## BUSINESS PLAN OF APPLICANT FOR MOTOR CARRIER AUTHORITY

## THE FOLLOWING INFORMATION IS REQUIRE BY THE COMMISSION TO DETERMINE THE APPLICAN'T FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

A-00113642

Trade Name, if any

| 925 N Lenola Rd | Moorestown | NJ | 08057 |
| :---: | :---: | :---: | :---: |
| Street Address (principle place of business) | City or Municipality | State | Zip Code |

This document is a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Unity Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

You are encouraged to provide as much information as possible to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person providing the information by giving your name and indicate whether you are the owner, employee, officer, or attorney for the applicant.

Wayne Lobascio- owner \& president of company
2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of the affiliation.

We are an agent for Arpin Van Lines for all interstate moving.
3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. An explanation of education or training that you believe may be relevant may also be included.

Transtar Moving Systems has been serving the Delaware Valley for over 50 years. We are a second generation family owned and operated professional moving company handling local, long distance, and international services. We have attended many state, national, and van lines' conventions and regional meetings that involved education and training sessions.
4. Describe the physical location, to include the office area, office machines that will be used, and where vehicles will be stored. Household goods in use carriers should include a description of their storage facilities, if applicable.

We have a 55,000 square foot state of the art office and storage facility. This facility has 4,000 square feet of office space and 50,000 square feet of warehouse space. It also includes approximately 4.8 acres of land that we utilize for parking our trucks and trailers. We also are fully containerized utilizing HHG storage vaults. We are fully computerized in our office and warehouse.
5. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and continuous communication with drivers.

We have a fully functioning phone system. We also have a fully functioning website, along with email in which we can communicate with our customers and dispatch our vehicles. All employees have cell phone that allow continuous communication with our customers and our drivers.
6. Please explain:
a. Your hiring standards for drivers;

Potential drivers must fill out an application that entails full DOT compliance. All potential drivers are subject to a criminal background check and pre-employment drug screening. We also run all drivers' licenses to ensure that their driving record is acceptable to our high standards. All driver applicants must pass an on-the-road driving test.
b. Your system to ensure prospective drivers will be subject to a criminal background check;

Our standard procedure is full criminal background checks on all employees, as well as preemployment drug screens on all employees. All applicants must fill out a background check authorization form with their application.
c. Your driver training program;

Our training program includes online safety and DOT approved courses, as well as tests and quizzes. New drivers must drive with an experienced veteran driver for a supervisory period when they first start at our company.
d. Your system for ensuring that your drivers are properly licensed at all times;

We run the MVRs to ensure that our drivers are in good standing on a quarterly basis.
e. Your system to ensure that all drivers will be subject to a criminal background check every two years;

We perform a full criminal background check on all drivers and employees every two years.
f. Your policies regarding alcohol and drug use by your drivers.

In addition to passing a pre-employment drug and alcohol screening, all drivers are subject to random drug and alcohol tests. Our dispatch staff has been trained in "Reasonable Suspicion" and can require additional drug and alcohol testing.
7. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below. Taxicabs and limousines may not be used if the vehicle's age is greater than eight model years.
YEAR MAKE MODEL $\quad$ SEATING CAPACITY

Please sec attached page
8. Describe your vehicle safety program. Please include the following in your explanation:
a. Your periodic vehicle maintenance plan;

We have full DOT inspections done on all vehicles on a quarterly basis. We also perform preventative maintenance on our trucks every 7,000 miles on straight trucks and every 10,000 miles on tractors. Our drivers are required to do a driver vehicle inspection report before and after each use. They are also required to submit these reports for any necessary repairs to be made. We also perform diesel emissions testing once per year on all vehicles.
b. Your system for ensuring your vehicles will continuously comply with Pennsylvania's inspection standards and the Commission's equipment standards;

We have full DOT inspections done on all vehicles on a quarterly basis. We also perform preventative maintenance on our trucks every 7,000 miles on straight trucks and every 10,000 miles on tractors. Our drivers are required to do a driver vehicle inspection report before and after each use. They are also required to submit these reports for any necessary repairs to be made. We also perform diesel emissions testing once per year on all vehicles.
c. If applying for Taxi or Limousine Authority, explain how vehicles will be replaced once they are greater than eight model years in age;
Not applicable
d. If applying for Household Goods Authority, explain how it will be ensured that vehicles meet all USDOT equipment standards.

