

KJR

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
DECEMBER 30, 1991

IN REPLY PLEASE
REFER TO OUR FILE

SCOTT, ROBERT P. PROF MVG VAN
4602 GARY DRIVE
BRISTOL PA 19007

A-00107747
P. 2

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE DECEMBER 31, 1991

FOR EXPIRATION OR CANCELLATION OF

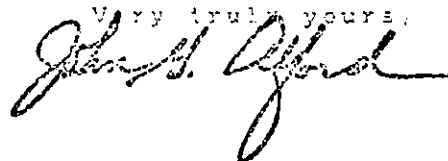
BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE

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

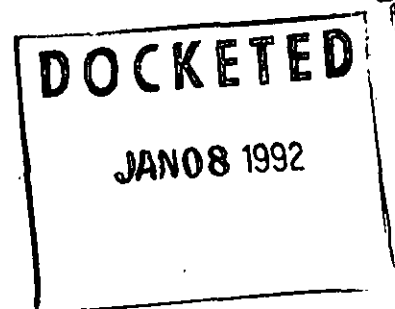
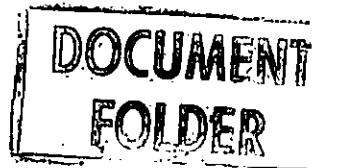
Very truly yours,



John G. Alford
Acting Secretary

cc: Enforcement Division

Certified Mail



SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, and 4.
- 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 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-00107747 F. 2

RPBERT P SCOTT PROFESSIONAL
MOVING VAN SERVICE CO.

4a. Article Number

044545

4b. Service Type

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

7. Date of Delivery

11/24/92

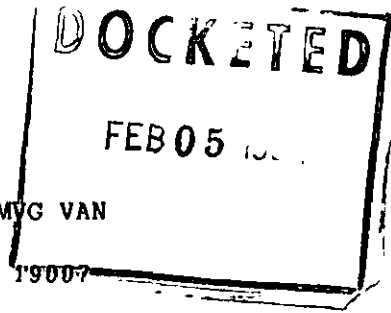
5. Signature (Addressee)

6. Signature (Agent)

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

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
FEBRUARY 04, 1992

KJR



IN REPLY PLEASE
REFER TO OUR FILE

A-00107747

F. 2

SCOTT, ROBERT P. PROF MYG VAN
4602 GARY DRIVE
BRISTOL PA 19007

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,

Julia A. Byndas

Insurance Section
(717) 787-1227

cc: Enforcement Division

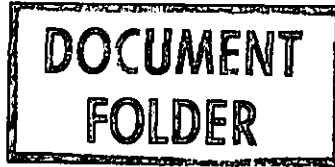
COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120

DECEMBER 15, 1992

IN REPLY PLEASE
REFER TO OUR FILE
A-00107747

F. 2

SCOTT, ROBERT P. PROF MVG VAN
4602 GARY DRIVE
BRISTOL PA 19007



NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE DECEMBER 19, 1992

FOR EXPIRATION OR CANCELLATION OF
BODILY INJURY AND PROPERTY DAMAGE 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,

John G. Alford
Secretary

DOCKETED

DEC 17 1992

cc: Enforcement Division

Certified Mail

EVV

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 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 will show to whom the article was delivered and the date delivered.

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-00107747 F. 2

ROBERT P. SCOTT
PROFESSIONAL MOVING VSN
SERVICE CO.

4a. Article Number **44122**

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery **12-18-92**

5. Signature (Addressee)

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA. 17120
DECEMBER 18, 1992

KJR

IN REPLY PLEASE
REFER TO OUR FILE
A-00107747

F. 2

SCOTT, ROBERT P. PROF MVG VAN
4602 GARY DRIVE
BRISTOL PA 19007

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,

Julia A. Byndae

Insurance Section
(717) 787-1221

3114

cc: Enforcement Division

DOCUMENT
FOLDER

DOCKETED
DEC 21 1992