

BEFORE  
PENNSYLVANIA PUBLIC UTILITY COMMISSION

000107  
APPLICATION FOR TRANSPORTATION BY MOTOR  
COMMON CARRIERS OF PROPERTY RECEIVED  
PROTHONOTARY'S OFFICE

96 NOV -1 AM 8:52

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	702235
Docket No.	_____
Folder No.	_____

DOCKETED  
APPLICATION DOCKET

NOV 19 1996

ENTRY No. 72

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BUREAU OF  
TRANSPORTATION & SAFETY

1. Mohney's Towing  
(Full and correct name in which you intend to operate)

2. Max S. Mohney  
(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).

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96 NOV 15 AM 11:23  
PROTHONOTARY'S OFFICE

3. 1224 Wayne Ave. 412-349-8778  
(Physical Address) (Telephone No.)

Indiana Indiana PA 15701  
(City) (County) (State) (Zip)

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

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

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A-113550

DOCUMENT  
FOLDER

5. Applicant does not hold ICC authority under Docket No. \_\_\_\_\_  
(does or does not)

6. Applicant does not have a current safety rating issued by \_\_\_\_\_  
(does or does not)

(attach copy).

7. Approximate number of commercial vehicles to be operated intrastate:  
owned 2 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.

Max S. Mohney            10-29-96  
(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).





ERIE INSURANCE GROUP

100 Erie Ins. Bldg. Erie, PA 16530

CONTINUATION NOTICE

ERIE INSURANCE EXCHANGE PIONEER GARAGE/AUTO POLICY

AGENT WILLIAM G MECHLING ITEM 2. POLICY PERIOD 10/31/96 TO 10/31/97 POLICY NUMBER Q10 3180103 MP7

ITEM 1. NAMED INSURED AND ADDRESS MOHNEY'S AUTO & ENDT #1 1224 WAYNE AVE INDIANA PA 15701-3514

ITEM 3. OTHER INTEREST AS LISTED BELOW

ITEM 4. COVERAGES UNDER THIS POLICY INCLUDE:

- GARAGE LIABILITY PACKAGE, WHICH INCLUDES: GARAGE PREMISES- OPERATIONS/PRODUCTS-COMPLETED OPERATIONS/TENANTS LEGAL LIABILITY/TRUTH IN LENDING & LEASING/ODOMETER/AUTO DAMAGE DISCLOSURE/COMPETITIVE AUTO PARTS LAWS & FEDERAL USED CAR "BUYER'S GUIDE" REGULATION
AUTOS WE INSURE: ANY AUTO--OWNED, HIRED & NON-OWNED AUTOS
- CUSTOMERS AUTOS - LOCATION(S) SHOWN BELOW
- GARAGE AUTOS PHYSICAL DAMAGE - LOCATION(S) SHOWN BELOW
- DESCRIBED AUTOS - VEHICLES SHOWN BELOW

ITEM 5. INSURANCE IS PROVIDED WHERE A PREMIUM OR "INCL" (INCLUDED) IS SHOWN FOR THE COVERAGE.

Table with columns: STATE, RATING TERR, TOTAL NUMBER OF EMPLOYEES/PERSONS BY CLASS (CL 1, CL 1A, CL 2, CL 3, CL 4). Includes sub-rows for FULL-TIME and PART-TIME.

TOTAL NUMBER OF DEALER TAGS: 4

Table listing coverages and premiums: DEALERS LIABILITY COVERAGES, FIRST PARTY BENEFITS, UNINSURED MOTORISTS COVERAGE, UNDERINSURED MOTORISTS COVERAGE.

Table listing state and location details and customer coverages: STATE: PA, LOCATION: 01, RATING TERRITORY: 92. Includes CUSTOMERS AUTOS and GARAGE AUTOS coverages.

ITEM 4. AUTOS WE INSURE/ALSO INSURED - GARAGE PREMISES-OPERATIONS/PRODUCTS-  
 COMPLETED OPERATIONS/TENANTS LEGAL LIABILITY/TRUTH IN LENDING &  
 ODOMETER LAW LIABILITY

10 93 FORD TOW TRK 2FDKF38C9PCB17081 PA 92 05 ST TER SYM RATING CLASS DDP  
 2

ANNUAL PREMIUMS  
 # 10

LIABILITY PROTECTION-	
PERS INJURY \$100M/PERSON \$300M/ACC	288
PROPERTY DAMAGE \$100M/ACC	211
FIRST PARTY BENEFITS-	
MEDICAL EXPENSE \$10M	14
INCOME LOSS \$1M/MONTH, \$15M MAXIMUM	13
ACCIDENTAL DEATH \$5M	2
FUNERAL BENEFIT \$2.5M	2
UNINSURED MOTORISTS COVERAGE-	
BOD INJ \$100M/PERSON \$300M/ACC-STACKED	9
UNDERINSURED MOTORISTS COVERAGE-	
BOD INJ \$100M/PERSON \$300M/ACC-STACKED	28
PHYSICAL DAMAGE COVERAGES-	
COMPREHENSIVE - \$500 DED	59
COLLISION - \$500 DED	200

TOTAL ANNUAL PREMIUM FOR EACH UNIT	826
TOTAL ANNUAL POLICY PREMIUM	\$ 5,032
BALANCE FROM LAST YEAR	\$ 271.00
BALANCE	\$ 5,303.00

ITEM 6. APPLICABLE POLICY, ENDORSEMENTS, EXCEPTIONS TO DECLARATIONS ITEMS

ENDORSEMENT 1

IT IS AGREED THAT NAMED INSURED SHALL READ AS FOLLOWS:

MOHNEY'S AUTO INDIANA MOTOR SALES, MAX MOHNEY D/B/A PRO-  
 CHOICE AUTO PRODUCTS

ALL AUTOS - GAP 10/94, AHPA01 10/94, AGBA03 01/96\*, AGBE01 07/96\*,  
 ABPU03 02/96\*, ABPN01 07/96\*, AGPB04 07/96\*, ABPU03 02/96\*.  
 AUTO 10 - ABPU03 02/96\*, ABPN01 07/96\*, ADBB02 06/85.  
 LOCATION 1 - ABPN01 07/96\*..

MISCELLANEOUS INFORMATION

ITEM 8 DEALER/NON-FRANCHISED & TOWING SERVICE.  
 ITEM 10 LOC 1 SEE ITEM 1 NSOL.  
 CLASS 3 NON-EMPLY LAURA MOHNEY/WIFE/.  
 AUTO 10 RADIUS OF OPERATION 50 MILES.  
 Q10 3180103 CONTINUED ON NEXT PAGE



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

IN REPLY PLEASE  
REFER TO OUR FILE

November 30, 1996

MAX S MOHNEY  
T A MOHNEYS TOWING  
1124 WAYNE AVENUE  
INDIANA PA 15701

In re: A-00113550 - Application of Max S. Mohney, t/d/b/a Mohney's Towing

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of November 30, 1996.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before December 16, 1996, 1996

If comments are filed, you will be advised as to the procedure.

You are not yet authorized to provide intrastate service. You will receive notification when you may begin.

Very truly yours,

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

PSM:lg

