



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

IN REPLY PLEASE
REFER TO OUR FILE

March 4, 1996

WOLF BALDWIN & ASSOCIATES
PO BOX 444
POTTSTOWN PA 19464

In re: A-00112751 - Application of Western Berks Ambulance Association

Dear Sir:

The above referenced application has been assigned for review without oral hearing. In order to reach a determination on the application, you are being required to file verified statements in accordance with 52 Pa. Code Section §3.381(e)(1). You will be required to file:

- A. VERIFIED STATEMENT OF APPLICANT
- B. VERIFIED STATEMENT(S) IN SUPPORT OF THE APPLICATION.

The verified statements should be in paragraph form. Each heading contained in the attached minimum outline should be a separate section or paragraph.

You should be aware of the fact that the verified statements will be reviewed based on the Commission's decision in the Application of Blue Bird Coach Lines, Inc., (A-00088807, F. 2, Am-K) 72 Pa. P.U.C. 262 (1990), which indicates: (1) the supporting witnesses must give evidence which is probative and relevant to the application proceeding; (2) the supporting witnesses must identify Pennsylvania origin and destination points between which they require transportation and those points must correspond with the scope of the operating territory specified in the application, including requests for vice versa authority; and (3) the number of witnesses which will represent a cross section of the public on the issue of need will vary with the breadth of the intended territory and commodity description.

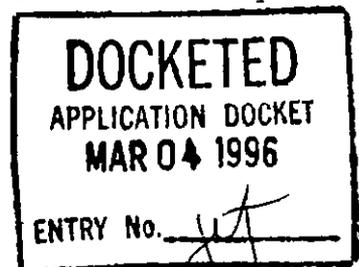
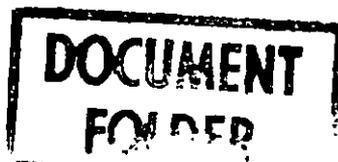
You are being granted an initial thirty (30) days to file verified statements. They will be due on or before April 3, 1996.

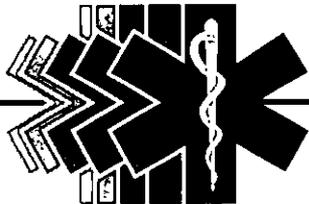
If additional time is required, it may be requested by telephone but must be followed in writing with the reasons for the extension stated. Questions about the application should be directed to Gale E. Travitz at 717-787-5513.

Very truly yours,

Gale E. Travitz
Application Review Section
Bureau of Transportation & Safety

GET:lg





Western Berks Ambulance Association

P.O. Box 2506
Belmont & Cecil Avenues
West Lawn, PA 19609-0506

EMERGENCY TELEPHONE
911

BUSINESS TELEPHONE
(610) 678-1545

FAX NUMBER
(610) 678-8187

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APR 03 1996

BUREAU OF
TRANSPORTATION & SAFETY

April 1, 1996

Gale E. Travitz
Application Review Section
PA Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265

Dear Ms. Travitz:

Enclosed are the verified statements of applicant and witness support for Docket A-00112751, Western Berks Ambulance Association.

I hope the information submitted is appropriate to the application that we are seeking. If on review you require clarification or additional information, please do not hesitate to contact me directly.

In advance, thank you for your time and consideration in this matter.

Sincerely,

Kevin Hinkle
Director of Corporate Development

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STATEMENT OF APPLICANT

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BUREAU OF
TRANSPORTATION & SAFETY

1. Legal name and domicile of applicant.

Western Berks Ambulance Association, 2506 Belmont Avenue; P.O. Box 2506, West Lawn, PA 19609
Non-profit corporation in the Commonwealth of Pennsylvania
Principal address: 2506 Belmont Avenue, West Lawn, PA 19609 ✓

2. Identity and qualifications of person making statement for the applicant.

Kevin P. Hinkle, Director of Corporate Development ✓
Western Berks Ambulance Association
P.O. Box 2506
West Lawn, PA 19609 (610) 678-1545

Through delineation of duties as described by the Board of Directors, the Director of Corporate Development is authorized to pursue Public Utility Commission Licensure.

3. Whether applicant is affiliated with any other carrier, with a description of affiliation.

.None

4. Authority sought.

A-00112751 Western Berks Ambulance Association (2506 Belmont Avenue, West Lawn, Berks County, PA 19609)- persons in paratransit service, between points in the county of Berks, and from points in the said county, to points in Pennsylvania, and return; limited to the transportation of ambulatory and non-ambulatory passengers in specially equipped vehicles with side opening doors, ramps, lifts or other facilities to accommodate the infirm or disabled.

5. General scope of currently authorized operations.

None

6. Duplicating authority which will result from grant of authority.

None

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7. Terminal facilities and communications network.

Vehicles will be housed/stored at the primary business address of 2506 Belmont Avenue; West Lawn, County of Berks, PA. This address serves as a response location for our emergency and non-emergency ambulance service. All vehicle repairs are performed at local service vendors. No clients that we service will wait for or be transported from our main business location. Our location is a two-story, three bay station situated in a residential area with appropriate approved local zoning for the operation. Our lot size is approx. 100' X 100'.

Our office is serviced by eight (8) dedicated telephone lines with automated answering. A specific station on the system is dedicated to transport requests and is managed by a service Supervisor or dispatcher. All our vehicles are equipped with multi-channel public safety radios (VHF) that can communicate directly with the County of Berks 911 Dispatch Center and our local use frequency, located at our main address. Each vehicle is equipped with cellular telephones and each driver carries a portable radio and alpha-numeric pager. Further our main office is equipped with three (3) dedicated fax/modem lines.

