P. O. Box 625, Bedford, Pennsylvania (15522).

ARTICLE III. The corporation is organized exclusively for charitable, educational, and scientific purposes as defined and limited by Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law), including, but not limited to:

1. Providing ambulance and related services in Bedford County in the Commonwealth of Pennsylvania; and

2. Making distributions for such purposes to organizations that qualify as exempt organizations under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

No members of the corporation shall receive any pecuniary gain or profit, incidental or otherwise, from its activities, except that the corporation shall be authorized to pay reasonable compensation for services rendered and to make payments in furtherance of the provisions set forth in Article III hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. The corporation shall not carry on any activity not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law) or (b) by a corporation, contributions to which are deductible under Section 170 (c) (2) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

ARTICLE IV. The corporation is to have perpetual existence.

ARTICLE V. The names, places of residence, and post office addresses of the incorporators are:

<u>NAME</u>	<u>ADDRESS</u>
Thomas E. Halley	Meadowbrook Terrace Bedford, Pennsylvania
Wayne Bennett	Route #2 Bedford, Pennsylvania

<u>NAME</u>	<u>ADDRESS</u>
Richard Berkebile	715 South Richard Street Bedford, Pennsylvania
Charles W. Carney	329 East Pitt Street Bedford, Pennsylvania
Ernest Grubb	West Pitt Street Bedford, Pennsylvania
Herbert R. Isler	307 1/2 East Pitt Street Bedford, Pennsylvania
Terry Leach	Route #2 Bedford, Pennsylvania
Clyde A. Rossler	240 West John Street Bedford, Pennsylvania

ARTICLE VI. The names, addresses, and titles of the persons who are to act as directors until the election of their successors are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
Wayne Bennett	Route #2 Bedford, Pennsylvania	President
Gayle Grubb	West Pitt Street Bedford, Pennsylvania	Secretary-Treasurer
Thomas E. Bailey	Meadowbrook Terrace Bedford, Pennsylvania	Director
Richard Berkebile	715 South Richard Street Bedford, Pennsylvania	Director
Charles W. Carney	329 East Pitt Street Bedford, Pennsylvania	Director
Ernest Grubb	West Pitt Street Bedford, Pennsylvania	Director
Herbert R. Isler	307 1/2 East Pitt Street Bedford, Pennsylvania	Director
Terry Leach	Route #2 Bedford, Pennsylvania	Director
Clyde A. Rossler	240 West John Street Bedford, Pennsylvania	Director

ARTICLE VII. This corporation is organized upon a non-stock basis.

ARTICLE VIII. All conditions, qualifications, requirements, privileges, and regulations as to membership in the corporation, including voting rights, shall be fixed and governed by the By-Laws of the corporation.

ARTICLE IX. If the corporation is to be dissolved, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the corporation, dispose of all of the assets of the corporation conclusively for the purposes of the corporation in such manner, or to such organization or organizations organized and operated exclusively for charitable, educational, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law), as the Board of Directors shall determine. Any of such assets not so disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and granted exclusively for such purposes.

IN WITNESS WHEREOF, the incorporators have signed and sealed these Articles of Incorporation this 12th day of October, 1971.

/s/ Thomas E. Bailey (SEAL)  
Thomas E. Bailey

/s/ Ernest Grubb (SEAL)  
Ernest Grubb

/s/ Wayne Bennett (SEAL)  
Wayne Bennett

/s/ Herbert R. Imler (SEAL)  
Herbert R. Imler

/s/ Richard Berkebile (SEAL)  
Richard Berkebile

/s/ Terry Leach (SEAL)  
Terry Leach

/s/ Charles W. Carney (SEAL)  
Charles W. Carney

/s/ Clyde A. Ressler (SEAL)  
Clyde A. Ressler



IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

DECREE OF INCORPORATION

AND NOW, this 30th day of November, 1971, an application for a charter, and the Articles of Incorporation of BEDFORD AREA AMBULANCE SERVICE under the "Nonprofit Corporation Law", approved May 5, 1933, as amended, having been presented to me, President Judge of said Court, accompanied by proof of the publication of the notice of such application and a certificate from the Department of State showing the registration of the proposed corporate name as required by law, I do hereby certify that I have perused and examined the said instruments and that I find the same to be in the proper form and within the provisions and requirements of the Act of the General Assembly of the Commonwealth of Pennsylvania, known as "The Nonprofit Corporation Law," approved May 5, 1933, as amended; and that the purposes of the proposed corporation appear to be lawful and not injurious to the community. It is therefore ordered and decreed, that the Articles of Incorporation of Bedford Area Ambulance Service be and the same are hereby approved and that upon the recording of the said Articles and this order, the subscribers thereto and their associates and successors, shall be a body politic and corporate in deed and in law by the name of Bedford Area Ambulance Service, which shall exist perpetually and shall be invested with, and have and enjoy all the powers, privileges, and franchises incident to a nonprofit corporation and be subject to all the duties, requirements, and restrictions specified and enjoined in and by the "Nonprofit Corporation Law," and all other applicable laws of this Commonwealth.

