



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

October 20, 1989

DOCUMENT  
OCT 27 1989

IN REPLY PLEASE  
REFER TO OUR FILE

A. 00108519  
Folder 1  
Folder 2

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

Application of ACE MOVING AND STORAGE CORPORATION, a corp of the Comm. of PA

To Whom It May Concern:

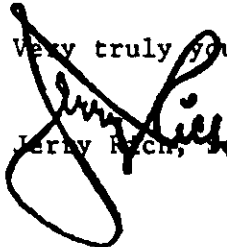
The Commission's records indicate that you have failed to comply within sixty(60) days, the necessary requirements of the Commission's order and cover letter which was sent to you on May 18, 1989. The grant of your certificate was expressly subject to the fulfilling of the requirements of the order. Specifically, you have failed to satisfy the requirements marked below:

- File a certificate of public liability and property damage insurance (Form E).
- File a cargo insurance certificate in the amount of \$5,000 per vehicle (Form H) or a cargo waiver.
- File an acceptable tariff.

Since you have not complied with the marked requirement(s), your application for a certificate of public convenience is hereby dismissed.

Since you do not have a certificate of public convenience, any operation as a motor carrier in intrastate commerce is a violation of the Public Utility Code, 66 Pa. C.S. §101 et seq, and will subject you to the penalties contained therein.

Very truly yours,

  
Jerry Rich, Secretary

EMD  
Certified Mail  
cc:

ACE MOVING AND STORAGE CORPORATION  
830 East Main Street  
Larksville, PA 18751

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 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</i> <i>F2</i> <i>David H. Radcliff Esq</i>	4. Article Number <b>044473</b>
5. Signature - Address <i>X</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
6. Signature - Agent <i>X</i> <i>C. V. Prof</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery <i>10/21/89</i>	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

**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</i> <i>F1 + (2)</i> <i>Ace Moving &amp; Storage Corp</i>	4. Article Number <b>044475</b>
5. Signature - Address <i>X</i> <i>[Signature]</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
6. Signature - Agent <i>X</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery <i>10-21-89</i>	8. Addressee's Address (ONLY if requested and fee paid)

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