We have full DOT inspections done on all vehicles on a quarterly basis. We also perform preventative maintenance on our trucks every 7,000 miles on straight trucks and every 10,000 miles on tractors. Our drivers are required to do a driver vehicle inspection report before and after each use. They are also required to submit these reports for any necessary repairs to be made. We also perform diesel emissions testing once per year on all vehicles.
9. As proof that an effort has been made to determine that insurance is affordable, list the name and phone number of insurance agents you have contacted and the prices of the premiums they have quoted.

Our insurance agency is Capacity Coverage. Our agent is Lou Hefter (201)790-1699. They utilize Vanliner Insurance Company who have insured our company for many years. We are well aware of all insurance coverage needed to operate a professional moving company.
10. Criminal Record. Has the applicant* been convicted of a misdemeanor or felony for which applicant remains subject to supervision by a court or correctional institution? YES__ NO_X

> *If applicant is a partnership, limited partnership, limited liability partnership, limited liability company, or corporation, this question applies to all partners, members, shareholders and corporate officers. In the event that the answer is yes for one of those individuals, a separate page identifying the individual and stating relevant information should be attached.
11. Financial Data. In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation services. You may use the "Statement of Financial Position" which follows this page or supply a balance shect prepared by an accountant. You need only provide the applicable information. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains why you believe that you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner. PLEASE NOTE: COMMISSION REGULATIONS REQUIRE THAT PARTNERSHIPS, LIMITED PARTNERSHIIP, LIMITED LIABILITY PARTNERSHIPS, LIMITED LIABILITY COMPANIES, AND CORPORATIONS MUST FILE A CURRENT INCOME STATEMENT.

## Statement of Financial Position (Balance Sheet) <br> As of (date) $\quad 9 / 2015$ <br> ASSETS

Current Assets

## Cash

Other Current Assets (specify)
\$561,242.00
$\$ 760,425.00$
Other Assets
Motor Vehicle Equipment $\$ 236,451.00$
Buildings and Structures $\$ 62,592.00$
Office Equipment $\$ \quad 9,694.00$
Investments and Funds (specify)


## Verification of Statement

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 made are subject to penalties of 18 Pa . C. S. Section 4904 relating to

(Signature)

12/22/15
(Date)

Wayne Lobascio, President
(Name and Title, printed or typed)

List of Vehicles

| Year | Make | Model | Seating Capacity | Vehicle ID |
| :--- | :--- | :--- | :--- | :--- |
| 2012 | Chevrolet | Trahoe |  | 1GNSKBE00CR142671 |
| 2014 | Ford | Fusion |  | 3FA6POK92ER106612 |
| 2006 | International | Straight truck | 3 | 1HTMMAAN16H179961 |
| 2006 | International | Straight truck | 5 | 1HTMMAAN86H188074 |
| 1998 | International | Straight Truck | 3 | 1HTSCAAP5WH538658 |
| 2000 | Mack | Tractor | 2 | 1M1AA08X5YW020093 |
| 1999 | Mack | Tractor | 2 | 1M1AA08Y8XW016644 |
| 2007 | Freightliner | Tractor | 4 | 1FUJBBCK87LY68773 |
| 2004 | International | Tractor | 4 | 3HSCNASR14N020228 |
| 2004 | International | Tractor | 4 | 3HSCNASR14N020231 |
| 2007 | International | Tractor | 4 | 2HSCNAPR37C311554 |
| 2007 | International | Tractor | 4 | 2HSCNAPR87C358398 |
| 2010 | Hino | Straight truck | 3 | 5PVNJ8JV5A4S52560 |
| 2007 | International | Tractor | 4 | 2HSCKAPR87C489212 |
| 2001 | International | Tractor | 4 | 2HSCKAPR87C489212 |
| 2005 | Freightliner | Tractor | 4 | 1FUJBBCK35LN56048 |
| 2010 | Freightliner | Tractor | 4 | 1FUJBBCKXADAK5467 |
| 2016 | Hino Motors Ltd | Straight truck | 3 | 5PVNJ8JV0G4S60249 |
| 2016 | Hino Motors Ltd | Straight truck | 3 | 5PVNJ8JV0G4S60204 |
| 2016 | Hino Motors Ltd | Straight truck | 3 | 5PVNJ8JV9G4S60167 |
| 2014 | International | Straight truck | 5 | 3HAMMAAN3EL096332 |