WITNESS MY HAND and seal of the said Court.

Per Curiam

/s/ Richard C. Snyder

P.J.

Recorded in the Office for the Recording of Deeds for the  
County of Bedford, In Charter Book No. 2 , Page 233 .

WITNESS MY HAND and Seal of Office this 2nd day of December , 1971.

/s/ Harry F. McKinley  
Recorder of Deeds

IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

To the Honorable Richard C. Snyder, President Judge of said Court:

The Petition  
of

Thomas E. Bailey, Wayne Bennett, Richard Berkebile, Charles W. Carney, Ernest Grubb, Herbert R. Imler, Terry Leach, and Clyde A. Ressler, Incorporators of BEDFORD AREA AMBULANCE SERVICE, respectfully represents:

1. That they are the Incorporators under Articles of Incorporation of Bedford Area Ambulance Service, which Articles, together with the Certificate from the Department of State relating to the registration of the above Corporate name, were filed in the Office of the Prothonotary on the 15th day of November, 1971.

2. That said Incorporators advertised their intention to make application for a Charter in accordance with the provisions of the 'Non-profit Corporation Law' of 1933, and proof of said advertisement is submitted herewith.

3. That the Articles of Incorporation of Bedford Area Ambulance Service filed in the Office of the Prothonotary are submitted herewith.

WHEREFORE, your petitioners pray your Honorable Court to enter a Decree approving the said Articles of Incorporation and granting a Charter to Bedford Area Ambulance Service.

/s/ Thomas E. Bailey (SEAL)  
Thomas E. Bailey

/s/ Ernest Grubb (SEAL)  
Ernest Grubb

/s/ Wayne Bennett (SEAL)  
Wayne Bennett

/s/ Herbert R. Imler (SEAL)  
Herbert R. Imler

/s/ Richard Berkebile (SEAL)  
Richard Berkebile

/s/ Terry Leach (SEAL)  
Terry Leach

/s/ Charles W. Carney (SEAL)  
Charles W. Carney

/s/ Clyde A. Ressler (SEAL)  
Clyde A. Ressler

COMMONWEALTH OF PENNSYLVANIA:

COUNTY OF BEDFORD

SS:

Before me, a Notary Public, in and for the County aforesaid, personally appeared THOMAS E. BAILEY, WAYNE BENNETT, and CLYDE A. RESSLER, three of the above-named incorporators who, in due form of law, acknowledged the foregoing instrument to be their act and deed for the purposes specified.

/s/ Thomas E. Bailey

Thomas E. Bailey

/s/ Wayne Bennett

Wayne Bennett

/s/ Clyde A. Ressler

Clyde A. Ressler

WITNESS my hand and seal of office the 15th day of November, 1971.

/s/ Mary M. Imler

(SEAL)

Notary Public

(Title of Officer)

My Commission expires: February 13, 1974.

TO THE COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE:

In compliance with the provisions of Article II of the Non-profit Corporation Law ( Act of May 5, 1933, P.L. 289 ) the undersigned Incorporators desiring to make application for the registration of a proposed corporate name, do hereby certify:

1st: The name which the Incorporators desire to use is

BEDFORD AREA AMBULANCE SERVICE

2nd: The address of the proposed registered office of the Corporation is 125 East Pitt Street (Rear), in the Borough of Bedford, County of Bedford, and Commonwealth of Pennsylvania; Post Office address: P. O. Box 625, Bedford, Pennsylvania (15522)

/s/ Thomas E. Bailey (SEAL)  
Thomas E. Bailey

/s/ Ernest Grubb (SEAL)  
Ernest Grubb

/s/ Wayne Bennett (SEAL)  
Wayne Bennett

/s/ Herbert R. Imler (SEAL)  
Herbert R. Imler

/s/ Richard Berkebile (SEAL)  
Richard Berkebile

/s/ Terry Leach (SEAL)  
Terry Leach

/s/ Charles W. Carney (SEAL)  
Charles W. Carney

/s/ Clyde A. Ressler (SEAL)  
Clyde A. Ressler

Filed in the Office of the Secretary of the Commonwealth,

October 12, 1971.

