



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

September 30, 1987

IN REPLY PLEASE
REFER TO OUR FILE

A. 00107294

James D. Campbell, Jr., Esquire
130 State Street
P.O. Box 1000
Harrisburg, PA 17108

Application of BUCKS COUNTY TRANSPORT, INC., a corporation of the Comm. of PA

To Whom It May Concern:

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

Enclosed is the brokerage license evidencing the Commission's approval of the right to operate.

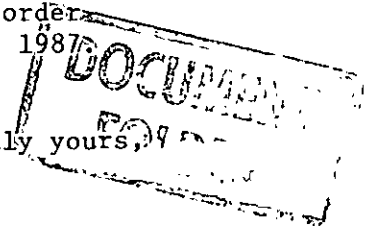
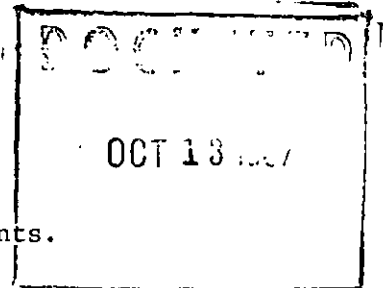
Kindly attach the enclosures to the compliance order previously issued and mailed to you on September 25, 1987.

Very truly yours,

Jerry Rich, Secretary

EMD
Certified Mail

BUCKS COUNTY TRANSPORT, INC.
70 West Oakland Avenue
Doylestown, PA 18901



PENNSYLVANIA
PUBLIC UTILITY COMMISSION

In the matter of the Application of

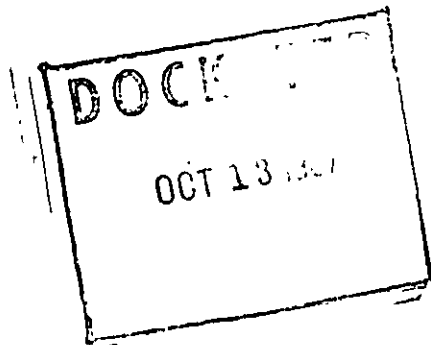
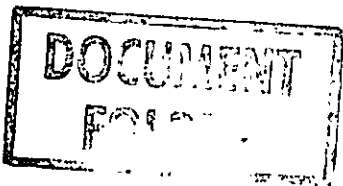
BUCKS COUNTY TRANSPORT, INC., a
corporation of the Commonwealth of PA

B R O K E R A G E
L I C E N S E

A. 00107294
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 determines that the granting of said license will be consistent with the public interest and the policy declared in Section 801 of the Public Utility Law, and this license 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 30th day of SEPTEMBER, 1987.



PENNSYLVANIA
PUBLIC UTILITY COMMISSION

Jerry Lich
Secretary

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.

3. Article Addressed to: A-107294		4. Article Number 44826	
James D. Campbell Jr <i>Esq.</i>		Type of Service:	
		<input type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured <input type="checkbox"/> COD
5. Signature — Addressee X <i>E. Fragar</i>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature — Agent X		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery OCT 5 1987			