

BEFORE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

APPLICATION FOR TRANSPORTATION BY MOTOR VEHICLE
COMMON CARRIERS OF PROPERTY

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PROTHONOTARY'S OFFICE

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	
Docket No.	<u>A-113552</u>
Folder No.	_____

DOCKETED APPLICATION DOCKET	
NOV 20 1996	
ENTRY No.	<u>101</u>

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BUREAU OF
TRANSPORTATION & SAFETY

- DONALD R. CARNEY
(Full and correct name in which you intend to operate)
- D/B/A Brothers Auto TRANSPORT
(Trade name, if any)

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

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

- 3209 HAY ROAD 717-629-2459
(Physical Address) (Telephone No.)

Reeders Monroe Pa. 18352-
(City) (County) (State) (Zip)

- PO Box 462
(Mailing Address; if different)

Reeders Monroe Pa. 18352-0462
(City) (County) (State) (Zip)

DOCUMENT
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5. Applicant does hold ICC authority under Docket No. MC 297626
 (does 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 1 leased 1

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.

DONALD R. CARNEY Donald R. Carney 11-13-96
(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).

JOHN DEERE INSURANCE COMPANY
 A Stock Company, Moline, IL 61265
 Administrative Offices: John Deere Transportation Services
 P.O. Box 2051
 Milwaukee, WI 53201
 1-800-558-9257

PART 1

Renewal of Number

**COMMERCIAL AUTO COVERAGE PART
 TRUCKERS COVERAGE FORM DECLARATIONS**

POLICY NO. **736178-6196-963**

NOTICE: Policy contains endorsements RE: unauthorized passengers & unreported drivers, which restrict coverage. Please read carefully.



ITEM ONE - NAMED INSURED AND MAILING ADDRESS
DONALD R. CARNEY DBA BROTHERS AUTO TRANSPORT
P.O. BOX 462
REEDERS PA 18352

BUSINESS DESCRIPTION
 Form of Business

- Individual
- Partnership
- Corporation
- Other

UNTIL CANCELLED

12:01 A.M. Standard Time at your mailing address shown above.

POLICY PERIOD: Policy covers FROM **4/25/96** TO **PER END JDT216**

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

Each of these coverages will apply to those vehicles listed for a particular coverage on the entry of one or more of the vehicles in this coverage.

COVERAGES	LIMIT	DEDUCTIBLE	PREMIUM
LIABILITY	46 1,000,000		INCLUDED
PERSONAL AUTO PROTECTION (PIP)	46	DEDUCTIBLE	INCLUDED
ADDED PIP (No-fault added No-fault cov.)			\$
PROPERTY PROTECTION (INS. PIP) (Michigan Only)			\$
AUTO MEDICAL PAYMENTS			\$
UNINSURED MOTORISTS (UM)	46 35,000		INCLUDED
UNDERINSURED MOTORISTS	46 35,000		INCLUDED
TRAILER INTERCHANGE	COMPREHENSIVE COVERAGE	WHICHEVER IS LESS	\$
	SPECIFIED CAUSES OF LOSS COVERAGE	WHICHEVER IS LESS MINUS \$25 DED. FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM	\$
	COLLISION COVERAGE	WHICHEVER IS LESS MINUS \$ PER ITEM DED. FOR EACH COVERED AUTO	\$
PHYSICAL DAMAGE	COMPREHENSIVE COVERAGE	DED. FOR EACH COVERED AUTO, BUT NO DED. APPLIES TO LOSS CAUSED BY FIRE OR LIGHTNING	\$
	SPECIFIED CAUSE OF LOSS COVERAGE	DEDUCTIBLE FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM	\$
	COLLISION COVERAGE	DEDUCTIBLE FOR EACH COVERED AUTO	\$
	TOWING AND LABOR	for each dislodgment of a private passenger auto	\$

FORMS AND ENDORSEMENTS APPLYING TO THIS COVERAGE PART AND MADE AVAILABLE AT TIME OF ISSUE
SEE ATTACHED

ESTIMATED TOTAL PREMIUM **SEE JDT216**
 TERRITORY: **Town & State Where the Covered Auto will be principally garaged**
REEDERS PA

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

DESCRIPTION, CLASSIFICATION, COVERAGES, PREMIUMS, LIMITS AND DEDUCTIBLES
PER ATTACHED SCHEDULE

Agency Name and No

Donald R. Carney



MOAC
Marine Office of America Corporation

**Commercial Inland Marine
Coverage Part Declarations**

Policy No. _____

INSURANCE APPLIES ONLY TO THOSE COVERAGES DESIGNATED BY AN X IN THE BOX NEXT TO THEM

<input type="checkbox"/>	Contractor's Equipment	Rate \$ _____	Premium \$ _____
Scheduled Property	Limit of Insurance	Description	
	\$ _____		
	\$ _____		
	\$ _____		
	\$ _____		
	\$ _____		
	\$ _____	Van, One New Acquisition	
	\$ _____	Any One Unscheduled Item	
	\$ _____	Limit per Occurrence	
	\$ _____	Days Rental Expense	
	\$ _____	Material Expense (See Endorsement MOAC IM 308)	

Deductible (A or B)

Deductible Amount

_____ of the limit of insurance on the item, or the largest limit of insurance involved in the same loss, but not less than \$ _____ or more than \$ _____

Extensions

Insurance applies only to those Extensions designated by an X in the box next to them. See endorsement MOAC IM 311.

Additional Covered Property

Fire and Deck Boat Extension

Replacement Cost

<input checked="" type="checkbox"/>	Motor Truck Coverage	Rate \$ _____	Premium \$ 2,825.00
Scheduled Vehicles	Limit of Insurance	Year	Trade Name
	\$ 2,000.00	1996	Ford
			Motor or Serial No. to follow
			Type Tractor

Scheduled Locations

\$ Not Covered

Location

Unscheduled Vehicles

\$ Not Covered Any one Unscheduled Vehicle for more than one vehicle pulled by one power unit

Occurrence Limit

\$ Not Covered Limit per Occurrence

Deductible Coverage Options

\$ 2,500.00 **Deductible Amount**

Insurance applies only to those Coverage Options designated by an X in the box next to them. See endorsement MOAC IM 337 for options.

Locked Vehicle Attended Vehicle Limitation on Certain Commodities

Refrigeration Breakdown Coverage Inspected by _____



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

DONALD R CARNEY
T A BROTHERS AUTO TRANSPORT
PO BOX 462
REEDERS PA 18352-0462

In re: A-00113552 - Application of Donald R. Carney, t/d/b/a Brothers Auto Transport

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,

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

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