

Before the Pennsylvania Public Utility Commission

APPLICATION
MOTOR COMMON CARRIER OF PROPERTY

1. R.L. Clark & Sons Trucking Inc
FULL NAME OF APPLICANT (Individual, Partnership or Corporation)

2. _____
TRADE NAME IF ANY
The trade name, if fictitious, hao been registered with the
(has or has not)
Secretary of the Commonwealth on Dec 1, 98. Attach a date
stamped copy of the registration form.

3. RD #1 Box 89 Olanta PA 16863 (814) 236-394
PHYSICAL ADDRESS TELEPHONE NUMBER (REQUIRED)
(City, County, and Zip Code)

4. _____
MAILING ADDRESS IF DIFFERENT FROM PHYSICAL ADDRESS

5. NA
ATTORNEY'S NAME AND TELEPHONE NUMBER FOR THIS FILING
(Do not supply an Attorney's name if you want all correspondence and notice of
process mailed directly to you.)

NA
ATTORNEY'S ADDRESS

6. APPLICANT does not HOLD INTERSTATE OPERATING
(does or does not)
AUTHORITY AT DOCKET NUMBER _____

7. APPLICANT does not HAVE A CURRENT SAFETY RATING
(does or does not)
ISSUED BY THE US DOT, PA PUC OR OTHER STATE REGULATORY
AGENCY. (ATTACH COPY)

RECEIVED
BUREAU OF
TRANSPORTATION & SAFETY
MAY 14 AM 9:35

DOCKETED
APPLICATION DOCKET
MAY 25 1999
ENTRY NO. 87

A-115931

8. APPROXIMATE NUMBER OF COMMERCIAL VEHICLES TO BE OPERATED IN PENNSYLVANIA: OWNED 3 LEASED _____

9. CHECK ONE THAT APPLIES TO THIS APPLICATION:

INDIVIDUAL

PARTNERSHIP. ATTACH A COPY OF A PARTNERSHIP AGREEMENT AND LIST THE NAMES AND ADDRESSES OF ALL PARTNERS BELOW:

(Attach a separate sheet if space provided is not sufficient.)

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 12-1-98. ATTACH A DATE-STAMPED COPY OF THE APPLICATION FOR CERTIFICATE OF INCORPORATION OR CERTIFICATE OF AUTHORITY. INCLUDE A LIST OF CORPORATE OFFICERS WITH TITLES, NAMES OF SHAREHOLDERS AND NUMBER OF SHARES HELD, AND ADDRESSES. Ricky L. CLARK PRES. 50%
Lorrie CLARK VICEPRES. 50%

10. ATTACHMENT CHECKLIST:

FOR CORPORATIONS ONLY:

DATE STAMPED COPY OF APPLICATION FOR CERTIFICATE OF INCORPORATION OR CERTIFICATE OF AUTHORITY.

LIST OF OFFICERS/TITLES AND DISTRIBUTION OF SHARES.

FOR PARTNERSHIPS ONLY:

COPY OF PARTNERSHIP AGREEMENT.

FOR ALL APPLICANTS:

FICTITIOUS TRADE NAME REGISTRATION (IF APPLICABLE)

COPY OF CURRENT SAFETY RATING (IF AVAILABLE)

PROOF OF INSURANCE (See item 5 on instruction sheet).

CERTIFIED CHECK, MONEY ORDER OR ATTORNEY'S CHECK

11. CERTIFICATION:

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 SAID TRANSPORTATION UNLESS AND UNTIL AUTHORIZATION IS RECEIVED FROM THE PENNSYLVANIA PUBLIC UTILITY COMMISSION.

APPLICANT FURTHER CERTIFIES THAT IT UNDERSTANDS THE REQUIREMENTS OF THE PENNSYLVANIA PUBLIC UTILITY COMMISSION, ESPECIALLY AS THEY RELATE TO SAFETY AND INSURANCE AND THAT IT MAY BE SUBJECT TO CIVIL PENALTIES, SUSPENSION OR CANCELLATION OF THE CERTIFICATE FOR FAILURE TO COMPLY WITH COMMISSION REQUIREMENTS.

APPLICANT FURTHER CERTIFIES THAT IT UNDERSTANDS THAT IT IS SUBJECT TO AN ANNUAL ASSESSMENT BASED UPON ITS REPORTED GROSS PENNSYLVANIA INTRASTATE REVENUES; SAID ASSESSMENT TO HELP DEFRAY EXPENSES INCURRED IN REGULATING MOTOR COMMON CARRIERS OF PROPERTY; AND ACKNOWLEDGES THAT FAILURE TO REPORT REVENUE AND PAY ITS ANNUAL ASSESSMENT MAY RESULT IN CIVIL PENALTIES, SUSPENSION OR CANCELLATION OF THE CERTIFICATE.

VERIFICATION OF APPLICATION

I/WE HEREBY STATE THAT THE STATEMENTS MADE IN THIS APPLICATION IS/ARE TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF.

THE UNDERSIGNED UNDERSTANDS THAT FALSE STATEMENTS HEREIN ARE MADE SUBJECT TO THE PENALTIES OF 18 Pa. C.S. SECTION 4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

Lorrie Clark Lorrie Clark 5-11-99
(PRINT NAME) (SIGNATURE) (DATE)

Ricky L Clark Ricky L Clark 5-11-99

THE VERIFICATION OF THE APPLICATION MUST BE COMPLETED BY THE APPLICANT APPEARING ON LINE 1 OF THE APPLICATION BY THE NAMED INDIVIDUAL, ALL PARTNERS IF A PARTNERSHIP OR BY THE PRESIDENT OR SECRETARY IF A CORPORATION.

