

BEFORE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

APPLICATION FOR TRANSPORTATION BY MOTOR
COMMON CARRIERS OF PROPERTY

702381

RECEIVED

FEB 10 1997

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

BUREAU OF
TRANSPORTATION & SAFETY

For PUC Use Only
Docket No. <u>A-00113750</u>
Folder No. _____

DOCUMENT
FOLDER

1. C.M. KRISTMAN EXCAVATING, INC.
(Full and correct name in which you intend to operate)

2. N/A
(Trade name, if any)

The trade name, if fictitious, N/A been registered
(has or has not)

Secretary of the Commonwealth on N/A (attach
date-stamped registration form).

3. 1099 Cannery Road 610-347-0688
(Physical Address) (Telephone No.)

Coatesville USA Chester PA 19320
(City) (County) (State) (Zip)

4. _____
(Mailing Address; if different)

DOCKETED
APPLICATION DOCKETED

5. _____
(City) (County) N/A
(Attorney's Name) (Telephone Number)

_____ (Attorney's Address)
ENTRY NO. 119

6. Applicant Does hold ICC authority under Docket
(does or does not)

No. MC 290984 Subop

7. Applicant Does NOT have a current safety rating
(does or does not)

issued by _____

(attach copy)

8. Approximate number of commercial vehicles to be operated

intrastate: owned 1 leased _____

9. 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 numbers of shares held by each stockholder.

10. 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 current safety rating issued by a state or federal agency.
- List of corporate officers and stockholders and distribution of shares.
- Proof of insurance.

11. 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 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 revenue 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.

KAREN MATTHEWS Karen Matthews 2/4/97
(Print Name) (Signature) (Date)

KAREN MATTHEWS Karen Matthews 2/4/97
(Print Name) (Signature) (Date)

KAREN MATTHEWS Karen Matthews 2/4/97
(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.

EXEMPTION FROM P.U.C. CARGO INSURANCE REGULATIONS

This is to advise that C.M. Keistman Excavating Inc
(Name of Carrier)

holding P.U.C. authority at Application Docket No. A-
is exempt from P.U.C. Cargo Insurance regulations for the following reasons:

- All Transportation will be provided in dump trucks.
- All transportation will be limited to farm products, garbage, ashes, rubbish, coal, debris, earth, crushed stone, amesite and similar construction materials.
- The value of any one load being transported will not be more than \$500.

Karen Matthews
(Signature of Individual, Partner or Corporate Officer)

VERIFICATION OF STATEMENT

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and 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 the penalties of 18 C. S. Sec. 4904 relating to unsworn falsification to authorities.

Date 2/4/97

Karen Matthews
(Signature)

KAREN MATTHEWS
(Print Name)

Please return to:

PENNSYLVANIA PUBLIC UTILITY COMMISSION
BUREAU OF TRANSPORTATION AND SAFETY
INSURANCE UNIT
P. O. BOX 3265
HARRISBURG, PA 17105-3265

INSURANCE IDENTIFICATION CARD

09/24/98

PA (STATE)

COMPANY NUMBER
6666

COMPANY
Cincinnati Ins. Co

POLICY NUMBER
CPP0652971

EFFECTIVE DATE
09/30/98

EXPIRATION DATE
09/30/97

YEAR MAKE/MODEL
1976 MACK DUMP

VEHICLE IDENTIFICATION NUMBER
R698ST3994

AGENCY/COMPANY ISSUING CARD
**J A Rigg Insurance Agency Inc
222 Kenhorst Blvd.**

Reading PA 19607

INSURED

**C. M. Kristman Excavating
& Charles M. Kristman
1099 Cannery Road
Coatesville PA 19320**

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT:

Report all accidents to your Agent/Company as
soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each

ACORD 50 (8/93)

© ACORD CORPORATION 1993

ARTICLES OF INCORPORATION
(PREPARE IN TRIPPLICATE)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE - CORPORATION BUREAU
308 NORTH OFFICE BUILDING, HARRISBURG, PA 17120

PLEASE INDICATE (CHECK ONE) TYPE CORPORATION:

- DOMESTIC BUSINESS CORPORATION
- DOMESTIC BUSINESS CORPORATION
A CLOSE CORPORATION - COMPLETE BACK
- DOMESTIC PROFESSIONAL CORPORATION
ENTER BOARD LICENSE NO.

COPY
FEE
\$75.00

010 NAME OF CORPORATION (MUST CONTAIN A CORPORATE INDICATOR UNLESS EXEMPT UNDER 15 P.S. 2908 B)
C. M. Kristman Excavating, Inc.

011 ADDRESS OF REGISTERED OFFICE IN PENNSYLVANIA (P.O. BOX NUMBER NOT ACCEPTABLE)
R.D. #4, Box 302A

012 CITY Coatesville	033 COUNTY Chester (15)	013 STATE PA	064 ZIP CODE 19320
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050 EXPLAIN THE PURPOSE OR PURPOSES OF THE CORPORATION

To engage in and do any lawful act concerning all lawful business for which corporations may be incorporated under the Business Corporation Law of Pennsylvania, and to do all things and exercise all powers, rights and privileges which a business corporation may now or hereafter be organized or authorized to do or to exercise under the laws of the Commonwealth of Pennsylvania.