8. Equipment- make, model, year, owned or leased, and lessor.

- A. 1988 Dodge van, with raised roof and ADA compliant lift and equipment Owned
- B. 1996 Ford-Goshen Wheelchair bus, with raised roof and ADA compliant lift and equipment Owned

9. Safety Program.

All drivers employed by Western Berks Ambulance, by law, are required to complete a PA Department of Health approved Emergency Vehicle Operator's Course (EVOC). All personnel providing paratransit services have completed in-house training on vehicle operations, wheelchair operations, proper use of restraints and lift/ramp operations. Further all our personnel are PA certified Emergency Medical Technicians (EMT), capable of intervening with most medical emergencies. This includes compliance with OSHA Bloodborne Pathogens Guidelines (29 CFR 1910). All vehicles in our fleet have a mandatory preventive maintenance rotation managed by us and performed through a local vendor.

10. Service currently provided to supporting witness.

Currently, only medically-necessary wheelchair services are offered, primarily from skilled healthcare facilities or residences to other healthcare providers. We do not accept recreational or therapeutic transports.

11. Type of service offered.

Medically necessary Paratransit

12. Financial data- complete attached sheet.

See attached financial statement

13. Other information deemed pertinent.

It is the intent of Western Berks Ambulance Association to provide quality paratransit services to area healthcare facilities, providers and residents. We wish to primarily serve those individuals who are disabled, infirm, or ill and require specialized transportation services with vehicles that can accommodate these needs.

These calls for transportation will primarily originate or terminate at healthcare facilities that provide medical treatment. Although rare, there could exist situations where patients may be transported by other means (ie: air ambulance, ground ambulance, etc.) to facilities outside our normal area and may require return transportation via paratransit (wheelchair) vehicle. The determination of point of origin may be vague, based on who reviews the case and what criteria may be applied.

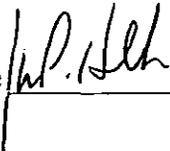
We recognize that there is a segment of the general public that is disabled and may require transportation to destinations other than healthcare facilities. Further, individuals who reside in personal care, group homes, or home care situations may benefit from recreational/social/therapeutic transports to local activities, such as those sponsored by agencies on aging, the disabled, etc. We understand that these may be a regulated function; however, we wish to provide this service to provide a full range of transportation options to our service subscribers and facilities under contract to us.

VERIFICATION OF STATEMENTS

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge information and belief. The undersigned understands that false statements herein are made subject to the penalties of 18 PA C.S. Section 4904 relating to unsworn falsification to authorities.

Dated: March 18, 1996

Signature



Kevin P. Hinkle

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BUREAU OF
TRANSPORTATION & SAFETY

WESTERN BERKS AMBULANCE ASSOCIATION

FINANCIAL STATEMENTS

AND OTHER FINANCIAL INFORMATION

DECEMBER 31, 1995 AND 1994

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KUNTZ LESHNER SIEGRIST & MARTINI LLP

CERTIFIED PUBLIC ACCOUNTANTS

50 BERKSHIRE COURT
WYOMISSING, PA 19610
(610)372-6600
FAX (610)372-6780

INDEPENDENT ACCOUNTANTS' REPORT

Board of Directors
Western Berks Ambulance Association
West Lawn, Pennsylvania

We have audited the statements of assets and liabilities resulting from cash transactions of Western Berks Ambulance Association as of December 31, 1995 and 1994, and the related statements of unrestricted revenue collected and expenses paid and changes in unrestricted net assets and cash flows for the years then ended. These financial statements are the responsibility of the Association's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As described in Note A, these financial statements were prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

In our opinion, the financial statements referred to above present fairly, in all material respects, the assets and liabilities resulting from cash transactions of Western Berks Ambulance Association as of December 31, 1995 and 1994, and the revenue collected and expenses paid and changes in net assets for the years then ended, on the basis of accounting described in Note A.

As described in Note A to the financial statements, the Association changed its method of financial statement presentation.

Kuntz Leshner Siegrist & Martini LLP

KUNTZ LESHNER SIEGRIST & MARTINI LLP
CERTIFIED PUBLIC ACCOUNTANTS

Wyomissing, Pennsylvania
January 26, 1996

WESTERN BERKS AMBULANCE ASSOCIATION

STATEMENTS OF ASSETS AND LIABILITIES RESULTING FROM CASH TRANSACTIONS

	<u>DECEMBER 31,</u> <u>1995</u>	<u>DECEMBER 31,</u> <u>1994</u>
ASSETS		
CURRENT ASSETS		
Cash, including short-term investments of \$103,889 and \$213,350 at December 31, 1995 and 1994, respectively	\$ <u>186,809</u>	\$ <u>252,427</u>
TOTAL CURRENT ASSETS	186,809 ✓	252,427
PROPERTY AND EQUIPMENT - on the basis of cost		
Land	24,720	4,720
Buildings and improvements	225,857	114,689
Ambulances and vehicle	549,458	361,339
Medical and communication equipment	230,189	207,996
Office equipment, furniture and fixtures	61,611	41,453
Deposits - property and equipment	<u>-</u>	<u>24,699</u>
	1,091,835	754,896
Less accumulated provisions for depreciation	<u>486,465</u>	<u>363,266</u>
NET PROPERTY AND EQUIPMENT	<u>605,370</u>	<u>391,630</u>
TOTAL ASSETS	\$ <u>792,179</u> ✓	\$ <u>644,057</u>
 LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Line of credit borrowings	\$ 37,669	\$ -
Payroll taxes withheld	1,515	1,045
Current portion of long-term debt	<u>30,814</u>	<u>48,434</u>
TOTAL CURRENT LIABILITIES	69,998 ✓	49,479
LONG-TERM DEBT - less current portion	227,029 ✓	47,036
NET ASSETS - Unrestricted, available for general use	<u>495,152</u>	<u>547,542</u>
TOTAL LIABILITIES AND NET ASSETS	\$ <u>792,179</u>	\$ <u>644,057</u>

The accompanying notes are an integral part of the financial statements.

