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2001 FEB -5 AM 9:49

Before the Pennsylvania Public Utility Commission

**APPLICATION
MOTOR COMMON CARRIER OF PROPERTY**

7041815

DOCKETED
FEB 07 2001

Mark DePermentier
FULL NAME OF APPLICANT (Individual, Partnership or Corporation)

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

3. 667 Garfield Ave West Point Pa 19486 215 699-7245
PHYSICAL ADDRESS TELEPHONE NUMBER (REQUIRED)
(City, County, and Zip Code)

4. _____
MAILING ADDRESS IF DIFFERENT FROM PHYSICAL ADDRESS

5. _____
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.)

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)

DOCUMENT
FOLDER

~~FE~~

A-117517

8. APPROXIMATE NUMBER OF COMMERCIAL VEHICLES TO BE OPERATED IN PENNSYLVANIA: OWNED 1 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 _____ AND QUALIFIED TO DO BUSINESS IN PENNSYLVANIA BY REGISTERING WITH THE SECRETARY OF THE COMMONWEALTH ON _____. 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.

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.

Mark DePermentier Mark DePermentier 1-31-01
(PRINT NAME) (SIGNATURE) (DATE)

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.

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.

EXEMPTION FROM PUC CARGO INSURANCE REGULATIONS

This is to advise that Mark DePermentier
(Name of applicant/carrier)
holding PUC authority at Application Docket No. A- 117517
(If available)

is exempt from Cargo Insurance Regulations for the following reasons
(Check all that apply):



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 \$500.00 in value.

Mark DePermentier
Signature of Individual, Partner or Corporate Officer.

Verification of Statement

The undersign 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 setforth 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. 409 relating to unsworn falsification to authorities.

Date 12-7-00

Mark DePermentier
(Signature)

Mark DePermentier
(Print Name)

Please return to:

Pennsylvania Public Utility Commission
Bureau of Transportation and Safety
Insurance Unit
PO Box 3265
Harrisburg, PA 17105-3265

To me



ERIE
INSURANCE
GROUP

100 Erie Ins. Pl. CONTINUATION NOTICE
Erie, PA 16530

ERIE INSURANCE EXCHANGE
PIONEER COMMERCIAL AUTO POLICY
NON-FLEET

AGENT	ITEM 2. POLICY PERIOD	POLICY NUMBER
AA8741 LACHER & ASSOC INS AGY	11/29/00 TO 11/29/01	Q11 2930184 A7

ITEM 1. NAMED INSURED AND ADDRESS	ITEM 3. OTHER INTEREST
MARK DEPERMENTIER 667 GARFIELD AVE WEST POINT PA 19486	

ITEM 4. AUTOS COVERED

AUTO YR MAKE	VIN	ST	TER	SYM	RATING	CLASS
10 81 MACK DUMP TRK	1M2N178Y1BA071285	PA	5Q	X6	8	

ITEM 5. INSURANCE IS PROVIDED WHERE A PREMIUM, OR INCL, IS SHOWN FOR THE COVERAGE. COVERAGES, LIMITS AND ANNUAL PREMIUMS ARE AS FOLLOWS-

10

LIABILITY PROTECTION-	
BOD INJ & PROP DAMAGE \$1000M/ACC	1420
FIRST PARTY BENEFITS-	
COMBINATION PACKAGE \$177.5-INCLUDES:	
MEDICAL EXPENSE/FUNERAL(\$2.5M MAX)/	
INCOME LOSS/ACCIDENTAL DEATH(25M MAX)	64
UNINSURED MOTORISTS COVERAGE-	
BODILY INJURY \$1000M/ACC-STACKED	17
UNDERINSURED MOTORISTS COVERAGE-	
BODILY INJURY \$1000M/ACC-STACKED	64
PHYSICAL DAMAGE COVERAGES-	
COMPREHENSIVE - \$250 DED	130
COLLISION - \$500 DED	404

TOTAL ANNUAL PREMIUM FOR EACH AUTO	2099
TOTAL ANNUAL POLICY PREMIUM	\$ 2,099

ITEM 6. APPLICABLE POLICY, ENDORSEMENTS, EXCEPTIONS TO DECLARATIONS ITEMS

ALL AUTOS - CAP 04/96, AHPA01 03/00*.
AUTO 10 - AHPU01 04/99, ABPN01 10/98.

MISCELLANEOUS INFORMATION

AUTO 10 RADIUS OF OPERATION 50 MILES.

ITEM 7. EACH AUTO WE INSURE WILL BE PRINCIPALLY GARAGED AT THE ADDRESS SHOWN IN ITEM 1, UNLESS ANOTHER ADDRESS IS SHOWN BELOW.

ITEM 8. EACH AUTO WE INSURE IS USED IN THE BUSINESS AS SHOWN BELOW.

ITEM 8 DRIVEWAY CONSTRUCTION.

to
Jmc
WFS 09/30/00

ITEM 9. UNLESS OTHERWISE INDICATED BELOW, THE NAMED INSURED IS THE SOLE OWNER OF EACH AUTO WE INSURE.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

YOUR COLLISION COVERAGE AND DEDUCTIBLE APPLY TO PRIVATE PASSENGER AUTOS YOU, A PARTNER OR EXECUTIVE OFFICER RENT FOR 45 DAYS OR LESS. THIS IS SUBJECT TO LIMITS, TERMS AND CONDITIONS IN THE POLICY.

THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA, AS ENACTED BY THE GENERAL ASSEMBLY, ONLY REQUIRE THAT YOU PURCHASE LIABILITY AND FIRST-PARTY MEDICAL BENEFIT COVERAGES. ANY ADDITIONAL COVERAGES OR COVERAGES IN EXCESS OF THE LIMITS REQUIRED BY LAW ARE PROVIDED ONLY AT YOUR REQUEST AS ENHANCEMENTS TO THE BASIC COVERAGES.

	# 10
	ANNUAL PREMIUMS
BODILY INJURY \$15M/PERSON \$30M/ACC	430
PROPERTY DAMAGE \$5M/ACC	350
FIRST PARTY BENEFITS - MEDICAL EXPENSE \$5M	13

Q11 2930184



INSURANCE GROUP

100 Erie Ins. Pl.
Erie, PA 16530

RENEWAL CERTIFICATE

**ERIE INSURANCE EXCHANGE
VESTAR CONTRACTORS POLICY**

AGENT	ITEM 2. POLICY PERIOD	POLICY NUMBER
AA8741 LACHER & ASSOC INS AGY	11/29/00 TO 11/29/01	Q35 2920152 A

ITEM 1. NAMED INSURED AND ADDRESS	ITEM 3. OTHER INTEREST
MARK DE PERMENTIER 667 GARFIELD AVE WEST POINT PA 19486	

POLICY PERIOD BEGINS AND ENDS AT 12.01 A.M. STANDARD TIME AT THE STATED ADDRESS OF THE NAMED INSURED.

THE ERIE'S LIMIT OF LIABILITY IS STATED BELOW. THIS IS SUBJECT TO ALL APPLICABLE TERMS OF THE POLICY AND ATTACHED FORMS AND ENDORSEMENTS.

LIABILITY PROTECTION

- | | |
|-----------------------------|--|
| D-BODILY INJURY LIABILITY | G-ADVERTISING INJURY LIABILITY |
| E-PROPERTY DAMAGE LIABILITY | H-OWNERS' & CONTRACTORS PROTECTIVE LIABILITY |
| F-PERSONAL INJURY LIABILITY | I-ELEVATOR LIABILITY |
| | J-MEDICAL PAYMENTS |

LIMITS OF PROTECTION

FOR COVERAGES D-J	\$1,000,000	EACH OCCURRENCE
	\$2,000,000	POLICY AGGREGATE
FOR COVERAGE J - MEDICAL PAYMENTS	\$ 5,000	EACH PERSON

SCHEDULE OF INSURED'S OPERATIONS

INSURED'S OPERATIONS	STATE	NUMBER OF EMPLOYEES	DEPOSIT PREMIUM
DRIVEWAY OR SIDEWALK CONSTRUCTION	PA	1 FULL TIME PART TIME	\$ INCL \$

**OPTIONAL PROPERTY COVERAGES -
CONTRACTORS ENHANCEMENT**

	\$ INCL
TOTAL LIABILITY PREMIUM -	\$ 369.
TOTAL PROPERTY PREMIUM - -	\$ 100.
TOTAL DEPOSIT PREMIUM - -	\$ 469.
BALANCE - - - - -	\$ 469.

APPLICABLE FORMS - SEE SCHEDULE OF FORMS

DECLARATIONS - CONTINUED
SCHEDULE OF FORMS

FORM NUMBER	EDITION DATE	DESCRIPTION
FS	07/98	FIVESTAR CONTRACTORS POLICY
UF9968	07/00 *	IMPORTANT NOTICE TO POLICYHOLDERS
FS10	01/89	AMENDATORY DECLARATIONS SUPPLEMENT DUTY TO DISCLOSE
GU15	12/85	PENNSYLVANIA NOTICE
GU18	01/96	PENNSYLVANIA AMENDATORY ENDORSEMENT
GU32	03/95	LEAD LIABILITY EXCLUSION ENDORSEMENT
GU44	03/93	PENNSYLVANIA AMENDATORY ENDORSEMENT
UF8705*	06/96	IMPORTANT NOTICE - NO FLOOD COVERAGE
GU72	10/98	DATE OR TIME FAILURE AND PROFESSIONAL SERVICES EXCLUSION
FS46	04/99	COVERAGE FOR PUNITIVE DAMAGES
GU84	04/00 *	AMENDMENT OF POLLUTION EXCLUSION - EXCEPTION FOR BUILDING HEATING EQUIPMENT
FS38	06/00 *	FIVESTAR CONTRACTORS ENHANCEMENT ENDORSEMENT

Q35 2920152

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

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

MARK DEPERMENTIER
667 GARFIELD AVE
WEST POINT PA 19486

DATE 2/12/01
RECEIPT # 198082

IN RE: Application fees for MARK DEPERMENTIER

DOCUMENT
FOLDER

Docket Number A-00117517..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: USPMO 85916569667
CHECK AMOUNT: \$100.00

C. Joseph Meisinger
(for Department of Revenue)

DOCKETED

FEB 14 2001