# A Action Family Moving Co., Inc. T/A Transtar Moving Systems Corporate Officers 

## PA Corporate Bureau Entity ID Number 2001412

Wayne Lobascio, President \& Treasurer ..... 50\%
Marie Lobascio, Vice President \& Secretary ..... 50\%

|  |  | JAN | FEB | MAR | APR | MAY | Jun | JOL | AUG | SEP |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| G/L \# | ACCOUNT TITLE | 2015 | 2015 | 2015 | 2015 | 2015 | 2015 | 2015 | 2015 | 2015 | total |


|  |  |
| :---: | :---: |
|  |  |
| 3111.001 TRANS-INTER EAUL COD N/A 3113.001 TRANS-INTER RADLING MIL |  |
|  | 3114.001 trans- |
| 3210.001 FREIGET-SELF AUTHORITY |  |
| 3303.001 tRANS- LOCAL HAULING <br> 3304.001 TRANS-OFFICE \& INDUSTRTA |  |
|  |  |
| 3305.001 TRANS-OFFICEEINDUST. PENN |  |
|  | 3511.001 PACK-INTER LABOR COD N/A |
| 3512.001 PACKING-INTER LABOR MIL |  |
| 3513.001 PACK- INTER MAT'L COD N/ |  |
| 3532.001 PACKING - INTRA LABOR RE |  |
| 3533.001 PACKING - INTRA MAT'L RE |  |
| 3534.001 PACRING-INTRA LABOR O\&I |  |
|  | 3535.001 PACKING-INTRA MAT'L |
| 3578.001 pack \& LOAD - INT'L |  |
| 3600.001 heiget tickets - revenue |  |
| 3601.001 DEL/PICROP -SIT COD \& N/3602.001 DEL/PICKOP SIT MIL |  |
|  |  |
| 3621.001 PICKUP/AgENT - INTERSTAT |  |
| 3622.001 PICKOP/AGESNT - MIL |  |
| 3727.001 WESE EANDLE-COD \& N/A SI |  |
|  | 3737.001 STORAGE - COD \& N/A |
| 3738.001 STORAGE, MIL SIT |  |
| 3751.001 STORAGE - NON-TEEMP |  |
| 3752.001 Storage - regular |  |
| 3754.001 DOMPSTER REVENUE |  |
| 3760.001 WAREEOUSE EANDLE- REGULA |  |
| 3811.001 BOOK COMM INTER COD \& N/ |  |
| 3812.001 BOOK COMM INTER MLLITARY |  |
| 3813.001 BCOR COMM TEIRD PROVISO |  |
| 3900.001 VALUATION - INTRA |  |
| 3907.001 VALUATtON - WHSE |  |
| 3910.001 SIT BILLING FEES |  |
| 3911.001 PONER TRACK FEES |  |
| 3912.001 PROMT PAy eges |  |
| 3920.001 CREDIT CARD FER |  |
| 3921.001 BROKERAGE FEES |  |
| 3922.001 BOOR COMM - OUTSIDE AGEN |  |
| 3924.001 SENIOR CITIZEN DISCOUNTS |  |
| 3925.001 INSURANCE CEARGES |  |
| 3926.001 AAA DISCOUNT |  |
| 3935.001 TEIRD PARTY CLEARING ACC |  |
| 3937.001 CLATMS FEE REVENUE |  |
| 3938.001 CONTRACTOR FEE REVENUE |  |
| 3939.001 MISC REVENUE |  |
| 3945.001 CONCHECK FEES |  |
| 3950.001 RENTAL INCOME |  |

