

Cherewka & Radcliff, LLP

3905 North Front Street
Harrisburg, Pennsylvania 17110

(717) 232-4701 93 APR -7 11 3:40
(717) 236-9318
Fax (717) 232-4774

April 7, 1998

James J. McNulty, Acting Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265

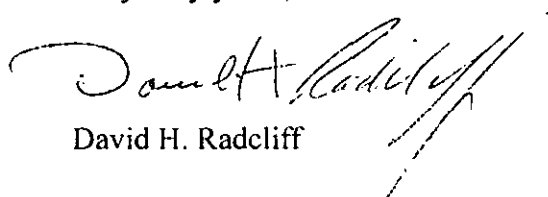
Re: Peifer Construction, Inc.
Our File No.: 1583.000

Dear Secretary McNulty:

Enclosed for filing, please find an original and one copy of an application for transportation of property for the above-referenced client. Also enclosed is a check in the amount of \$100.00 to cover the filing fee.

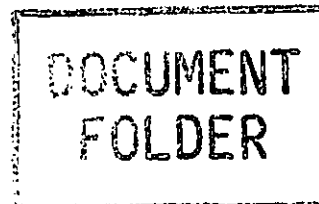
A copy of this application has also been forwarded to the applicant.

Very truly yours,


David H. Radcliff

DHR/mmb
Enclosures

cc: Roger C. Peifer
1365 Eisenhower Blvd.
Harrisburg, PA 17111



BEFORE
PENNSYLVANIA PUBLIC UTILITY COMMISSION
93 APR -7 11 3:48

APPLICATION FOR TRANSPORTATION BY MOTOR
CARRIERS OF PROPERTY

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	703040
Docket No.	_____

DOCKETED
APPLICATION DOCKET
APR 08 1998
ENTRY No. <u>12</u>

1. Peifer Construction, Inc.
(Full and correct name in which you intend to operate)

2. _____
(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. 1365 Eisenhower Blvd. (717)985-9150
(Physical Address) (Telephone No.)

Harrisburg, Dauphin, PA 17111
(City) (County) (State) (Zip)

Attorney's Name: David H. Radcliff, Esquire

4. 3905 North Front Street
(Mailing Address; if different)

**DOCUMENT
FOLDER**

Harrisburg, Dauphin, PA 17111
(City) (County) (State) (Zip)

*Prop Mail
Cert. Ins.*

A-114824

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 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 Pennsylvania 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. See Attachment 9(a)

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

List of corporate officers and stockholders and distribution of shares. See Attachment 9(b)

Proof of Insurance.

10. Certification

- a. Applicant certifies that it is not now engaged in any transportation of property for compensation 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.
- c. Applicant certifies that it understands that it is subject to an annual assessment based upon its gross intrastate operating revenues to help pay the expenses incurred by the PUC in regulating motor carriers of property.

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.

Roger C. Peifer
(Print Name)

Roger C. Peifer, Pres
(Signature)

4-7-98
(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).

103-1701

Microfilm Number _____

Filed with the Department of State on JAN 04 1994

Entity Number 2561710

[Handwritten Signature]

Secretary of the Commonwealth CA

**ARTICLES OF INCORPORATION-FOR PROFIT
OF**

PEIFER CONSTRUCTION, INC.

Name of Corporation

A TYPE OF CORPORATION INDICATED BELOW

Indicate type of domestic corporation:

- Business-stock (15 Pa.C.S. § 1306) Management (15 Pa.C.S. § 2702)
- Business-nonstock (15 Pa.C.S. § 2102) Professional (15 Pa.C.S. § 2903)
- Business-statutory close (15 Pa.C.S. § 2303) Insurance (15 Pa.C.S. § 3101)
- Cooperative (15 Pa.C.S. § 7102)

DSCB:15-1306/2102/2303/2702/2903/3101/7102A (Rev 91)

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. (relating to corporations and unincorporated associations) the undersigned, desiring to incorporate a corporation for profit hereby, state(s) that:

1. The name of the corporation is: Peifer Construction, Inc.

2. The (a) address of this corporation's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) <u>2735 Steinruck Road,</u>	<u>Elizabethtown,</u>	<u>Peunsylvania</u>	<u>17022</u>	<u>Dauphin</u>
Number and Street	City	State	Zip	County

(b) c/o: N/A

Name of Commercial Registered Office Provider	County
---	--------

For a corporation represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation is located for venue and official publication purposes.