WESTERN BERKS AMBULANCE ASSOCIATION

STATEMENTS OF UNRESTRICTED REVENUE COLLECTED AND EXPENSES PAID

AND CHANGES IN UNRESTRICTED NET ASSETS

	YEAR ENDED			
	<u>DECEMBER 31, 1995</u>		<u>DECEMBER 31, 1994</u>	
Changes in unrestricted net assets:				
Revenues collected and gains:				
Contributions:				
Membership drive	\$ 261,061	18.8%	\$ 281,456	25.0%
General public	770	.1	368	-
Business and other	<u>10,845</u>	<u>.8</u>	<u>10,061</u>	<u>.9</u>
	272,676	19.7	291,885	25.9
Less: direct fund-raising expenses	<u>11,359</u>	<u>.8</u>	<u>13,416</u>	<u>1.2</u>
	261,317	18.9	278,469	24.7
Gifts and grants	1,500	.1	13,864	1.3
Ambulance usage receipts	1,123,683	80.7	817,148	72.6
Interest income	4,114	.2	5,615	.5
Trust fund income	474	-	475	-
Miscellaneous income	<u>1,752</u>	<u>.1</u>	<u>10,287</u>	<u>.9</u>
TOTAL UNRESTRICTED REVENUES AND GAINS	1,392,840 ✓	100.0	1,125,858	100.0
Expenses and losses:				
Operating	1,083,177	77.8	755,977	67.1
General and administrative	230,471	16.5	163,453	14.5
Loss on disposal of assets	-	-	8,750	.8
Interest expense	8,383	.6	3,035	.3
Depreciation expense	<u>123,199</u>	<u>8.9</u>	<u>80,817</u>	<u>7.2</u>
TOTAL EXPENSES AND LOSSES	1,445,230 ✓	103.8	1,012,032	89.9
INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS	(52,390) ✓	<u>(3.8)%</u>	113,826	<u>10.1%</u>
Net assets - beginning of year	<u>547,542</u> ✓		<u>433,716</u>	
NET ASSETS - END OF YEAR	\$ <u>495,152</u> ✓		\$ <u>547,542</u>	

The accompanying notes are an integral part of the financial statements.

WESTERN BERKS AMBULANCE ASSOCIATION

STATEMENTS OF CASH FLOWS

	<u>YEAR ENDED</u>	
	<u>DECEMBER 31,</u> <u>1995</u>	<u>DECEMBER 31,</u> <u>1994</u>
Cash flows from operating activities:		
Change in net assets	\$(52,390)	\$113,826
Adjustments to reconcile change in net assets to net cash used in operating activities:		
Depreciation	123,199	80,817
Increase in payroll taxes withheld	470	869
Loss on sale of equipment	-	8,750
Total adjustments	<u>123,669</u>	<u>90,436</u>
NET CASH PROVIDED BY OPERATING ACTIVITIES	71,279	204,262
Cash flows from investing activities - capital expenditures	<u>(120,939)</u>	<u>(178,963)</u>
NET CASH USED IN INVESTING ACTIVITIES	(120,939)	(178,963)
Cash flows from financing activities:		
Proceeds from notes payable	-	42,390
Net borrowings under line of credit	37,669	-
Principal repayments on long-term debt	<u>(53,627)</u>	<u>(44,153)</u>
NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES	<u>(15,958)</u>	<u>(1,763)</u>
NET DECREASE IN CASH	(65,618)	23,536
Cash at beginning of year	<u>252,427</u>	<u>228,891</u>
CASH AT END OF YEAR	<u>\$186,809</u>	<u>\$252,427</u>

Supplemental Disclosure - Note F

The accompanying notes are an integral part of the financial statements.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 1995 AND 1994

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

ORGANIZATION

The Association is incorporated (1961) in the State of Pennsylvania as a non-profit corporation to provide various levels of ambulance and related services to the Western Berks County area. The level of services includes:

Basic Life Support (BLS) - the initial treatment and subsequent transportation of individuals not requiring paramedic attention.

Advanced Life Support (ALS) - The initial treatment and subsequent transportation of individuals requiring paramedic attention for potentially life-threatening emergencies.

BASIS OF ACCOUNTING

The Association prepares its financial statements on the modified cash basis of accounting. This method provides that:

1. Revenue and the related assets are recognized when received rather than when earned.
2. Expenses are recognized when paid rather than when the obligation is incurred, except for:
 - a. Recognition of fixed assets and the resulting depreciation charges.
 - b. Recognition of certain liabilities, such as notes payable and accrued and withheld payroll taxes.

BASIS OF PRESENTATION

The Association adopted Statement of Financial Accounting Standards No. 117, "Financial Statements of Not-for-Profit Organizations" (SFAS 117). The provisions of this standard have been retroactively applied to the year ended December 31, 1994.

INVESTMENTS

Investments are comprised of short-term cash funds and are carried at cost. Gains and losses are recognized when sold. The income from investments is recognized when received.

CONTRIBUTIONS

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor.

CONCENTRATIONS OF CREDIT RISK

Financial instruments that potentially subject the Association to concentrations of credit risk consist principally of temporary cash investments and accounts receivable (not recognized in the accompanying financial statements). The Association places its temporary cash investments with high credit quality financial institutions. The Association provides credit to its patients for services rendered. Although losses from receivables have been incurred, historically they have been nominal.

DONATED SERVICES, MATERIALS AND EQUIPMENT

No amounts have been reflected in the statements for donated services, inasmuch as no objective basis is available to measure the value of such services. However, the services and objectives of the Association are provided by a number of volunteers donating their time, in addition to the paid staff.

Donated materials and equipment are recorded as contributions at their estimated fair market value on the date of receipt. No donated materials or equipment were received for the years ended December 31, 1995 and 1994.

