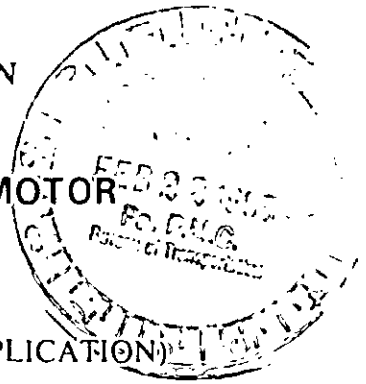


BEFORE  
PENNSYLVANIA PUBLIC UTILITY COMMISSION

APPLICATION FOR TRANSPORTATION BY MOTOR  
COMMON CARRIERS OF PROPERTY



(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	701100
Docket No.	A-00111857
Folder No.	

<b>DOCKETED</b>
APPLICATION DOCKET
<b>FEB 24 1995</b>
ENTRY No. <i>[Signature]</i>

RECEIVED  
95 FEB 21 AM 9:51  
H.A.P. U.C.  
INFO. CONTROL DIV.

1. Franklin D. Jennings  
(Full and correct name in which you intend to operate)

2. D/B/A Frank Jennings  
(Trade name, if any)

The trade name, if fictitious, \_\_\_\_\_ been registered with the Secretary of  
(has or has not)

the Commonwealth on \_\_\_\_\_ (attach copy of date-stamped registration  
(Date) form).

3. RR2 Box 320B - W. Union Rd. (717) 673-4125  
(Physical Address) (Telephone No.)

Canton Bradford PA 17724  
(City) (County) (State) (Zip)

4. \_\_\_\_\_  
(Mailing Address; if different)

\_\_\_\_\_  
(City) (County) (State) (Zip)

**DOCUMENT  
FOLDER**

5. Applicant does hold ICC authority under Docket No. MC 248400  
(does or does not)

6. Applicant does have a current safety rating issued by Ronald G. Ashby  
(does or does not) Fed. Highway Admin.

(attach copy).

7. Approximate number of commercial vehicles to be operated intrastate:

owned ① leased \_\_\_\_\_

8. Applicant is (check one):

**Individual**

**Partnership.** Attach copy of partnership agreement and list names and addresses of all partners below (use additional sheet if necessary).

(Name)	(Address)

**Corporation.** Organized under the laws of the State of \_\_\_\_\_ and qualified to do business in Pennsylvania by registering with the Secretary of the Commonwealth on \_\_\_\_\_ (Attach date-stamped copy of application for Certificate of Incorporation or Authority). Include as an attachment a list of corporate officers and their titles and the names, addresses and number of shares held by each stockholder.

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

Partnership Agreement.

Date-stamped copy of Fictitious Trade Name registration certificate.

Date-stamped copy of Application for Certificate of Incorporation or Certificate of Authority.

Copy of a current safety rating issued by a state or federal agency.

List of corporate officers and stockholders and distribution of shares.

Proof of Insurance.

10. Certification

- a. Applicant certifies that it is not now engaged in any intrastate transportation of property for compensation between points in Pennsylvania and will not engage in the transportation for which approval is herein sought unless and until authorization for such transportation is received.
- b. Applicant certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance, and will be able to comply with them; and acknowledges that failure to abide by the requirements of the Commission as they relate to safety and insurance may result in civil penalties, suspension or cancellation of the certificate.
- c. Applicant certifies that it understands that it is subject to an annual assessment based upon its gross intrastate operating revenues to help pay expenses incurred by the PUC in regulating motor common carriers of property; and acknowledges that failure to file the annual assessment report and timely satisfy the assessment may result in civil penalties, suspension or cancellation of the certificate.

# VERIFICATION OF APPLICATION

I/We hereby state that the statements made in the application are true and correct to the best of my/our knowledge, information belief.

The undersigned understand(s) that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Frank Jennings      *Franklin D Jennings*      2-4-95  
(Print Name)      (Signature)      (Date)

\_\_\_\_\_  
(Print Name)      (Signature)      (Date)

\_\_\_\_\_  
(Print Name)      (Signature)      (Date)

This section must be completed by the applicant appearing on Line 1, if an individual; by all partners, if a partnership; or by the President or Secretary if a corporation).



