

BUSINESS PLAN OF APPLICANT FOR MOTOR CARRIER AUTHORITY

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

A-2015-2472707

PUC Application Docket No.

Susquehanna Valley Limousine, Inc.

Legal Name of Applicant

Susquehanna Valley Taxi Service

Trade Name, if any

2225 Ridge Road Northumberland

PA

17857

Street Address (principal 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 Utility 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.

Chris A. Peifer - Owner

2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.

I am also owner of Susquehanna Valley Limousine Inc. and Sandstone Trucking Co., Inc. Both being PUC certificate holders.

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.

I have owned a successful trucking company for 27 years and an equally successful limousine company for 10 years. They have both had significant growth under my ownership. I have also become very familiar, through hands on experience, with Federal Motor Carrier and PA PUC rules and regulations, including safety and drug screening, as a common carrier of passengers and general hauling.

4. Describe the 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.

A separate office facility with 3 individual office spaces within, including a restroom and conference/break area. The office is equipped with 4 computers, fax, scanner and copy machines, along with a safe and filing cabinets

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 will start with a phone and email network, followed by the most up to date software and dispatching technology as soon as possible.

6. Please explain:

- a. Your hiring standards for drivers;

All drivers and staff are hired by myself and emphasis will be on appearance and safety. We will also do pre-employment drug screens and background check.

- b. Your system to ensure prospective drivers will be subject to a criminal background check;

We have a new hire authorization form that allows us to preform initial background checks and periodic employment screening, using Intellicorp as our background check provider.

- c. Your driver training program;

We use training videos upon hire and ride along training as long as necessary, until the driver meets our standards. We also conduct periodic driver meetings for re-training and safety purposes.

- d. Your system for ensuring that your drivers are properly licensed at all times;

Yearly self-certification reviews along with insurance checks on a yearly basis.

- e. Your system to ensure that all drivers will be subject to a criminal background check every two years;

Employee signed waiver upon hire allow for periodic criminal and driving background checks.

- f. Your policies regarding alcohol and drug use by your drivers.

Our company has a Zero tolerance policy on drug and alcohol use. We do pre-employment and post-accident or incident drug testing. All CDL drivers are entered in a local drug testing consortium.

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.

2 plus cars and we feel up to 5 could be possible, as no other local company provides 24 hour service. We also have potential for local county work upon opening. We would start with 2013 or newer Subaru Crosstreds.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY</u>	<u>VEHICLE ID #</u>

8. Describe your vehicle safety program. Please include the following in your explanation:
- Your periodic vehicle maintenance plan;

We employ an in house mechanic that does daily, weekly and monthly service checks.

- Your system for ensuring your vehicles will continuously comply with Pennsylvania's inspection standards and the Commission's equipment standards;

Our company employs 2 certified inspection mechanics and we are also a certified inspection station.

- If applying for Taxi or Limousine Authority, explain how vehicles will be replaced once they are greater than eight model years in age;

We plan to update our fleet with new vehicles on a regular basis. Our business model is to provide a reputable, upscale service with attention to detail and technology, bringing a big city service to a rural area.

- If applying for Household Goods Authority, explain how it will be ensured that vehicles meet all USDOT equipment standards.

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 premiums they have quoted.

Adam Purdy – Purdy Insurance Agency 570.286.5855
we quoted a 2013 Subaru Crosstrek exceeding state requirements at approximately \$4000. per car.

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

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 service. You may use the "Statement of Financial Position" which follows this page or supply a balance sheet 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 you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

Note: Commission regulations require that if the 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. Each individual holding any of these positions should provide a separate page identifying the individual and a statement of his/her financial position.

Statement of Financial Position (Balance Sheet)

As of (date) DEC , 2, 2015

ASSETS

Current Assets

Cash

19,430.79

Other Current Assets (specify) A/R

32,213.62

Other Assets

Motor Vehicle Equipment

677,635.51

Building and Structures

200,081.62

Office Equipment

66,068.55

Investments and Funds (specify)

TOTAL ASSETS

995,430.09

LIABILITIES

Current Liabilities (Due within one year of date)

35,753.97

Long Term Liabilities (Due after one year of date)

TOTAL LIABILITIES

686,126.06

721,880.03

NET WORTH / OWNER'S EQUITY (Subtract total liabilities from total assets)

273,550.06

Disclaimer: Applications are public records and can be accessed on the PUC's website. DO NOT provide social security numbers, credit card numbers, bank account numbers, tax information, or any other confidential information on your application, business plan, or verified statement forms.

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



(Signature)

12/02/2015

(Date)

Chris A Peifer, Secretary

(Name and Title, printed or typed)