ESTIMATES

The preparation of financial statements in conformity with the basis of accounting described in Note A requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

PROPERTY AND EQUIPMENT

All significant expenditures for land, buildings and equipment are capitalized. Depreciation is calculated using the straight-line method over the estimated useful lives of the assets as follows:

Buildings and improvements	4 - 35 years
Ambulances and vehicle	5 years
Medical and communication equipment	5 - 10 years
Office equipment, furniture and fixtures	5 years

Depreciation expense amounted to \$123,199 and \$80,817 for the years ended December 31, 1995 and 1994.

TAX-EXEMPT STATUS

The Association is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. Contributions to the Association qualify as deductible charitable contributions for the donor.

THIRD PARTY REVENUE

During years ended December 31, 1995 and 1994, a substantial amount of revenue received was from Medicare and Blue Cross/Blue Shield.

MUTUAL AID BILLINGS

The Association has entered into mutual aid agreements with several service providers in the area in order to establish a method of reciprocal reimbursement for billings on calls responded to by more than one service provider.

Reimbursements received and paid during the year ended December 31, 1995 and 1994, were immaterial in the aggregate.

CASH AND CASH EQUIVALENTS

For purposes of the statements of cash flows, the Association considers all highly liquid debt instruments purchased with an original maturity of three months or less to be cash equivalents.

NOTE B - TRUST FUND INCOME

The estate of Jefferson Peifer established a trust fund of \$10,000 in 1965, naming the Association as recipient of the income from this trust fund. The fund is invested in a consolidated charitable trust by a local bank. The income is to be used for current expenditures such as oil, gasoline, tires, and uniforms. In the event the Association is discontinued or the service currently provided is discontinued, the trust fund shall cease and the corpus be distributed to the heirs of Jefferson Peifer. The carrying value, which approximates market value of the trust fund, was \$10,259 and \$8,771 at December 31, 1995 and 1994, respectively.

NOTE C - LONG-TERM DEBT

Long-term debt at December 31, 1995 and 1994 consists of the following:

	<u>DECEMBER 31, 1995</u>	<u>DECEMBER 31, 1994</u>
Note payable to a bank, secured by certificates of deposit, interest only payable monthly at 6.5%, principal due December 15, 1995.	\$ -	\$42,391
Pennsylvania Emergency Management Agency Loan, secured by an ambulance, due in monthly installments of \$291, including interest at 2.0%, to April 1, 2003.	23,304	26,298
Pennsylvania Emergency Management Agency Loan, secured by an ambulance, due in monthly installments of \$296, including interest at 2.0%, to April 1, 2003.	23,732	26,781
Note payable to GMAC, secured by a vehicle, due in monthly installments of \$471, including interest at 4.90% to December 15, 1999.	20,510	-

NOTE C - LONG-TERM DEBT (Continued)

	<u>DECEMBER 31,</u> 1995	<u>DECEMBER 31,</u> 1994
Pennsylvania Emergency Management Agency Loan, secured by an ambulance, due in monthly installments of \$390, including interest at 2.0% to May 1, 2005.	39,820	-
Note payable to individuals, secured by real estate, due in monthly installments of \$570, including interest at 8.0% to May 1, 2010.	58,808	-
Note payable to a bank, secured by first lien security interests in both West Reading and West Lawn buildings, and deposit accounts, due in monthly installments of \$356, including interest at 9.9% to May 15, 2002.	20,069	-
Note payable to a bank, secured by an ambulance, due in monthly installments of \$1,460, including interest at 8.25% to December 31, 2000.	<u>71,600</u>	<u>-</u>
	257,843	95,470
Less: current portion	<u>30,814</u>	<u>48,434</u>
	<u>\$227,029</u>	<u>\$47,036</u>

Required principal payments for succeeding years are as follows:

December 31, 1996	\$ 30,814
1997	32,915
1998	35,157
1999	37,523
2000	34,262
Thereafter	<u>87,172</u>
	<u>\$257,843</u>

NOTE D - LINE OF CREDIT

The Association entered into a line of credit agreement with a bank, maturing May 31, 1996. Advances under the agreement are limited to \$100,000 with interest payable at the bank's prime rate (8.5% at December 31, 1995). The line is secured by a first lien \$100,000 collateral mortgage on the Association's West Lawn building and bank deposit accounts. \$37,669 was outstanding against the line at December 31, 1995. The Association was required to maintain a net worth of \$500,000 for 1995. The bank has waived this covenant for 1995 under the agreement.

NOTE E - MEMBERSHIP DRIVE

Since 1990, the Association conducts an annual community-wide solicitation for their membership subscription program in an effort to raise revenue to underwrite their operating costs.

Under this program, the Association will accept as payment in full, reimbursements from applicable third-party providers (insurance companies, government programs) regardless of coverage, deductibles or co-insurance requirements.

Receipts from the membership subscription program amounted to \$261,061 and \$281,456 for the years ended December 31, 1995 and 1994, respectively.

NOTE F - STATEMENTS OF CASH FLOWS

Supplemental disclosure of cash paid during the year for interest is as follows:

<u>DECEMBER 31,</u> <u>1995</u>	<u>DECEMBER 31,</u> <u>1994</u>
\$8,383	\$3,035

Supplemental schedule of noncash investing and financing activities:

Notes payable amounting to \$216,000 were incurred in connection with the purchase of property, plant and equipment during the year ended December 31, 1995.

