JACKSON COOK CARACAPPA & SCOTT, P.C.



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September 8, 2016

Attorneys At Law

Walter W. Jackson 1919-1989

Secretary, PA Public Utility Commission 400 North Street, 2<sup>nd</sup> Floor Harrisburg, PA 17120

### RE: Moverama, LLC – Application for Motor Common Carrier or Motor Contract Carrier of Household Goods in Use

Dear Sir or Madam:

Enclosed please find Application for Motor Common Carrier or Motor Contract Carrier of Household Goods in Use in conjunction with the above-referenced limited liability company. Also enclosed is this firm's check in the amount of \$350.00 to cover the filing fee. Please note the list of Members and their addresses is indicated on the bottom of the last page of the Application. Please file this Application and advise when this has been completed.

Thank you for your assistance.

Very truly yours,

William E. Scott

/jn Enclosures cc: Michael Corcoran (via e-mail: <u>wuzzyfumper@gmail.com</u>)

> RECEIVED 2016 SEP 15 AM 10: 46 PA.P.U.C. SECRETARY'S BUREAU

A Professional Corporation 312 N. Oxford Valley Road • Fairless Hills, PA 19030 • T 215-946-4342 • F 215-946-3046 www.jccslaw.com Secretary Pennsylvania Public Utility Commission 400 North Street, Second Floor Harrisburg, PA 17120 (717) 772-7777 www.puc.pa.gov

## Application for Motor Common Carrier or Motor Contract Carrier of Household Goods in Use.

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE (FOR COMMON CARRIERS) OR PERMIT (FOR CONTRACT CARRIERS) TO OPERATE AS A COMMERCIAL CARRIER OF HOUSEHOLD GOODS IN USE.

1. Legal Name of Applicant (Individual, Partnership or Corporation)

Moverama, LLC

- If you are an individual who has not formed any type of corporate entity, you should enter your name *as it will appear on your insurance documents*.
- If you are filing for a partnership, but not a limited liability partnership, the names of all partners must be entered on this line. Those names should be entered as they will appear on your insurance documents. This includes husbands and wives filing jointly.
- If you are filing for a corporate entity (corporation, limited liability company, or limited liability partnership), even if you are the sole shareholder member, you must enter the name exactly as it appears on the registration papers from the Corporation Bureau of the Pennsylvania Department of State.
- 2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

This is any name which you will be operating under which differs from the LEGAL NAME OF APPLICANT. A TRADE NAME is considered a FICTITIOUS NAME if the identity of the applicant cannot be readily determined. *EXAMPLE: John Doe is the applicant and wants to use the name "Johnboy Trucking" as his trade name. People cannot readily determine that John Doe is the actual operator; therefore, the name is fictitious and must be registered as such. Trade names such as "John Doe Trucking" or "J. Doe Trucking" are not considered fictitious and would not have to be registered.* 

## 3. Do you currently hold PUC Authority? X NO Previous Authority? X NO

If YES, at PUC No. A-\_\_\_\_

4. Are you a business entity registered with the PA Department of State? \_\_\_\_NO If NO, you must register (see checklist on how to register)

If YES, provide your PA Corporation Bureau Entity ID Number 6428396 (see checklist and indicate type of business entity registered) RECEIVED

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## 5. **Physical Address** (do not use PO Box)

1099 Grahams Wood Road

Street Address

. .

Newville, PA 17241

City, State and Zip Code

215-559-4564

Cumberland

**Telephone Number** 

County

The address entered here should reflect the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment.

#### 6. **Mailing Address** (if different from Physical Address)

Street Address

City, State and Zip Code

This is the address to which the Commission will send all official documents issued by the Commission. If left blank, it will be assumed that the **MAILING ADDRESS** is the same as the **PHYSICAL ADDRESS**.

#### 7. **Attorney** (if applicable)

William E. Scott, Esquire 215-946-4342

Attorney's Name & Telephone Number for this Filing

312 Oxford Valley Road, Fairless Hills, PA 19030

Attorney's Address

An attorney's name should only be entered if an attorney is filing the application for a client and the application is being sent under the attorney's cover letter.

#### 8. **Does applicant hold interstate operating authority?**

No

PendingYes, at No. <u>USDOT #2922241; M</u>C #985701

#### 9. Describe the service area proposed by this application.

(Use the space below or attach additional sheet if space provided is not sufficient).

To transport, as common carrier, by motor vehicle, household goods in use between points in Pennsylvania.

Examples:

- To transport as a common carrier, household goods in use between points in Mercer County.
- To transport as a contract carrier for the XYZ Company, household goods in use, from points in Elk County to points in PA.

### 10. Certification:

Applicant certifies that it is not now engaged in unauthorized intrastate transportation 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 and Motor Contract Carriers of Household Goods in Use; 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 statement(s) 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.

Michael E. Corcoran Josep (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, a member (if a limited liability company), or by the President or Secretary (if a corporation).

#### JACKSON, COOK, CARACAPPA & SCOTT

ATTORNEYS AT LAW 312 OXFORD VALLEY ROAD FAIRLESS HILLS, BUCKS COUNTY PENNSYLVANIA 19030



Secretary, PA Public Utility Commission 400 North Street, 2<sup>nd</sup> Floor Harrisburg, PA 17120

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