U.S. Department  
of Transportation  
**Federal Highway  
Administration**

400 Seventh St., S.W.  
Washington, D.C. 20590

SEPTEMBER 01, 1993

IN REPLY REFER TO:  
YOUR USDOT NO.: 467922  
REVIEW NO.: 00155213/SR

FRANK JENNINGS  
FRANKLIN D. JENNINGS  
RR 2 BOX 320B  
CANTON, PA 17724

GENTLEMEN:

THE MOTOR CARRIER SAFETY RATING FOR YOUR COMPANY IS:

SATISFACTORY

THIS SATISFACTORY RATING IS THE RESULT OF A APR 07, 1992, REVIEW AND EVALUATION. A SATISFACTORY RATING INDICATES THAT YOUR COMPANY HAS ADEQUATE SAFETY MANAGEMENT CONTROLS IN PLACE TO EFFECT SUBSTANTIAL COMPLIANCE WITH THE FEDERAL MOTOR CARRIER SAFETY AND/OR HAZARDOUS MATERIALS REGULATIONS.

PLEASE ASSURE YOURSELF THAT ANY SPECIFIC DEFICIENCIES IDENTIFIED IN THE REVIEW REPORT HAVE BEEN CORRECTED. WE APPRECIATE YOUR EFFORTS TOWARD PROMOTING MOTOR CARRIER SAFETY THROUGHOUT YOUR COMPANY. IF YOU HAVE QUESTIONS OR REQUIRE FURTHER INFORMATION, PLEASE CONTACT THE SAFETY SPECIALIST WHO CONDUCTED THE REVIEW.

RONALD G. ASHBY  
CHIEF, FEDERAL PROGRAMS DIVISION

- SEE MESSAGE ON BACK -

RECEIVED  
95 FEB 21 AM 9:51  
PA. P. U. C.  
INFO. CONTROL DIV.

**PENNSYLVANIA  
FINANCIAL RESPONSIBILITY IDENTIFICATION CARD**

COMPANY CODE AND NAME

MGA INSURANCE COMPANY 40150

Name and Address of Insured

FRANK JENNINGS  
R.D. 2 BOX 320B  
CANTON PA 17724

POLICY NUMBER
MPP 013 137
EFFECTIVE DATE
10/9/94
EXPIRATION DATE
4/9/95

Description of Vehicle:

1990 WHITE GMC TRACTOR #4Z1ZDBDH8LN630415  
Year                      Make/Model                      Vehicle Identification Number

LINCOLN GENERAL INSURANCE COMPANY  
3350 Whiteford Road, York, Pennsylvania 17402

Cargo

INLAND MARINE FLOATER POLICY DECLARATIONS

ISSUED TO: JENNINGS, FRANK  
.INDIVIDUAL R.D.#2 BOX 320B  
CANTON, PA 17724

POLICY PERIOD: FROM: 11-01-93 TO: 11-01-94

AGENT OR BROKER: INTERSTATE INSURANCE MANAGEMENT  
.5460. 231 BEDFORD STREET  
JOHNSTOWN, PA 15901

KIND OF BUSINESS: .TRUCKMAN 51/22/850  
LOCATION OF BUSINESS: .SAME AS ABOVE

Issue Date: 11-08-93 LAW

AMOUNT	RATE	PREMIUM
\$ 10,000.	charge	\$ 500.

ENDORSEMENT PREMIUM CHARGES	TOTAL POLICY PREMIUM
\$ ,	\$ 500.

In consideration of the stipulations herein named and of the premium above specified, the Company does insure the above Named Insured, hereinafter called the Insured, whose address is shown above, at 12:01 am. (standard time), to the expiration date shown above, at 12:01 am. (standard time), at the place of issuance, to an amount not exceeding the amount specified above.

If no other deductibles appear in this policy, the amount of \$ 500. shall be deducted and paid by the insured for each claim for loss or damage and shall be adjusted separately for each such claim.

POLICY SURCHARGES/TAXES	(If Applicable)
STATE/COMMONWEALTH	\$
C O U N T Y	\$
MUNICIPALITY	\$

FORMS AND ENDORSEMENTS CONTAINED IN THIS POLICY AT ITS INCEPTION:

SEE ENDORSEMENT SCHEDULE

This policy is made and accepted subject to all conditions, provisions, stipulations and agreements hereby made a part of this policy, together with such other conditions, provisions, stipulations and agreements as may be added hereto.

Countersigned 11-19-93  
(Date)

By: [Signature]  
(Authorized Representative)



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

IN REPLY PLEASE  
REFER TO OUR FILE

March 1, 1995.

Franklin D. Jennings, t/d/b/s  
Frank Jennings  
RR#2, Box 3208  
West Union Road  
Canton, PA 17724

In re: A-00111857 - Franklin d. Jennings, t/d/b/a Frank Jennings

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of March 4, 1995.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before March 27, 1995. If comments are filed, you will be advised as to the procedure.

Yours truly,

Peter S. Marzolf, Supervisor  
Application Review Section  
Bureau of Transportation & Safety

PSM:rp

cc: Document Folder

DOC. 0111857  
FOLDER