OTHER FINANCIAL INFORMATION

KUNTZ LESHER SIEGRIST & MARTINI LLP

CERTIFIED PUBLIC ACCOUNTANTS

50 BERKSHIRE COURT
WYOMISSING, PA 19610
(610)372-6600
FAX (610)372-6780

INDEPENDENT ACCOUNTANTS' REPORT ON OTHER FINANCIAL INFORMATION

Board of Directors
Western Berks Ambulance Association
West Lawn, Pennsylvania

Our audits of the basic financial statements presented in the preceding section of this report were made for the purpose of forming an opinion on such financial statements taken as a whole. The additional information contained in the following pages is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information, except for the summary data for 1993, 1992 and 1991, on which we express no opinion, has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Kuntz Lesher Siegrist & Martini LLP

KUNTZ LESHER SIEGRIST & MARTINI LLP
CERTIFIED PUBLIC ACCOUNTANTS

Wyomissing, Pennsylvania
January 26, 1996

WESTERN BERKS AMBULANCE ASSOCIATION

SCHEDULES OF EXPENSES

	YEAR ENDED			
	<u>DECEMBER 31, 1995</u>		<u>DECEMBER 31, 1994</u>	
Operating expenses:				
Wages	\$ 715,552	51.3%	\$462,839	41.1%
Payroll taxes	62,214	4.5	41,137	3.7
Employee benefits - health insurance	46,369	3.3	41,005	3.6
Workers' compensation insurance	112,502	8.1	85,627	7.6
Maintenance and repairs - ambulances:				
#003	3,994	.3	-	-
#005	810	-	-	-
#007	2,696	.2	-	-
#581	2,503	.2	1,908	.2
#582	5,454	.4	5,079	.5
#583	2,825	.2	4,062	.4
#584	<u>1,836</u>	<u>.1</u>	<u>3,858</u>	<u>.3</u>
	20,118	1.4	14,907	1.4
Maintenance and repairs - buildings	7,385	.5	4,495	.4
Maintenance and repairs - other	2,510	.2	6,470	.6
Maintenance contracts - equipment	8,450	.6	6,200	.6
Gas and oil	14,172	1.0	10,733	1.0
Volunteer benefits, net	9,521	.7	7,231	.6
Continuing education and training	4,407	.3	4,736	.4
Radio supplies and maintenance	10,388	.8	3,237	.3
Communication access fees	10,391	.8	9,518	.8
Ambulance and medical supplies	34,769	2.5	28,592	2.5
Uniforms	4,546	.3	12,488	1.0
Utilities	7,773	.6	6,847	.6
Miscellaneous	12,110	.9	8,803	.8
Mutual aid reimbursement	<u>-</u>	<u>-</u>	<u>1,112</u>	<u>.1</u>
	<u>\$1,083,177</u>	<u>77.8%</u>	<u>\$755,977</u>	<u>67.1%</u>
General and administrative expenses:				
Wages - office	\$ 116,605	8.3%	\$ 95,556	8.5%
Payroll taxes	10,136	.7	8,497	.8
Employee benefits - health insurance	7,554	.5	8,464	.8
Banquet expense	2,107	.2	2,720	.2
Telephone	4,994	.4	3,974	.4
Office supplies and postage	21,423	1.5	16,303	1.4
Insurance - general	18,729	1.3	14,569	1.2
Professional fees	14,774	1.1	11,152	1.0
Dues and subscriptions	2,679	.2	2,218	.2
Billing service	30,470	2.2	-	-
Donations	<u>1,000</u>	<u>.1</u>	<u>-</u>	<u>-</u>
	<u>\$ 230,471</u>	<u>16.5%</u>	<u>\$163,453</u>	<u>14.5%</u>

See Independent Accountants' Report
on Other Financial Information

WESTERN BERKS AMBULANCE ASSOCIATION

SCHEDULE OF PROPERTY AND EQUIPMENT

DECEMBER 31, 1995

	<u>COST</u>			<u>BALANCE</u> <u>12/31/95</u>
	<u>BALANCE</u> <u>1/1/95</u>	<u>ADDITIONS</u>	<u>DISPOSITIONS</u>	
Land:				
Belmont and Cecil Avenues, West Lawn, Pennsylvania	\$ 4,720	\$ -	\$ -	\$ 4,720
Cherry Street, West Reading, Pennsylvania	-	<u>20,000</u>	-	<u>20,000</u>
	<u>4,720</u>	<u>20,000</u>	<u>-</u>	<u>24,720</u>
Buildings and improvements:				
West Lawn	114,689	-	-	114,689
West Reading	-	<u>111,168</u>	-	<u>111,168</u>
	<u>114,689</u>	<u>111,168</u>	<u>-</u>	<u>225,857</u>
Ambulances, vehicle and equipment				
Ambulances and vehicle:				
#003 - 1994 Ford	-	72,900	-	72,900
#005 - 1995 Ford	-	78,900	-	78,900
#007 - ambulance conversion	-	10,809	-	10,809
#581 - 1993 Ford	75,481	-	-	75,481
#582 - 1991 Ford	69,907	-	-	69,907
#583 - 1991 Ford	72,070	-	-	72,070
#584 - 1994 Medtec	84,781	-	-	84,781
Unit 5 - 1988 Ford	39,100	-	-	39,100
Unit 6 - 1988 Horton	20,000	-	-	20,000
1995 Blazer	-	<u>25,510</u>	-	<u>25,510</u>
	<u>361,339</u>	<u>188,119</u>	<u>-</u>	<u>549,458</u>
Equipment:				
ALS	115,870	10,521	-	126,391
Radios, etc.	<u>92,126</u>	<u>11,672</u>	-	<u>103,798</u>
	<u>207,996</u>	<u>22,193</u>	<u>-</u>	<u>230,189</u>
Office equipment, furniture and fixtures	<u>41,453</u>	<u>20,158</u>	<u>-</u>	<u>61,611</u>
	<u>\$730,197</u>	<u>\$361,638</u>	<u>\$ -</u>	<u>\$1,091,835</u>

