

CAPTION SHEET

SE MANAGEMENT SYSTEM

1. REPORT DATE: 00/00/00	:	
2. BUREAU: TNR	:	
3. SECTION(S):	:	
5. APPROVED BY:	:	4. PUBLIC MEETING DATE:
DIRECTOR:	:	00/00/00
SUPERVISOR:	:	
6. PERSON IN CHARGE: HOSHOUR	:	7. DATE FILED: 04/18/96
8. DOCKET NO: A-00107793C9601	:	9. EFFECTIVE DATE: 00/00/00

PARTY/COMPLAINANT: TRANSPORTATION AND SAFETY, BUREAU OF

RESPONDENT/APPLICANT: TRANS AMERICAN TRKG SERVICE, INC

COMP/APP COUNTY:

UTILITY CODE: 700377

ALLEGATION OR SUBJECT

FAILED TO MAINTAIN EVIDENCE OF BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE.

DOCKETED
APR 22 1996

**DOCUMENT
FOLDER**

BTL

ORIGINAL

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

PENNSYLVANIA PUBLIC UTILITY COMMISSION, :
BUREAU OF TRANSPORTATION AND SAFETY :

v. :

TRANS AMERICAN TRUCKING SERVICE, INC. :

A-00107793C9601
F. 2

**DOCUMENT
FOLDER**

COMPLAINT

DOCKETED
APR 22 1996

The Pennsylvania Public Utility Commission (Commission) is a duly constituted agency of the Commonwealth of Pennsylvania, empowered to regulate motor carriers and brokers within this Commonwealth. The Commission has delegated its authority to initiate proceedings which are prosecutory in nature to the Bureau of Transportation and Safety and other bureaus with enforcement responsibilities. Pursuant to that delegated authority and Section 701 of the Public Utility Code, the Bureau of Transportation and Safety Prosecutory Staff hereby represents as follows:

1. That TRANS AMERICAN TRUCKING SERVICE, INC., respondent, maintains a principal place of business at 115 ST. NICHOLAS AVENUE, SOUTH PLAINFIELD NJ 07080.
2. That at all times relevant to this Complaint, respondent held a certificate of public convenience issued by this Commission at Application Docket No. A-00107793, F. 2.
3. That pursuant to Section 512 of the Public Utility Code, 66 Pa. Code §512, and 52 Pa. Code Chapter 32; respondent is required to maintain evidence of current insurance on file with this Commission.
4. That respondent has failed to maintain evidence of bodily injury and property damage liability insurance, in violation of the Public Utility Code and regulations cited in Paragraph 3 of this complaint.
5. That as a result of failure to maintain evidence of current insurance on file with this Commission, the Bureau of Transportation and Safety Prosecutory Staff requests that the Commission revoke respondent's certificate of public convenience or order such other remedy as the Commission may deem to be appropriate.

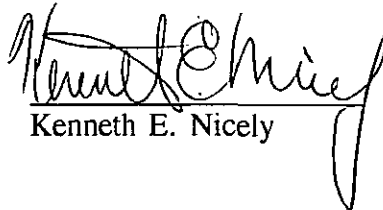
WHEREFORE, the Bureau of Transportation and Safety Prosecutory Staff hereby requests that the Commission revoke the certificate of public convenience held by TRANS AMERICAN TRUCKING SERVICE, INC., at Docket No. A-00107793, F. 2, for failure to maintain current evidence of insurance on file with the Commission and order such other remedy as the Commission may deem to be appropriate.

Respectfully submitted,

Kenneth E. Nicely, Director
Bureau of Transportation and Safety
P.O. Box 3265
Harrisburg, PA 17105-3265

VERIFICATION

I, Kenneth E. Nicely, hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief and that I expect to be able to prove the same at any hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.


Kenneth E. Nicely

DATE: 4/18/96

NOTICE TO PLEAD

A. You must file an answer within twenty (20) days of the date of service. The date of service is the mailing date as indicated at the top of the Secretarial cover letter for this complaint and notice to plead. 52 Pa. Code § 1.56 (a). The answer must raise all factual and legal arguments that you wish to claim in your defense and must include the docket number of this complaint. Your answer must be verified and the original and two (2) copies sent to:

John G. Alford, Secretary
Pennsylvania Public Utility Commission
P.O.Box 3265
Harrisburg, PA 17105-3265

B. If you fail to answer this complaint within twenty (20) days of the date of service as identified in Paragraph A above, the Bureau of Transportation & Safety will request that the Commission enter an order revoking your certificate of public convenience, contract carrier permit or brokerage license or imposing such other remedy as may be appropriate.

C. In lieu of an answer, you may elect not to contest this complaint by causing your insurer to file proper evidence of current insurance in accordance with the Commission's regulations. The proof of insurance must be filed with the Secretary of the Commission at the address set forth in paragraph A. Upon receipt of the proof of insurance from your insurer, the complaint proceeding shall be closed.

D. If you file an answer which either admits or fails to deny the allegations of the complaint, the Bureau of Transportation & Safety will request that the Commission enter an order revoking your certificate, permit or license.

E. If you file an answer which contests the complaint, the matter will be assigned to an administrative law judge for hearing and decision.

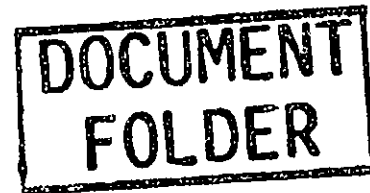
COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O.BOX 3265, HARRISBURG, PA 17105-3265

Date of Service: April 22, 1996

A-00107793C9601

PENNSYLVANIA PUBLIC UTILITY
COMMISSION, BUREAU OF
TRANSPORTATION AND SAFETY
v.
TRANS AMERICAN TRUCKING SERVICE, INC.

TRANS AMERICAN TRUCKING SERVICE, INC.
115 ST. NICHOLAS AVENUE
SOUTH PLAINFIELD, NJ 07080



Dear Sir/Madam:

This is to advise that the attached complaint has been filed against you by the Prosecutory Staff of the Bureau of Transportation and Safety.

Detailed instructions on how to proceed are contained in the **NOTICE TO PLEAD**. You are advised to read them carefully.

If you have any questions, contact the complainant at the telephone number shown on the complaint.

Very truly yours,

John G. Alford
Secretary

JGA:amh
Enclosure

DOCKETED
APR 22 1996

SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address (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): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: <div style="border: 1px solid black; padding: 5px; margin: 5px;"> INS COMP A-00107793C9601 TRANS AMERICAN TRUCKING SER. 115 ST. NICHOLAS AVENUE SOUTH PLAINFIELD, NJ 07080 JAF </div>		4a. Article Number P 918 081 983	
		4b. Service Type <input checked="" type="checkbox"/> CERTIFIED	
		7. Date of Delivery 4/55	
5. Signature (Addressee) <i>A. K. Howard</i>		8. Addressee's Address (ONLY if requested and fee paid.)	
6. Signature (Agent)			
PS Form 3811, November 1990		DOMESTIC RETURN RECEIPT	

4/29/96

SUBJECT: CLOSE INSURANCE COMPLAINT

TO: DOCKET ROOM

FROM: INSURANCE SECTION *JP*

RECEIVED
APR 30 1996

SECRETARY'S OFFICE
Public Utility Commission

Please mark the record "closed" in the following Complaint case(s) since the respondent has satisfied the complaint by filing the requisite insurance.

Thank you.

Docket #

Company Name

A-10779309601

*Trans. American
159. Ser. Inc.*

JAF

DOCKETED
MAY 01 1996

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FOLDER

cc: Insurance File

END