



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

September 24, 1990

IN REPLY PLEASE
REFER TO OUR FILE

A. 00108448

Kenneth E. Sands, Jr., Esquire
528 Elm Street
Reading, PA 19601

DOCKETED
OCT 18 1990

**DOCUMENT
FOLDER**

Application of EMPIRE WRECKING COMPANY OF READING PENNSYLVANIA

To Whom It May Concern:

In review of our records it has been found that you have still not complied with the Commission's order dated May 24, 1990.

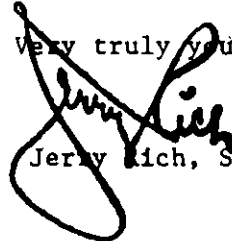
In order to process your approved application it is necessary to file with the Commission tariff and insurance filings.

Motor carriers operating without complying with these requirements and hence without a certificate of public convenience, contract carrier permit or a brokerage license are operating illegally and are subject to the penalty provisions or the Public Utility Law.

Please file the requirements needed within thirty (30) days of receipt of this letter or the application will be dismissed for lack of prosecution.

Thank you for your co-operation in this matter.

Very truly yours,


Jerry Rich, Secretary

EMD
Certified Mail

Tariff Section 717-787-5521
Insurance Section 717-787-1227
Assessment Section 717-787-5620
Annual Report Section 717-787-3964
Contracts 717-783-5945

EMPIRE WRECKING COMPANY OF READING, PENNSYLVANIA
1420 Clarion Street
Reading, PA 19601

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 prevent this card from being returned to you. 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)

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| 3. Article Addressed to: <i>A-108448</i> <i>Kenneth Sands J. Ezy</i> | 4. Article Number <i>044723</i> Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise |
| 5. Signature - Addressee <i>X</i> | 8. Addressee's Address (ONLY if requested and fee paid) |
| 6. Signature - Agent <i>X</i> <i>Spice Brook</i> | |
| 7. Date of Delivery <i>9/25/96</i> | |