See Independent Accountants' Report
on Other Financial Information

<u>ACCUMULATED DEPRECIATION</u>				<u>NET</u>
<u>BALANCE</u>			<u>BALANCE</u>	<u>BOOK VALUE</u>
<u>1/1/95</u>	<u>ADDITIONS</u>	<u>DISPOSITIONS</u>	<u>12/31/95</u>	<u>12/31/95</u>
\$ -	\$ -	\$ -	\$ -	\$ 4,720
-	-	-	-	<u>20,000</u>
-	-	-	-	24,720
76,371	4,105	-	80,476	34,213
-	<u>1,067</u>	-	<u>1,067</u>	<u>110,101</u>
<u>76,371</u>	5,172	-	81,543	144,314
-	9,720	-	9,720	63,180
-	6,575	-	6,575	72,325
-	541	-	541	10,268
18,870	15,096	-	33,966	41,515
38,448	13,981	-	52,429	17,478
43,242	14,414	-	57,656	14,414
1,413	16,956	-	18,369	66,412
31,950	7,150	-	39,100	-
667	4,000	-	4,667	15,333
-	<u>425</u>	-	<u>425</u>	<u>25,085</u>
<u>134,590</u>	88,858	-	223,448	326,010
74,287	11,472	-	85,759	40,632
<u>59,123</u>	<u>8,072</u>	-	<u>67,195</u>	<u>36,603</u>
133,410	19,544	-	152,954	77,235
<u>18,895</u>	<u>9,625</u>	-	<u>28,520</u>	<u>33,091</u>
<u>\$363,266</u>	<u>\$123,199</u>	<u>\$ -</u>	<u>\$486,465</u>	<u>\$605,370</u>

FIVE-YEAR SUMMARY OF OPERATIONS AND OTHER FINANCIAL DATA

	<u>1995</u>		<u>1994</u>	
Changes in unrestricted net assets:				
Revenues collected and gains:				
Contributions	\$ 261,317	18.9%	\$ 278,469	24.9%
Ambulance usage	1,123,683	80.7	817,148	72.5
Interest and other	<u>7,840</u>	<u>.4</u>	<u>30,241</u>	<u>2.6</u>
	<u>1,392,840</u>	<u>100.0</u>	<u>1,125,858</u>	<u>100.0</u>
Expenses and losses:				
Wages and related fringe benefits	1,070,932	76.9	743,125	66.0
Operating costs	242,716	17.4	176,305	15.7
Depreciation	123,199	8.9	80,817	7.1
Interest	8,383	.6	3,035	.3
Loss on disposal of assets	<u>-</u>	<u>-</u>	<u>8,750</u>	<u>.8</u>
	<u>1,445,230</u>	<u>103.8</u>	<u>1,012,032</u>	<u>89.9</u>
 INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS	 \$ <u>(52,390)</u>	 <u>(3.8)%</u>	 \$ <u>113,826</u>	 <u>10.1%</u>

OTHER FINANCIAL DATA

Cash and investments	\$186,809	\$252,427
Notes payable and line of credit	\$295,512	\$ 95,470
Fixed asset additions	\$336,939	\$178,963
Net assets - unrestricted	\$495,152	\$547,542

See Independent Accountants' Report
on Other Financial Information

<u>1993</u>		<u>1992</u>		<u>1991</u>	
\$261,838	35.6%	\$260,076	35.1%	\$234,211	39.8%
450,564	61.2	464,212	62.6	339,045	57.7
<u>23,342</u>	<u>3.2</u>	<u>16,691</u>	<u>2.3</u>	<u>14,844</u>	<u>2.5</u>
735,744	100.0	740,979	100.0	588,100	100.0
595,248	80.9	502,946	67.9	287,600	48.9
130,261	17.7	126,809	17.1	140,766	23.9
67,138	9.1	59,221	8.0	40,819	6.9
2,694	.4	3,969	.5	390	.1
<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
<u>795,341</u>	<u>108.1</u>	<u>692,945</u>	<u>93.5</u>	<u>469,575</u>	<u>79.8</u>
<u>\$(59,597)</u>	<u>(8.1)%</u>	<u>\$ 48,034</u>	<u>6.5%</u>	<u>\$118,525</u>	<u>20.2%</u>

\$228,891	\$307,650	\$275,546
\$ 97,233	\$ 78,001	\$ 16,600
\$101,164	\$156,450	\$ 43,739
\$433,716	\$493,313	\$445,279

LEADER

NURSING AND REHABILITATION CENTER

1000 WINDMILL ROAD SINKING SPRING PENNSYLVANIA 19608

215-670-2100

VERIFIED STATEMENT IN SUPPORT OF APPLICANT

1. Name and docket number of applicant being supported.

Docket number is A-00112751

2. Legal name and domicile of supporting party or firm.

Leader Nursing and Rehabilitation Center
3000 Windmill Road
Sinking Spring, Berks County, PA 19608

3. Identity and qualifications of person making statement for supporting shipper.

(Kathryn Weachock, Administrator ✓
Leader Nursing and Rehabilitation Center
3000 Windmill Road
Sinking Spring, Berks County, PA 19608

Kathryn Weachock, as Administrator, has authority to speak on behalf of facility.

4. General description of supporting party, organization, or operations.

Leader Nursing and Rehabilitation Center has a contract in place for emergency and non-emergency ambulance transports with Western Berks Ambulance Association since October, 1995. As a skilled healthcare facility, we require transportation of patients to points other than medical facilities for recreational, therapeutic or social functions. These patients may need transportation via adaptive vehicles.

5. Volume and frequency of intended use.

Three to four times a year for most locations listed below.

6. Specific or representative origins and destinations.

Friendly's Ice Cream, West Lawn ✓
Christmas Village, Bernville ✓
Berkshire Mall, Wyomissing ✓
Reading Museum, Reading ✓

Return trips are involved.