3. The corporation is incorporated under the provisions of the Business Corporation Law of 1988.

4. The aggregate number of shares authorized is: 100,000 shares common (other provisions, if any, attach 8 1/2 x 11 sheet)

5. The name and address, including number and street, if any, of each incorporator is:

Name	Address
<u>Roger C. Peifer,</u>	<u>2735 Steinruck Road, Elizabethtown, PA 17022</u>

PA DEPT OF STATE

6. The specified effective date, if any, is: January 1, 1994

month day year hour, if any

JAN 04 1994

M. BURR KEMP COMPANY

9403-1702

DSCB:15-1306/2102/2303/2702/2803/3101/7102A (Rev 91)-2

- 7. Any additional provisions of the articles, if any, attach an 8 1/2 x 11 sheet.
- 8. ~~Statutory close corporation only:~~ Neither the corporation nor any shareholder shall make an offering of any of its shares of any class that would constitute a "public offering" within the meaning of the Securities Act of 1933 (15 U.S.C. § 77a et seq.).
- 9. ~~Cooperative corporations only:~~ (Complete and strike out inapplicable term) The common bond of membership among its members/shareholders is: N/A.

IN TESTIMONY WHEREOF, the incorporator(s) has (have) signed these Articles of Incorporation this 28th day of December, 1993.

Roger C. Faifer
 Roger C. Faifer (Signature)

 (Signature)

Corporate Officers

Roger C. Peifer

President, Secretary, Treasurer

Stockholders

Roger C. Peifer

60%

Roger C. Peifer, II

20%

Charles Peifer

20%

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
04/23/98

A-114824

PRODUCER
K. R. MacDonald, Inc.
4900 Derry St.
P.O. Box 4500
Harrisburg, PA 17111

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.

INSURERS AFFORDING COVERAGE

INSURED
PEIFER CONSTRUCTION, INC.
1365 S. EISENHOWER BLVD.

HARRISBURG, PA 17111

INSURER A: Pennsylvania National Insurance Co.
INSURER B:
INSURER C:
INSURER D:
INSURER E:

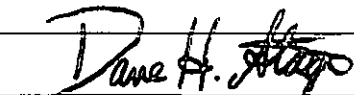
COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	CL9 006 57 00	01/28/98	01/28/99	EACH OCCURRENCE \$1,000,000.
					FIRE DAMAGE (Any one fire) \$ 50,000.
					MED EXP (Any one person) \$ 5,000.
					PERSONAL & ADV INJURY \$1,000,000.
					GENERAL AGGREGATE \$2,000,000.
					PRODUCTS - COMP/OP AGG \$2,000,000.
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	AU9 006 57 00	01/28/98	01/28/99	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000.
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
A	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10000	UL9 006 57 00	01/28/98	01/28/99	EACH OCCURRENCE \$1,000,000.
					AGGREGATE \$1,000,000.
					\$
					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WP9 006 57 00	01/28/98	01/28/99	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
					E.L. EACH ACCIDENT \$ 100,000.
					E.L. DISEASE - EA EMPLOYEE \$ 100,000. E.L. DISEASE - POLICY LIMIT \$ 500,000.
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

ADDITIONAL INSURED: COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION

CERTIFICATE HOLDER	ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
COMMONWEALTH OF PENNSYLVANIA PENNSYLVANIA PUBLIC UTILITY COMMISSION P. O. BOX 3265 HARRISBURG, PA. 17105-3265		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 



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

IN REPLY PLEASE
REFER TO OUR FILE

April 10, 1998

DAVID H RADCLIFF
ATTORNEY AT LAW
3905 NORTH FRONT STREET
HARRISBURG PA 17110

In Re: A-00114824 - PEIFER CONSTRUCTION, INC.

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of April 18, 1998.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before MAY 4, 1998.

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

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

Very truly yours,

Peter S. Marzolf, Supervisor
Technical Unit - Compliance Office
Bureau of Transportation and Safety

PSM:tz

cc: Document Folder
Peifer Construction, Inc.
1365 Eisenhower Boulevard
Harrisburg, PA 17111

