

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17120  
APRIL 05, 1989

IN REPLY PLEASE  
REFER TO OUR FILE

A-00107793

TRANS AMERICAN TRKG SERVICE, INC  
115 ST. NICHOLAS AVENUE  
S. PLAINFIELD NJ 07080

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE APRIL 09, 1989

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

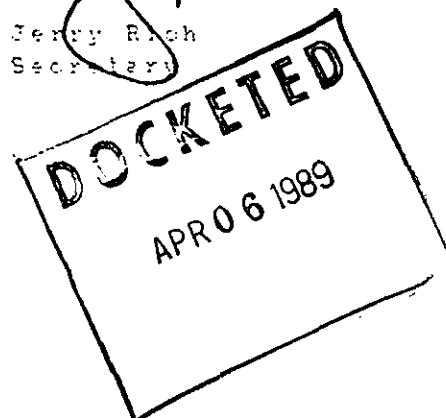
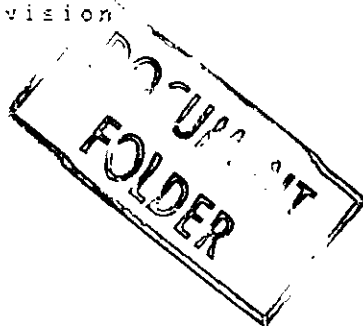
Upon receipt and acceptance of the required certificate of Insurance, you will receive written notification that the suspension is lifted and that you may resume operations

Very truly yours,

  
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.    2.  Restricted Delivery (Extra charge)

3. Article Addressed to:

A-00107793

TRANS AMERICAN TRUCKING SERVICE,  
INC.

4. Article Number

44483

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 - Address

X *C. Lopoduto*

6. Signature - Agent

X

7. Date of Delivery

*4/7/89*

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

*EA*

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17120  
APRIL 11, 1989

IN REPLY PLEASE  
REFER TO OUR FILE

A-00107793

F.1

TRANS AMERICAN TRKG SERVICE, INC  
115 ST. NICHOLAS AVENUE  
S. PLAINFIELD NJ 07080

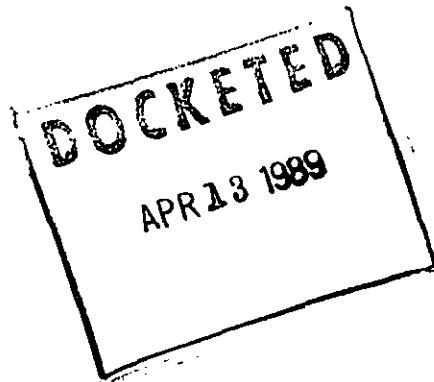
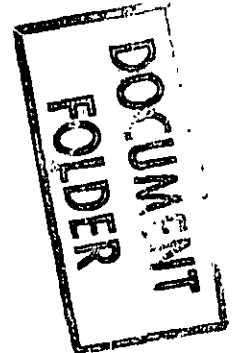
NOTICE TO LIFT SUSPENSION

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. McCarthey*  
Insurance Section  
(717) 787-1227

cc Enforcement Division



COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17120  
DECEMBER 08, 1989

IN REPLY PLEASE  
REFER TO OUR FILE

A-00107793

TRANS AMERICAN TRKG SERVICE, INC  
115 ST. NICHOLAS AVENUE  
S. PLAINFIELD NJ 07080

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE DECEMBER 12, 1989

FOR EXPIRATION OR CANCELLATION OF

BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE

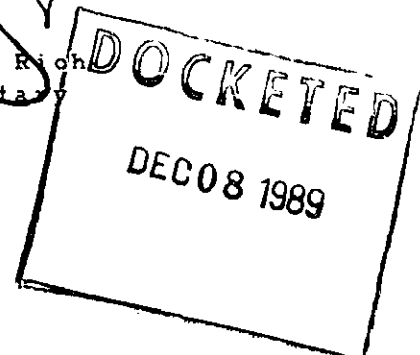
This is to notify you that as of the above effective date, the authority granted to you by the Pennsylvania Public Utility Commission is hereby suspended as more thoroughly described on the attached sheet.

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.

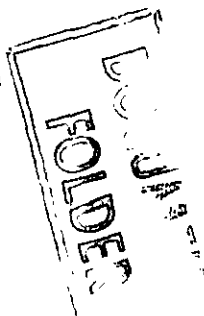
Very truly yours,

  
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 with 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.      2.  Restricted Delivery (Extra charge)

3. Article Addressed to:  
A-00107793  
  
TRANS AMERICAN TRUCKING SERVICE, INC.

4. Article Number

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 - Address  
X

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

6. Signature - Agent  
X *[Handwritten Signature]*

7. Date of Delivery  
*12-18-86*      *ATL*

B

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P.O. BOX 3265, HARRISBURG, PA. 17120  
DECEMBER 18, 1989

TRANS AMERICAN TRKG SERVICE, INC  
115 ST. NICHOLAS AVENUE  
S. PLAINFIELD NJ 07080

DOCKETED  
DEC 19 1989

IN REPLY PLEASE  
REFER TO OUR FILE

A-00107793

DOCUMENT  
FOLDER

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  
MAY 30, 1990

TRANS AMERICAN TRKG SERVICE, INC.  
115 ST. NICHOLAS AVENUE  
S. PLAINFIELD NJ 07080

DOCKETED  
MAY 31 1990

IN REPLY PLEASE  
REFER TO OUR FILE

A-00107793

NOTICE OF SUSPENSION OF PUC OPERATING RIGHTS

EFFECTIVE JUNE 02, 1990

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,

  
Jerry Rich  
Secretary

cc: Enforcement Division

Certified Mail

DOCUMENT  
FOLDER

**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 so 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)

<p>3. Article Addressed to:</p> <p>A-00107793</p> <p>TRANS AMERICAN TRUCKING SVC., INC</p>	<p>4. Article Number</p> <p><b>044457</b></p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered      <input type="checkbox"/> Insured</p> <p><input type="checkbox"/> Certified        <input type="checkbox"/> COD</p> <p><input type="checkbox"/> Express Mail    <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b></p>
<p>5. Signature - Address</p> <p>X <i>Susan Fried</i></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature - Agent</p> <p>X</p>	
<p>7. Date of Delivery</p> <p><i>6/1/98</i></p>	