

Kevin P. Hunter
Hunter Contracting LLC
820 Venetia Road
Venetia, PA 15367

August 26, 2015

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265

Re: Pennsylvania Public Utility Commission v. Hunter Contracting LLC
Docket No. C-2015-2497296

Dear Secretary Chiavetta:

Enclosed please find the original and one copy of the Answer to the Complaint in the above referenced docket.

Please date stamp and return the copy in the enclosed pre-stamped envelope.

Thank you.

Sincerely,


Kevin P. Hunter
Hunter Contracting LLC

c: Michael L. Swindler, Deputy Chief Prosecutor

RECEIVED

SEP 01 2015

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

RECEIVED

SEP 14 2015

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

Pennsylvania Public Utility Commission
Bureau Of Investigation And Enforcement

Docket No. C-2015-2497295

v.

Hunter Contracting LLC
820 Venetia Road
Venetia, PA 15367

RECEIVED

SEP 01 2015

ANSWER OF HUNTER CONTRACTING LLC

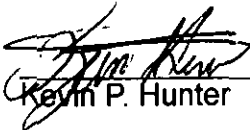
PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Hunter Contracting LLC hereby answers the Complaint of the Pennsylvania Public Utility Commission's Bureau of Investigation and Enforcement, dated August 17, 2015.

1. Denied.
2. Admitted.
3. Admitted.
4. Denied. Hunter Contracting LLC has maintained all necessary insurances required by the PUC's regulations. Both Cargo and Liability Insurance were renewed with Marthinsen and Salvitti Insurance Group as of July 24th for an additional year. The insurance company must submit the evidence of coverage to the PUC; Hunter Contracting cannot submit this filing to the Commission. The insurance company claims that it submitted the necessary forms for Hunter's Cargo and Liability Insurance prior to the indicated date. The Commission issued the attached letter confirming receipt of the Liability Insurance. For the Cargo Insurance, either the insurance company was incorrect or the evidence of the Cargo coverage was lost in the mail, or the document has been misfiled at the Commission. Hunter Contracting has directed the insurance company to immediately refile the insurance form with the Commission. As evidenced by the attached Accord Certificate of Liability Insurance, Hunter Contracting has continuously maintained its Cargo Insurance. Because any error was not the fault of Hunter Contracting, we are contesting the proposed fine.

VERIFICATION

I, Kevin P. Hunter, hereby state that the facts above are true and correct to the best of my knowledge, information and belief, and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements made herein are made subject to the penalties of 18 Pa.C.S. Section 4904 (relating to unsworn falsification to authorities).


Kevin P. Hunter

Date: August 26, 2015



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/22/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Marthinsen & Salvitti Insurance Group, Inc 140 Park Avenue Washington PA 15301	CONTACT NAME: Pamela Black PHONE (A/C No, Ext): (724) 222-8400 FAX (A/C No): (724) 222-0141 E-MAIL ADDRESS: pblack@msipa.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED Hunter Contracting LLC 820 Venetia Rd Venetia PA 15367	INSURER A: Nautilus Insurance Company	
	INSURER B: National Casualty Company	
	INSURER C: Svanston	
	INSURER D: Loyds	
	INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 15-16 All **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

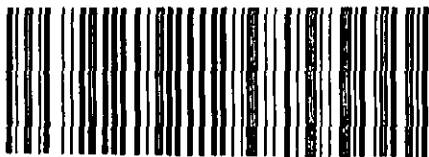
INBR LTR	TYPE OF INSURANCE	ABSOLUTE SUBR INSRD WORD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		MS577960	7/24/2015	7/24/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ Included \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		CTO1400897	7/24/2015	7/24/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		NKLV10LS102653	7/24/2015	7/24/2016	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
D	Motor Truck Cargo Excess MTC		3142238058 3142238058	7/24/2015 7/24/2015	7/24/2016 7/24/2016	100,000 400,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 The Commonwealth of Pennsylvania is an additional insured as their interest may appear.

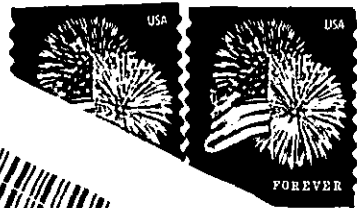
CERTIFICATE HOLDER PA Dept of Transportation Central Permit Office P O Box 2671 Harrisburg, PA 17105-2671	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Pamela Black/PLB <i>Pamela L. Black</i>

Hunter Contracting LLC
820 Venetia Road
Venetia, PA. 15367

CERTIFIED MAIL™



7013 3020 0001 8104 8479



1000

17120

U.S. POSTAGE
PAID
VENETIA, PA
SEP 15 2015
AMOUNT

\$6.96
00086344-00

Commonwealth of Pennsylvania
PA Public Utility Commission
400 North Street 2nd Floor
Harrisburg, PA 17120

C-2015-2497296

Attn: Rosemary Chiavetta