



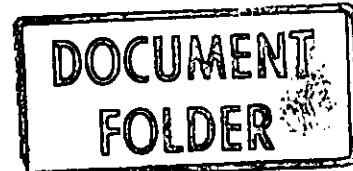
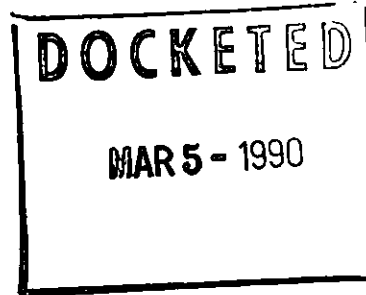
COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG, Pa. 17120

January 3, 1990

IN REPLY PLEASE  
REFER TO OUR FILE

A. 00108519  
Folder 1 & 2

David H. Radcliff, Esquire  
407 North Front Street  
Harrisburg, PA 17101



Application of ACE MOVING AND STORAGE CORPORATION, a corporation of the  
Commonwealth of Pennsylvania

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 certificate of public convenience evidencing the  
Commission's approval of the right to operate.

Kindly attach the enclosures to the compliance order previously  
issued and mailed to you.

Very truly yours,

Jerry Rich, Secretary

Certified Mail

ACE MOVING AND STORAGE CORPORATION  
830 East Main Street  
Larksville, PA 18651

PENNSYLVANIA  
PUBLIC UTILITY COMMISSION

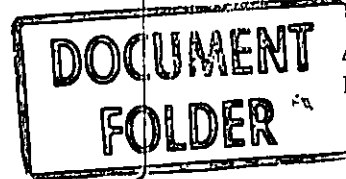
DOCKETED

MAR 5 - 1990

IN THE MATTER OF THE APPLICATION OF

ACE MOVING AND STORAGE CORPORATION, a corporation  
of the Commonwealth of Pennsylvania

CERTIFICATE  
OF  
PUBLIC CONVENIENCE



A. 00108519  
Folder 2

The Pennsylvania Public Utility Commission hereby certifies that after an investigation and/or hearing had on the above entitled application, it has, by its report and order made and entered, a copy of which is attached hereto and made a part hereof, found and determined that the granting of said application is necessary or proper for the service, accommodation, convenience and safety of the public, and this certificate is issued evidencing its approval of the said application as set forth in said report and 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 3rd day of JANUARY, 19 90.

PENNSYLVANIA  
PUBLIC UTILITY COMMISSION

Attest:

A handwritten signature in cursive script, appearing to read "James L. ...".

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. (Extra charge)      2.  Restricted Delivery. (Extra charge)

3. Article Addressed to: <i>A-108519 F1+2</i>  <i>David Radcliffe Esq</i>	4. Article Number <b>044997</b>  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  Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b>
5. Signature - Address <b>X</b>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <b>X</b> <i>D. Brennan</i>	
7. Date of Delivery <i>11/6/90 Rert</i>	

*2*