REVENUE ACCOUNTS TOTALS
$300.973 .90 \quad 259.994$
347,540.69

|  |  |  |  |
| ---: | ---: | ---: | ---: |
| $219,822.02$ | $153,448.64$ | $66,896.96$ | $924,860.05$ |
| $63,794.19$ | $29,041.83$ | $5,144.85$ | $277,377.19$ |
| $4,387.00$ | $22,959.90$ | $54,522.31$ | $207,656.09$ |
| 0.00 | 0.00 | 0.00 | 119.84 |
| $230,427.70$ | $236,324.24$ | $269,206.62$ | $1,689,840.41$ |
| $41,179.30$ | $35,313.10$ | $53,825.83$ | $309,333.78$ |
| $12,425.75$ | $18,049.00$ | $27,257.50$ | $123,266.89$ |
| $50,747.77$ | $22,328.11$ | $10,460.40$ | $178,300.73$ |
| $41,288.46$ | $19,384.39$ | $7,294.15$ | $190,853.26$ |
| 0.00 | $3,211.64$ | $1,614.78$ | $7,069.84$ |
| $32,067.62$ | $11,201.44$ | $21,331.89$ | $124,916.89$ |
| 573.18 | 377.54 | 235.47 | $4,269.10$ |
| 562.50 | 0.00 | 0.00 | $1,668.80$ |
| 0.00 | 250.00 | 0.00 | 691.00 |
| $4,402.80$ | $15,743.47$ | $1,240.00$ | $32,090.75$ |
| 200.00 | 170.00 | 160.00 | $1,605.00$ |
| $4,390.27$ | $4,008.80$ | -76.33 | $14,777.63$ |
| $15,055.54$ | $2,648.25$ | $7,275.38$ | $55,044.93$ |
| -37.00 | 149.50 | 100.00 | 853.70 |
| $-2,006.20$ | -243.30 | 234.00 | $-1,481.10$ |
| 0.00 | 0.00 | 0.00 | 7.02 |
| $27,013.28$ | $19,040.30$ | $16,905.85$ | $150,176.64$ |
| $11,363.47$ | $1,449.80$ | $12,388.83$ | $58,855.14$ |
| 381.60 | 381.60 | 381.60 | $3,797.55$ |
| $25,538.94$ | $25,117.19$ | $23,346.25$ | $193,362.96$ |
| 520.00 | $2,160.00$ | $1,640.00$ | $12,375.23$ |
| $11,738.25$ | $7,880.57$ | $8,683.51$ | $66,644.45$ |
| $32,354.98$ | $26,997.05$ | $13,303.07$ | $161,893.62$ |
| 0.00 | 0.00 | 0.00 | 10.00 |
| 284.50 | 800.00 | 0.00 | $1,084.50$ |
| $6,205.53$ | $4,198.00$ | $3,412.00$ | $22,593.78$ |
| $1,615.09$ | $1,356.86$ | $1,640.75$ | $12,656.69$ |
| -273.76 | -16.25 | -107.62 | $-1,343.95$ |
| $2,600.99$ | $-2,196.71$ | -101.08 | $-8,243.77$ |
| 0.00 | -31.61 | -8.03 | -350.12 |
| $-1,976.90$ | $-2,810.70$ | $-1,299.63$ | $-11,042.76$ |
| -983.52 | $-1,040.06$ | -81.27 | $-6,085.91$ |
| $-6,748.98$ | $-7,588.55$ | $-9,032.17$ | $-70,571.84$ |
| $-1,041.91$ | -126.88 | -466.95 | $-3,246.78$ |
| -752.00 | -172.51 | -122.64 | $-3,394.94$ |
| -332.37 | -515.75 | -81.99 | $-2,124.18$ |
| $-6,186.15$ | $6,581.00$ | $-7,823.62$ | $-11,833.64$ |
| 60.00 | 210.00 | 390.00 | $1,380.00$ |
| 510.00 | 260.00 | 400.00 | $2,647.00$ |
| 329.33 | 428.72 | 489.32 | $3,206.26$ |
| 290.33 | 99.33 | 73.33 | 422.79 |
| 791.67 | 633.53 | 791.67 | $6,966.89$ |