DOCUMENT
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MANOR
Housing Care Group

DOCKETED APPLICATION DOCKET
APR 03 1996
ENTRY No. <u>llg</u>

LEADER

NURSING AND REHABILITATION CENTER

1000 WINDMILL ROAD SINKING SPRING PENNSYLVANIA 19608 215-670-2100

7. Type of service offered.

Paratransit ✓

8. Similar application supported.

None

9. Any other information deemed pertinent.

Our facility has been very satisfied with quality and timeliness of service, provided our residents, by Western Berks Ambulance Association. In addition, we have experienced no safety concerns related to the transportation of residents.

10. Statement verification.

The undersigned deposes and says that she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge information and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C.S. 4903 relating to unsworn falsification to authorities.

Date 3/25/96 Signature *Kathryn Weachok* Name printed or typed KATHRYN WEACHOK

MANOR
HEALTHCARE CORP.

VERIFIED STATEMENT IN SUPPORT OF APPLICANT

- 1. Name and docket number of applicant being supported
Western Berks Ambulance Association
Docket number A-00112751
- 2. Legal name and domicile of supporting party or firm.
Leader Nursing and Rehabilitation Center
2125 Elizabeth Avenue
Laureldale, PA 19605
- 3. Identity and qualifications of person making statement for supporting shipper or firm.
Linda Vignati, N.H.A., Administrator
2125 Elizabeth Avenue
Laureldale, PA 19605
610-921-9292

I, Linda Vignati, N.H.A. am authorized to speak on behalf of Leader - Laureldale

- 4. General description of supporting party, organization, or operations.

We are seeking passenger application. IE: Leader Nursing Centers have a contract in place for emergency and non-emergency ambulance transports with Western Berks Ambulance Association since October, 1995. As a skilled healthcare facility, we require transportation of patients to points other than medical facilities for recreational, therapeutic or social functions. These patients may need transportation via adaptive vehicles.

- 5. Volume and frequency of intended use.

4 trips/year or 1/quarter, transporting approximately 25 residents.

- 6. Specific or representative origins and destinations.

From	To	Return
Leader Nursing Center 2125 Elizabeth Avenue Laureldale, PA 19605	Grings Mill Tulpehocken Road Reading, PA Bern Township Berks County	X
Leader Nursing Center 2125 Elizabeth Avenue Laureldale, PA 19605	Fairgrounds Square Mall 5th Street Highway Reading, PA 19605	X

DOCUMENT FOLDER

DOCKETED
APPLICATION DOCKET

APR 03 1996

ENTRY No. *[Signature]*

Muhlenberg Township ✓
Berks County

Leader Nursing Center
2125 Elizabeth Avenue
Laureldale, PA 19605

City of Reading Tour ✓ X
"View Christmas lights"
Reading
Berks County

Leader Nursing Center
2125 Elizabeth Avenue
Laureldale, PA 19605

Muhlenberg High School ✓ X
Sharp Avenue and Frances
Avenue
Laureldale, PA 19605
Muhlenberg Township
Berks County

7. Type or service offered.

Paratransit

8. Similar application supported.

None

9. Any other information

I am very please with the quality of service provided by Western Berks Ambulance.
Their safety record is good and the timeliness of their service is also good!

10. Statement verification.

The undersigned deposes and says that I am authorized to and does make this verification and that the facts set forth therein are true and correct to the best of my knowledge information and belief. The undersigned understands that false statements herein are made subject to the penalties of 18 PA C.C. 4904 relating to unsworn falsification to authorities.

Dated 3/26/96 Signature Linda Vignati Name typed Linda Vignati, N.H.A.

VERIFIED STATEMENT IN SUPPORT OF AN APPLICANT

APR 03 1996
BUREAU OF
TRANSPORTATION & SAFETY

- 1. Name and docket number of applicant being supported.

Western Berks Ambulance Association
Docket number is A-00112751

- 2. Legal name and domicile of supporting party or firm.

Leader Nursing and Rehabilitation Center
425 Buttonwood Street
West Reading, Berks County, PA 19611

- 3. Identity and qualifications of person making statement for supporting shipper or firm.

Carl R. McAloose, NHA ✓
Administrator
425 Buttonwood Street
West Reading, PA 19611
(610) 373-5166

Administrator responsible for all aspects of the operation of Leader West Reading.

- 4. General description of supporting party, organization, or operations.

Leader Nursing Centers has a contract in place for emergency and non-emergency ambulance transports with Western Berks Ambulance Association since October, 1995. As a skilled healthcare facility, we require transportation of patients to points other than medical facilities for recreational, therapeutic, or social functions. These patients may need transportation via adaptive vehicles.

- 5. Volume and frequency of intended use.

1-2 trips per month. Also, holiday specific trips.

- 6. Specific or representative origins and destinations.

Residents may be transported from Leader Nursing Center to the following destinations as well as return to the nursing center:

Schell's Dairy Swirl
4625 North Fifth Street Highway
Temple, PA 19605 ✓

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APPLICATION DOCKET
APR 03 1996
ENTRY NO. *[Signature]*

Rajah Theater
136 North 6th Street
Reading, PA 19604

Scottish Rite Cathedral
310 South 7th Avenue
West Reading, PA 19611

Reading Museum and Planetarium
500 Museum Road
Wyomissing, PA 19610

Reading Municipal Stadium
P.O. Box 15050
Reading, PA 19612

Red Bridge Recreation Area
C/O Gring's Mill Berks County Parks
2083 Tulpehocken Road
Wyomissing, PA 19610

Berkshire Mall
Route 422 and State Hill Road
Wyomissing, PA 19610

Arner's Restaurant
1714 State Hill Road
Wyomissing, PA 19610

Fairgrounds Square Mall
3050 North Fifth Street Highway
Reading, PA 19605

Mid-Atlantic Air Museum
RD 9 Box 9381
Reading, PA 19605

7. Type of service offered.

Paratransit

8. Similar application supported.

None

9. Any other information deemed pertinent.

The service and reputation of Western Berks Ambulance is such that we use them exclusively when residents' choice of service is decided by the facility.

