

BEFORE PENNSYLVANIA PUBLIC UTILITY COMMISSION

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97 APR 22 AM 8:31

APPLICATION FOR TRANSPORTATION BY MOTOR COMMON CARRIERS OF PROPERTY

PROTHONOTARY OFFICE

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RECEIVED

MAR 03 1997

PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION

DOCKETED

APPLICATION DOCKET For PUC Use Only 702513 MAY 07 1997 Docket No. ENTRY No. TR

RECEIVED

APR 23 1997

BUREAU OF TRANSPORTATION & SAFETY

BUREAU OF TRANSPORTATION & SAFETY

PROTHONOTARY OFFICE

RECEIVED

97 FEB 28 9:10

1. WALTER TYKOTKE TRUCKING AND RECAVA Truck (Full and correct name in which you intend to operate)

2. NA (Trade name, if any)

The trade name, if fictitious, has or has not been registered

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

3. 15 Wood St 717 655-6087 (Physical Address) (Telephone No.)

Pittston TWP Luzern PA 18641 (City) (County) (State) (Zip)

4. Same (Mailing Address; if different)

(City) (County) (State) (Zip)

5. Brian Kelley 717 288 7800 (Attorney's Name) (Telephone Number)

(Attorney's Address)

DOCUMENT FOLDER

3 A-113949

25 Prop Re Mod

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

No. \_\_\_\_\_

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 2 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.

# ACORD CERTIFICATE OF LIABILITY INSURANCE

CSB 88  
EX-01-1

DATE (MM/DD/YY)

02/25/97

**PRODUCER**

Wells & Reinheimer Insurers  
P O Box 5250  
Scranton PA 18505-5250

Kenneth G Reinheimer  
Phone No. 717-586-1700 Fax No. 717-586-7410

**INSURED**

Walter A Tylutke Trucking &  
Excavating  
15 Wood Street  
Pittston PA 18640-1316

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**

- COMPANY A Ohio Casualty Insurance Co
- COMPANY B
- COMPANY C
- COMPANY D

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNERS & CONTRACTORS PROT				GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ PERSONAL & ADV INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> FOLLO B	BA052198027	09/28/96	09/28/97	COMBINED SINGLE LIMIT \$300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> THE PROPRIETOR/PARTNER/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> EL EACH ACCIDENT \$ EL DISEASE - POLICY LIMIT \$ EL DISEASE - EA EMPLOYEE \$
	OTHER				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

**CERTIFICATE HOLDER**

PUC---1

PUC  
P O Box 3265  
Harrisburg PA 17105-3265

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*Kenneth G. Reinheimer*

# 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.

WALTER T. Lutke      Walter T. Lutke      2-25-87  
(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).

FORM E INSURANCE SHOULD ALREADY  
BE ON FILE.

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.



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

IN REPLY PL  
REFER TO OU

May 16, 1997

WALTER A TYLUTKE  
T A WALTER A TUYLUTKE TRUCKING & EXCAVATING  
15 WOOD STREET  
PITTSTON TOWNSHIP PA 18641

In re: A-00113949 - Application of Walter A. Tylutke, t/d/b/a Walter A. Tylutke Trucking & Excavating

Dear Sir:

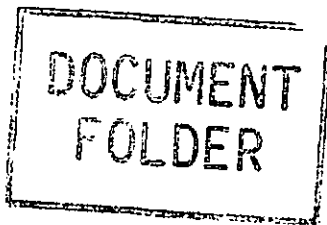
The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of May 17, 1997.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before June 2, 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  
Applications Review Section  
Bureau of Transportation & Safety

PSM:lg