EXPENSE ACCOUNTS


|  Period: 01/2015 - 09/2015 Report Option: Sproadsheet |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| account title |  | $\begin{aligned} & \text { FEB } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { MAR } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { APR } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { MAY } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { JON } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { JUL } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { AUG } \\ & 2015 \end{aligned}$ | $\begin{aligned} & \text { SEP } \\ & 2015 \end{aligned}$ | TOTAL |
|  |  |  |  |  |  |  |  |  |  |  |
| 8313.001 aUTO ALLOWRANCES | 350.00 | 275.00 | 200.00 | 0.00 | 400.00 | 200.00 | 200.00 | 200.00 | 200.00 | 2,025.00 |
| 8314.001 TITLES \& REGISTRATIONS | 0.00 | 171.00 | 0.00 | 12,459.29 | -1,433.12 | 0.00 | 0.00 | 1,136.00 | 623.58 | 12,956.75 |
| 8400.001 TAXES \& PERMITS | 312.00 | 1,670.59 | 812.50 | 59.65 | 1,900.37 | 94.71 | 1,045.47 | 6,454.28 | 198.56 | 12,556.13 |
| 8502.001 Income taxes State | 0.00 | 0.00 | 0.00 | 0.00 | 500.00 | 0.00 | 0.00 | 0.00 | 500.00 | 1,000.00 |
| 8503.001 PA STATE INCOME TAXES | 1.00 | 0.00 | 0.00 | 0.00 | 20.00 | 0.00 | 0.00 | 0.00 | 10.00 | 31.00 |
| 8504.001 CITY OF PEIL/TAXES | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | -19.00 | -19.00 |
| 8630.001 INSURANCE - HEALTH | 15,443.53 | 14,717.15 | 14,663.78 | 14,101.11 | 17,058.82 | 12,948.22 | 14,109.18 | 14,720.18 | 13,444.45 | 131,206.42 |
| 8631.001 INSURANCE-HEALTH EMP CON | -5,366.00 | -5,530.21 | -5.404.03 | -5,255.77 | -6,253.67 | -5,266.04 | -6,050.99 | -5,049.20 | -4,841.32 | -49,017.23 |
| 8632.001 FSA/DEpEndant care/aflac | 69.51 | 245.07 | -508.19 | -29.08 | 1,635.73 | -541.68 | 281.31 | -633.86 | -272.76 | 246.05 |
| 8640.001 MEDICAL EXPENSES | 149.00 | 86.50 | 213.96 | 298.00 | 790.00 | 1,003.00 | 1,178.50 | 154.00 | 437.00 | 4,309.96 |
| 9700.001 CLAIMS/LOCAL. T/S DRIVER | 3,819.80 | 3,823.91 | 1,884.00 | 1,739.92 | 3,313.00 | 5,253.45 | 871.10 | 5,201.55 | 6,136.79 | 32,043.52 |
| 8702.001 CLATMS/INTER. COMPANY | 3,908.81 | 1,472.79 | 947.15 | 1,745.08 | 4,151.49 | 0.00 | 2,302.82 | 0.00 | 4,498.22 | 19,026.36 |
| 8703.001 CLATMS/ENTEER. OWNER OPER | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 149.48 | 149.48 |
| 8900.001 BAD DEET EXPENSE | -7,863.19 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 493.68 | 150.00 | 1,740.00 | -5,479.51 |
| EXPENSE ACCOUNTS TOTALS | 346,651.63 | 300,107.42 | 331,838.08 | 423,257.27 | 522,261.16 | 566,322.69 | 700,041.15 | 566,500.22 | 484,510.89 | 4,241,490.51 |
| revenue accounts totals | 300,973.90 | 259,894.61 | 347,540.69 | 463,740.34 | 590,402.67 | 694,117.44 | 817,381.29 | 657,461.48 | 591.444.99 | 4,722,957.41 |
| EXPENSE ACCOUNTS TOTALS | 346,651.63 | 300,107.42 | 331,838.08 | 423,257.27 | 522,261.16 | 566,322.69 | 700,041.15 | 566,500.22 | 484,510.89 | 4,241,490.51 |
| INCOME TOTALS | -45,677.73 | -40,212.81 | 15,702.61 | 40,483.07 | 68,141.51 | 127,794.75 | 117,340.14 | 90,961.26 | 106,934.10 | 481,466.90 |