1

MINIMUM LIMITS OF INSURANCE
PENNSYLVANIA PUBLIC UTILITY COMMISSION AUTHORIZED
CARRIERS OF PROPERTY

General Commodities and/or Household goods in use.

Bodily Injury: \$300,000 per accident per vehicle to cover liability for bodily injury, death or property damage incurred in an accident.

Insurance coverage of motor carriers of property shall meet the requirements of 75 PA C.S. Ss. 1711 (relating to required benefits).

Cargo: \$5,000 for loss or damage to cargo being transported.

Cargo Insurance may be waived if you meet any one of three criteria:

1. All transportation will be provided in dump trucks.
2. All transportation will be limited to farm products, garbage, ashes, rubbish, coal debris, earth, crushed stone, amesite, and similar construction materials.
3. The value of any one load being transported will not be more than \$500.00 in value.

Microfilm Number _____

Filed with the Department of State on _____

Entity Number _____

Secretary of the Commonwealth

ARTICLES OF INCORPORATION-FOR PROFIT
OF

R. L. Clark & Sons Trucking, 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: R. L. Clark & Sons Trucking, 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>Rich L Clark, RD #1 Box 89, Olanta, Pa.</u>	<u>16863</u>	<u>Clearfield</u>
Number and Street	City	State
		Zip
		County

(b) c/o: _____
 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: 10,000 (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>Rich L Clark</u>	<u>Rd#1 Box 89, Olanta, Pa.</u>
	<u>16863</u>

6. The specified effective date, if any, is: 12-1-98
 month day year hour, if any

DEC 1 1998

7. 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: _____

IN TESTIMONY WHEREOF, the incorporator(s) has (have) signed these Articles of Incorporation this 30 day of November, 19 98.

Rich Lllak

(Signature)

(Signature)

GREAT DIVIDE INSURANCE COMPANY

POLICY NUMBER: CB004759

ENDORSEMENT

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL CHANGE ENDORSEMENT

This endorsement changes the policy on the inception date of the policy, unless another date is shown below.

Named Insured: CLARK TRUCKING INC &OR R L CLARK & SONS TRUCKING INC

ENDORSEMENT # 4

Endorsement Effective Date: 04/29/1999

Agency # 03710-00

The items checked below are changed as follows:

[X] 1. The named insured is changed to: R L CLARK & SONS TRUCKING INC

[] 2. The named insured's mailing address is changed to:

[] 3. The named insured's garaging address is changed to:

[] 4. The following symbols are [] added, [] deleted or [] changed to: and apply to the following coverages:

[] 5. The following coverage(s) is(are) added:

[] 6. The limits of liability are changed as follows, for the coverages indicated:

[] 7. The following endorsements are [] added, [] deleted or [] changed to:

[] 8. The following Loss Payee is [] added, [] deleted or [] changed as follows:

Cov. No.	Auto Year Model	Trade Name and Body Type	Serial Number or VIN	Loss Payee Name and Address
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[] 9. Other Changes:

Tax & Fee Schedule

\$

Premium: [X] None [] AP [] RP \$

Total Taxes & Fees \$

TOTAL PREMIUM DUE \$

All other terms and conditions of the policy remain unchanged.

5/03/99 Date

Norman Wagner 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 29, 1999

R L CLARK & SONS TRUCKING INC
RD # 1 BOX 89
OLANTA PA 16863

In re: Receipt of property application of R L Clark & Sons Trucking, Inc.

Dear Sir or Madam:

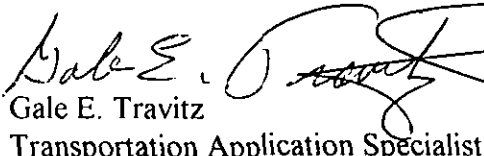
We have received the above-referenced application to transport property. I am returning the application and check for the following deficiencies:

- ① As per number 10 of the application, I will need a copy of the incorporation papers.
- ② A list of the officer/titles and distribution of shares.
- ③ The name on the insurance and exemption from PUC cargo should be the name of the incorporation. You will need to contact your insurance agent to get the name changed to the incorporation name. Then, get a new copy of the declaration page from the agent.
- ④ The exemption from cargo insurance will need to be redone, the first line should be the name of the corporation and the corporate officer should sign all other lines.

I am enclosing a new application for your convenience.

Call the number listed below if you have any questions.

Sincerely yours,


Gale E. Travitz
Transportation Application Specialist
Compliance Section
Bureau of Transportation and Safety
(717) 787-5513

GET/gt

I'm so sorry about all the mistakes on the first application I hope this one is right. HAVE a good Day

Lorrie Clark

EXEMPTION FROM P.U.C. CARGO INSURANCE REGULATIONS

This is to advise that x R.L. Clark & Sons Trucking Inc
(Name of Carrier)
holding P.U.C. authority at Application Docket No. A- 115931
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.

Lorrie Clark
(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 x 5-5-99

x Lorrie Clark
(Signature)

Lorrie CLARK
(Print Name)

Please return to:

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

ju to An

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

The addressee named here has paid the PA P.U.C. for the following bill:

R L CLARK & SONS TRUCKING INC
RD 1 BOX 89
OLANTA PA 16863

DATE 6/ 8/99
RECEIPT # 195729

IN RE: Application fees for R L CLARK & SONS TRUCKING INC

Docket Number A-00115931..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: CB&TC TC 117346

CHECK AMOUNT: \$100.00

DOCKETED
JUN 15 1990

C. Joseph Meisinger
(for Department of Revenue)

DOCUMENT
FOLDER

RECEIVED
SECRETARY'S BUREAU

59 JUN -9 PM 1:03

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SRB