

3/3/15 Original to Compliance assignments
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COMMONWEALTH OF PENNSYLVANIA
PUBLIC UTILITY COMMISSION
PO BOX 3265
HARRISBURG, PA 17105-3265

LAST
RETURN
OUT OF
BUSINESS

2014 ASSESSMENT REPORT-MOTOR CARRIERS

This Report **MUST BE FILED** not later than **MARCH 31, 2015**. Failure to file may result in fines up to \$1,000 for each day a violation continues (66 Pa. C.S. § 3301).

TRADE OR CORPORATE NAME OF UTILITY: COYNE, KEITH B.	UTILITY CODE: 703173	APPLICATION # A-0014999
CONTACT NAME:		
ADDRESS 1: 2106 MTN RD	ADDRESS 2 (Floor, Suite, etc.):	
CITY, STATE, ZIP: STROUDSBURG, PA 18360		

RECEIVED
2015 MAR - 5 AM 7:54
PA PUC
SECRETARY'S BUREAU

OPERATING REVENUE FOR CALENDAR YEAR 2014 (January 1, 2014-December 31, 2014)

(All amounts shall be rounded to the nearest dollar.)

	PROPERTY	HOUSEHOLD GOODS	PASSENGER	
			Group and Party 16 or more	Passenger 15 and Under
1. PA INTRASTATE OPERATING REVENUE	\$ 57,750	\$	\$	\$
2. PA EXEMPT INTRASTATE REVENUE	\$ 57,750	\$	\$	\$
3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1)	\$ - 0 -	\$	\$	\$

(All amounts shall be rounded to the nearest dollar.)

PA EXEMPT INTRASTATE REVENUE Enter a number from enclosed Exempt Revenue list as applicable. (Attach additional sheets as needed)	PROPERTY	HOUSEHOLD GOODS	PASSENGER	
			Group and Party 16 or more	Other
#4 WASTE, EXCAVATED AND ROAD CONSTRUCTION MATERIALS	\$ 57,750	\$	\$	\$
TOTAL (Enter on Line 2 above)	\$	\$	\$	\$

RECEIVED
ADMINISTRATIVE SERVICES
2015 MAR - 2 AM 10:18
PA PUC

UCR REGISTRATION INFORMATION

2014 UCR Registered: YES NO

IF YES:

US DOT #: _____ INTERSTATE OPERATING REVENUE: \$ - 0 -

MC Number: _____

AUTHORIZATION FOR RELEASE OF STATE TAX RECORDS

In accordance with Sections 505 and 506 of the Public Utility Code, as a means to verify the accuracy of financial information supplied to the Public Utility Commission, I hereby authorize the Pennsylvania Department of Revenue to release to the Public Utility Commission, any tax records filed or compiled with regard to the below-listed utility and/or individual.

KEITH B. COYNE

Utility Name

X

Signature

Date: _____

KEITH B. COYNE
Name (Printed)

OWNER
Title

AFFIDAVIT

I affirm that the information reported herein is complete, true and correct.

(Signature of Individual or Officer)

(Date)

READABLE (PRINT OR TYPE) NAME OF INDIVIDUAL or OFFICER ABOVE:

KEITH B. COYNE

NOTARIZATION (Required)
Subscribed and sworn to before me

this _____ day of _____ 2015

TRADE NAME OR CORPORATE NAME OF UTILITY:

KEITH B. COYNE

NOTARY SIGNATURE

FEDERAL ID:

22-2461570

TELEPHONE NO.:

Office () Ext.
Cell ()

OFFICIAL
SEAL

(Official Title)

Name of person to be contacted for additional information:

Name: KEITH B. COYNE
(printed)

Telephone: _____ Ext.

(Date My Commission Expires)

**APPLICATION FOR APPROVAL OF ABANDONMENT OR
DISCONTINUANCE OF SERVICE, IN WHOLE OR IN PART**

BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

(See Instructions Before Preparing Application)

In re:

Application Docket
No. A- 000114999
Folder No. _____

For approval of the abandonment or
discontinuance of common carrier service.

TO PENNSYLVANIA PUBLIC UTILITY COMMISSION:

1. KEITH B. COYNE

(Name of applicant, and trade name, as it appears on the Certificate
of Public Convenience.)

2106 MT. RD.

(Business Street Address)

STROVASSBURG PA 18360 MONROE 570-656-5763
(City) (State) (Zip) (County) (Telephone)

2. Applicant's attorney (for this application) is:

N/A

(Name)

(Address)

(Telephone)

3. Any notice, process or order of the PUC should be served upon:

KEITH B. COYNE P.O. BOX 274 BATH NC 27808

(Name)

(Address)

4. This application is for the discontinuance of ALL of the
service now authorized. (All or Part)

VERIFICATION

KEITH B. COYNE hereby states that the statements made in the
(Name of Person)
foregoing are true and correct to the best of his/her knowledge, information and
belief. The undersigned understands that the estimates therein are made subject
to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to
authorities.

Keith B. Coyne
Signature of Person

Date: 2/23/15

5. Attach the following, as appropriate (check those attached):

- Exhibit A: A statement of the right or rights to be abandoned or discontinued (required for partial abandonments or discontinuances only).
- Exhibit B: A statement of the revenues and expenses associated with the operation of the service to be discontinued or abandoned.
- Exhibit C: For motor carriers of passengers seeking to discontinue service over any scheduled route also encompassed by interstate operating authority, a statement containing:
 - i. Description of interstate authority;
 - ii. *Statement of the extent to which interstate and intrastate revenues received for the service sought to be abandoned are less than the variable costs of providing that service, including depreciation for revenue equipment. This statement shall include a designation of those items claimed to be variable costs; and*
 - iii. An estimate of the annual subsidy required, if any, to continue the service.

6. Approval of the application is necessary or proper for the following reasons:

Wherefore, Applicant requests the Commission to cancel, or amend the certificate of public convenience, as now held, in conformance with the application.

Applicant sign here:



(Corporate Seal)

(If a partnership, each partner must sign; if a corporation, at least one officer must sign and affix corporate seal.)