(ATTACH 8 1/2 x 11 SHEET IF NECESSARY)

The Regulate Number of Shares, Classes of Shares and Par Value of Shares Which the Corporation Shall have Authority to Issue:

040 Number and Class of Shares 100 sh., common	041 Stated Par Value Per Share If Any \$1.00	042 Total Authorized Capital \$100.00	031 Term of Existence perpetual
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The Name and Address of Each Incorporator, and the Number and Class of Shares Subscribed to by each Incorporator

060 Name	061, 062 063, 064 Address (Street, City, State, Zip Code)	Number & Class of Shares
Charles M. Kristman	R.D. #4, Box 302A, Coatesville, PA 19320	100 sh., com
(ATTACH 8 1/2 x 11 SHEET IF NECESSARY)		

IN TESTIMONY WHEREOF, THE INCORPORATOR (S), HAS (HAVE) SIGNED AND SEALED THE ARTICLES OF INCORPORATION
THIS 24th DAY OF May 1989

Charles M. Kristman
CHARLES M. KRISTMAN

- FOR OFFICE USE ONLY -

030 FILED MAY 26 1989 <i>James J. Blayney</i>	002 CODE	003 REV BOX	SEQUENTIAL NO.	100 MICROFILM NUMBER
	REVIEWED BY	004 SIC	AMOUNT	001 CORPORATION NUMBER
	DATE APPROVED	CERTIFY TO	INPUT BY	LOG IN
	DATE REJECTED	<input type="checkbox"/> REV.	LOG IN (REFILE)	
MAILED BY DATE	<input type="checkbox"/> L & I	VERIFIED BY	LOG OUT	LOG OUT (REFILE)
	<input type="checkbox"/> OTHER			

Filing Fee: None

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
CORPORATION BUREAU
308 NORTH OFFICE BUILDING
HARRISBURG, PA 17120

CORPORATE
REGISTRY INFORMATION
FOR
DEPARTMENTS OF STATE
AND REVENUE
(FILE IN TRIPLICATE)

BUREAU USE ONLY (53)	
Department of State Number	
Box Number	
Filing Period	Inc. Date 3 4 5
Standard Industrial Code	Report Code

BUSINESS CORPORATION NON-PROFIT CORPORATION MOTOR VEHICLE FOR HIRE

1 Name of Corporation/Business: **C. M. Kristman Excavating, Inc.** 2 Federal E.I.N. applied for

3 Location of Initial Registered Office in Pennsylvania (Street/Route, City, County, State, Zip Code)
R.D. #4, Box 302A, Coatesville, Chester County (15), PA 19320

4 Mailing Address if different than #3 (location where correspondence, tax report forms, etc. are to be sent)
R.D. #4, Box 302A, Coatesville, Chester County (15), PA 19320

5A Foreign corporations: Location of proposed registered office (Street and Number, Post Office, State) 5B Date Business Started in PA

6 Principal Officers (President, Vice President, Secretary, Treasurer)

A Name: **Charles M. Kristman** Title: **President** Social Security Number

Home Address: **R.D. #4, Box 302A, Coatesville, PA 19320**

B Name: **Elisa L. Kristman** Title: **Secretary/Treasurer** Social Security Number

Home Address: **R.D. #4, Box 302A, Coatesville, PA 19320**

C Name Title Social Security Number

Home Address

D Name Title Social Security Number

Home Address

7 Date and State of Incorporation or Organization
Date: **even date herewith** State: **Pennsylvania**

8 Applicant is Operating as:
 Corporation An Individual Co-Partnership Joint Stock Association Association of Individuals Other

9 Provide the Act of General Assembly or authority under which you are organized or incorporated (full citation of statute or status—attach a separate sheet if more space is required)
15 P.S. Section 1001 et seq.

10A Is the corporation authorized to issue capital stock? No Yes 10B Amount of Capital paid in and Date
If yes, amount authorized? **100 sh.** Amount: **\$100.00** **even date herewith**

11 Is the Corporation part of a system operating in Pennsylvania? No Yes
If yes, provide parent's box number, name and subsidiary corporation. (Attach a separate sheet listing subsidiary corporation.)
Box Number: Name:

12 Corporation's fiscal year ends: **September 30** 13 Standard Industrial Classification Code: **1794**

14 Describe principal Pa. business activity to be engaged in, within one year of this application date (attach separate sheet if necessary).
For Motor Vehicles: include routes to be traveled.

Excavating

15 For Foreign Corporations Only—provide text of purpose as stated in articles.



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

IN REPLY PLEASE
REFER TO OUR FILE

March 7, 1997

C M KRISTMAN EXCAVATING INC
1099 CANNERY ROAD
COATESVILLE PA 19320

In re: A-00113750 - Application of C. M. Kristman Excavating, Inc.

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of March 8, 1997.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before March 24, 1997, 1997.

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