Commonwealth of Pennsylvania  
Department of State

/s/ C. DeLores Tucker  
~~XXXXXX~~ Secretary of the Commonwealth  
jlw.

IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

ARTICLES OF INCORPORATION

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ARTICLE I. The name of the corporation is BEDFORD AREA AMBULANCE SERVICE, which name has been registered with the Department of State of the Commonwealth of Pennsylvania within six months of the date of the application for this charter.

ARTICLE II. The location and post office address of the initial registered office of the corporation shall be 125 East Pitt Street (Rear), Bedford Borough, Bedford County, Pennsylvania; Post Office address: P. O. Box 625, Bedford, Pennsylvania (15522).

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1. Providing ambulance and related services in Bedford County in the Commonwealth of Pennsylvania; and
2. Making distributions for such purposes to organizations that qualify as exempt organizations under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

No members of the corporation shall receive any pecuniary gain or profit, incidental or otherwise, from its activities, except that the corporation shall be authorized to pay reasonable compensation for services rendered and to make payments in furtherance of the provisions set forth in Article III hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. The corporation shall not carry on any activity not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law) or (b) by a corporation, contributions to which are deductible under Section 170 (c) (2) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

ARTICLE IV. The corporation is to have perpetual existence.

ARTICLE V. The names, places of residence, and post office addresses of the incorporators are:

<u>NAME</u>	<u>ADDRESS</u>
Thomas E. Bailey	Meadowbrook Terrace Bedford, Pennsylvania
Wayne Bennett	Route #2 Bedford, Pennsylvania

<u>NAME</u>	<u>ADDRESS</u>
Richard Berkebile	715 South Richard Street Bedford, Pennsylvania
Charles W. Carney	329 East Pitt Street Bedford, Pennsylvania
Ernest Grubb	West Pitt Street Bedford, Pennsylvania
Herbert R. Imier	307 1/2 East Pitt Street Bedford, Pennsylvania
Terry Leach	Route #2 Bedford, Pennsylvania
Clyde A. Ressler	240 West John Street Bedford, Pennsylvania

ARTICLE VI. The names, addresses, and titles of the persons who are to act as directors until the election of their successors are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
Wayne Bennett	Route #2 Bedford, Pennsylvania	President
Gayle Grubb	West Pitt Street Bedford, Pennsylvania	Secretary-Treasurer
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Charles W. Carney	329 East Pitt Street Bedford, Pennsylvania	Director
Ernest Grubb	West Pitt Street Bedford, Pennsylvania	Director
Herbert R. Imier	307 1/2 East Pitt Street Bedford, Pennsylvania	Director
Terry Leach	Route #2 Bedford, Pennsylvania	Director
Clyde A. Ressler	240 West John Street Bedford, Pennsylvania	Director

ARTICLE VII. This corporation is organized upon a non-stock basis.

ARTICLE VIII. All conditions, qualifications, requirements, privileges, and regulations as to membership in the corporation, including voting rights, shall be fixed and governed by the By-Laws of the corporation.

ARTICLE IX. If the corporation is to be dissolved, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the corporation, dispose of all of the assets of the corporation conclusively for the purposes of the corporation in such manner, or to such organization or organizations organized and operated exclusively for charitable, educational, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501 (c) (3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law), as the Board of Directors shall determine. Any of such assets not so disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and granted exclusively for such purposes.

IN WITNESS WHEREOF, the incorporators have signed and sealed these Articles of Incorporation this 12th day of October, 1971.

/s/ Thomas E. Bailey (SEAL)  
Thomas E. Bailey

/s/ Ernest Grubb (SEAL)  
Ernest Grubb

/s/ Wayne Bennett (SEAL)  
Wayne Bennett

/s/ Herbert R. Imler (SEAL)  
Herbert R. Imler

/s/ Richard Berkebile (SEAL)  
Richard Berkebile

/s/ Terry Leach (SEAL)  
Terry Leach

/s/ Charles W. Carney (SEAL)  
Charles W. Carney

/s/ Clyde A. Ressler (SEAL)  
Clyde A. Ressler

COMMONWEALTH OF PENNSYLVANIA:  
: SS:  
COUNTY OF BEDFORD :

Before me, a Notary Public, in and for the County aforesaid, personally appeared THOMAS E. BAILEY, WAYNE BENNETT, and CLYDE A. RESSLER, three of the above-named incorporators who, in due form of law, acknowledged the foregoing instrument to be their act and deed for the purposes specified.