10. Statement verification.

The undersigned deposes and says that he is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his knowledge, information, and belief. The undersigned understands that false statements herein are made subject to the penalties of 18 Pa C.S. 4904 relating to unsworn falsification to authorities.

Dated 3/26/96 Signature *Carl R. McAloose NHA*
Carl R. McAloose, NHA

VERIFIED STATEMENT IN SUPPORT OF APPLICANT

RECEIVED
APR 03 1996

BUREAU OF
TRANSPORTATION & SAFETY

1. Name and docket number of applicant being supported.

Docket number is A-00112751- Western Berks Ambulance Association

2. Legal name and domicile of supporting party or firm.

Mario Hipp ✓
3040 Octagon Avenue
Sinking Spring, Berks County, PA 19608

3. Identity and qualifications of person making statement for supporting shipper or firm.

Individual in support of the applicant of #1 above ✓

4. General description of supporting party, organization, or operations.

Individual seeking personal transportation for invalid family member. ✓

5. Volume and frequency of intended use.

Approximately 1 to 2 transports per month. ✓

6. Specific or representative origins and destinations. ✓

Transportation between the Leader Nursing & Rehabilitation Center, 2000 Windmill Road, Spring Township Sinking Spring (Berks County) to 3040 Octagon Avenue, Sinking Spring and return.

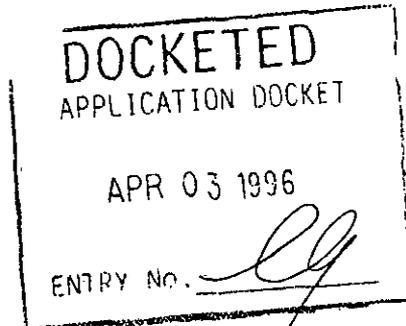
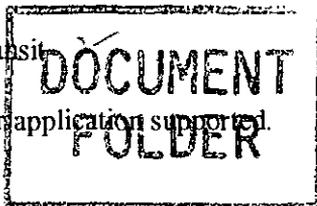
Since most transfers would be between the nursing home and our residence, there may be opportunities for transportation to other destinations, such as recreational facilities, restaurants, other family member's residences or events and shopping areas. Most of these are within a five mile radius of her primary residence. ✓

7. Type of service offered.

Paratransit

8. Similar application supported.

None



9. Any other information deemed pertinent.

In the past the resources to transport by wheelchair accessible vehicle have been limited, especially on short notice. Currently the facility that my relative resides in does not provide any transport services other than medically-indicated. This additional resource in the community would be beneficial not only to my relative but to other disabled or infirmed residents.

10. Statement verification.

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge information and belief. The undersigned understands that false statements herein are made subject to the penalties of 18 Pa C.S. 4904 relating to unsworn falsification to authorities.

Dated 3/21/96

Signature 

Mario Hipp

VERIFIED STATEMENT IN SUPPORT OF APPLICANT

1. Name and docket number of applicant being supported.

Docket number is A-00112751- Western Berks Ambulance Association

APR 03 1996
RECEIVED

2. Legal name and domicile of supporting party or firm.

Pennsylvania Dialysis Clinic of Reading, Inc.
625 Spring Street
Wyomissing, Berks County, PA 19610

3. Identity and qualifications of person making statement for supporting shipper or firm.

✓ Dena Hammel, MSS
Pennsylvania Dialysis Clinic of Reading, Inc.
625 Spring Street
Wyomissing, Berks County, PA 19610

✓ Dena Hammel is the primary social worker for the clinic and can speak on the behalf of the clinic

4. General description of supporting party, organization, or operations.

✓ A free standing, non-hospital based outpatient renal dialysis center. Most transports are medically indicated, however, patients may require transportation from their residences to other destinations via vehicles with adaptive devices.

5. Volume and frequency of intended use.

✓ Approximately 1 to 2 transports/month per patient

6. Specific or representative origins and destinations.

These transports would originate from the patient's primary residence to various points within a ten mile radius. Since this service is only available on a limited basis with much advance notice required to make arrangements for transports, specific points of origin, destination and return have not been clearly defined.

DOCKETED
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7. Type of service offered

Paratransit

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8. Similar application supported.

None

9. Any other information deemed pertinent.

In the past the resources to transport by wheelchair accessible vehicle have been limited, especially on short notice. Currently this facility does not provide any transport services, and medically necessary transports are managed by exempt ambulance services. This additional resource in the community would be extremely beneficial to the patient we serve at the dialysis center and throughout the area.

10. Statement verification.

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge information and belief. The undersigned understands that false statements herein are made subject to the penalties of 18 Pa C.S. 4904 relating to unsworn falsification to authorities.

Dated 3.31.96

Signature Dena Hammel, MSS

Print or Type name

DENA HAMMEL



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

IN REPLY PLEASE
REFER TO OUR FILE

April 11, 1996

WOLF BALDWIN & ASSOCIATES
PO BOX 444
POTTSTOWN PA 19464

In re: A-00112751 - Application of Western Berks Ambulance Association

Dear Sir:

We have received the verified statement(s) and/or other information filed in connection with the above referenced application proceeding.

The record will be reviewed and a recommendation will be made for Commission consideration at public meeting. You will be advised by the Secretary as to the action taken by the Commission.

Very truly yours,

Gale E. Travitz
Application Review Section
Bureau of Transportation & Safety

GET:lg

cc: Applicant

WESTERN BERKS AMBULANCE ASSOCIATION
2506 BELMONT AVENUE
WEST LAWN PA 19609