/s/ Thomas E. Bailey  
Thomas E. Bailey

/s/ Wayne Bennett  
Wayne Bennett

/s/ Clyde A. Ressler  
Clyde A. Ressler

WITNESS my hand and seal of office the 12th day of October, 1971.

/s/ Mary M. Imler (SEAL)  
Notary Public  
(Title of Officer)

My Commission expires: February 13, 1974

IN THE COURT OF COMMON PLEAS IN AND FOR BEDFORD COUNTY  
PENNSYLVANIA

In re: BEDFORD AREA AMBULANCE SERVICE

DECREE OF INCORPORATION

AND NOW, this 30th day of November, 1971, an application for a charter, and the Articles of Incorporation of BEDFORD AREA AMBULANCE SERVICE under the "Nonprofit Corporation Law", approved May 5, 1933, as amended, having been presented to me, President Judge of said Court, accompanied by proof of the publication of the notice of such application and a certificate from the Department of State showing the registration of the proposed corporate name as required by law, I do hereby certify that I have perused and examined the said instruments and that I find the same to be in the proper form and within the provisions and requirements of the Act of the General Assembly of the Commonwealth of Pennsylvania, known as "The Nonprofit Corporation Law," approved May 5, 1933, as amended; and that the purposes of the proposed corporation appear to be lawful and not injurious to the community. It is therefore ordered and decreed, that the Articles of Incorporation of Bedford Area Ambulance Service be and the same are hereby approved and that upon the recording of the said Articles and this order, the subscribers thereto and their associates and successors, shall be a body politic and corporate in deed and in law by the name of Bedford Area Ambulance Service, which shall exist perpetually and shall be invested with, and have and enjoy all the powers, privileges, and franchises incident to a nonprofit corporation and be subject to all the duties, requirements, and restrictions specified and enjoined in and by the "Nonprofit Corporation Law," and all other applicable laws of this Commonwealth.

WITNESS MY HAND and seal of the said Court.

Per Curiam

/s/ Richard C. Snyder

P.J.

Recorded in the Office for the Recording of Deeds for the  
County of Bedford, In Charter Book No. 2 , Page 233 .

WITNESS MY HAND and Seal of Office this 2nd day of December , 1971.

/s/ Harry F. McKinley  
Recorder of Deeds

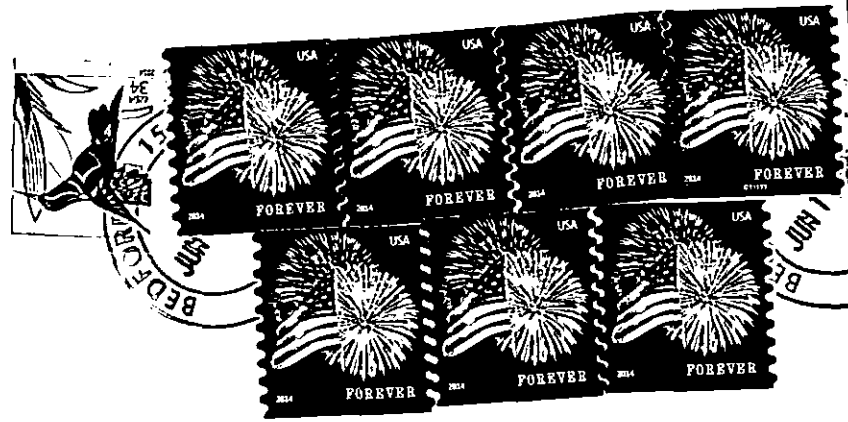
CERTIFIED MAIL™

Bedford Area Ambulance Service

P.O. Box 625  
Bedford, PA 15522



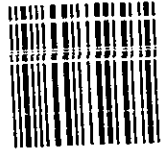
7013 3020 0001 4598 6403



RETURN RECEIPT  
REQUESTED



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17105

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BEDFORD, PA  
15522  
JUN 11 2014  
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\$4.47  
00063922-04

Pennsylvania Public Utilities  
Commission  
Bureau of Transportation & Safety  
P.O. Box 3265  
Harrisburg, PA 17105-3265

**SECURE BUREAU**

RETURN RECEIPT  
REQUESTED

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BUREAU OF  
TECHNICAL UTILITIES SERVICES  
2014 JUN 13 PM 1:20