

Before the Pennsylvania Public Utility Commission

AM 8:41

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BUREAU

RECEIVED
BUREAU OF SAFETY
2001 AUG -6 AM 10:16

**APPLICATION
MOTOR COMMON CARRIER OF PROPERTY**

1. Kevin C. Ayers
FULL NAME OF APPLICANT (Individual, Partnership or Corporation)

2. Ayers Trucking
TRADE NAME IF ANY
The trade name, if fictitious, has been registered with the
(has or has not)
Secretary of the Commonwealth on July 10, 2001. Attach a date
stamped copy of the registration form.

3. RR#1 Box 393 Canton, Bradford, 17724 570-673-8125
PHYSICAL ADDRESS TELEPHONE NUMBER (REQUIRED)
(City, County, and Zip Code)

4. _____
MAILING ADDRESS IF DIFFERENT FROM PHYSICAL ADDRESS

**DOCUMENT
FOLDER**

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

DOCKETED
AUG 09 2001

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

[Handwritten signature]

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

25
B.P.D - OK
CARGO - OK
Prof RG

A-00118132

8

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.

Kevin C. Ayers
(PRINT NAME)

Kevin C. Ayers
(SIGNATURE)

7/3/01
(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.

PENNSYLVANIA DEPARTMENT OF TRANSPORTATION
BUREAU OF DRIVER LICENSING
THREE YEAR DRIVING RECORD
JUL 27 2001

DRIVER: KEVIN CARL AYERS
R.D. 1 BOX 393
CANTON, PA 17724

DRIVER LICENSE NO : 19934876
DATE OF BIRTH : NOV 17 1961
SEX : MALE
RECORD TYPE : REG LICENSE

DRIVER LICENSE (DL)

LICENSE CLASS :
LICENSE ISSUE DATE: OCT 17 2000
LICENSE EXPIRES :
ORIG ISSUE DATE : APR 30 1987
MED RESTRICTIONS : NONE
LEARNER PERMITS :
LICENSE STATUS :

COMMERCIAL DRIVER LICENSE (CDL)

CDL LICENSE CLASS : A*
CDL LICENSE ISSUED : OCT 17 2000
CDL LICENSE EXPIRES: NOV 18 2004
CDL ENDORSEMENTS : NONE
CDL RESTRICTIONS : NONE
CDL LEARNER PERMITS:
CDL LICENSE STATUS : VALID

SB ENDORSEMENT :

PROBATIONARY LICENSE (PL)

PL LICENSE CLASS :
PL LICENSE ORIG ISS:
PL LICENSE ISSUED :
PL LICENSE EXPIRES :
PL LICENSE STATUS :

OCCUPATIONAL LIMITED LICENSE (OLL)

OLL LICENSE CLASS :
OLL LICENSE ISSUED :
OLL LICENSE EXPIRES:
OLL LICENSE STATUS :

REPORT OF VIOLATIONS AND DEPARTMENTAL ACTIONS

VIOLATION DATE: SEP 02 2000
VIOLATION: VEHICLE CODE: 3362
DESCRIPTION: EXCEEDING MAXIMUM SPEED
065 MPH IN A 055 MPH ZONE
CONVICTION DATE: OCT 24 2000
ACTION: ASSIGNED POINTS

REPORT OF MEDICALS AND DEPARTMENTAL ACTIONS

NO MEDICALS OR DEPARTMENTAL ACTIONS DURING THIS REPORTING PERIOD

REPORT OF ACCIDENTS AND DEPARTMENTAL ACTIONS

NO ACCIDENTS DURING THIS REPORTING PERIOD

*** END OF RECORD ***

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed
this 9 day of July, 2001.

Kevin C. Anderson
(Individual Signature)

(Individual Signature)

(Name of Entity)

BY: _____

TITLE: _____

(Individual Signature)

(Individual Signature)

(Name of Entity)

BY: _____

TITLE: _____

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

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

AYERS, KEVIN C
AYERS TRUCKING
RR#1 BOX 393
CANTON PA 17724

POCKETED

AUG 15 2001

DATE 8/14/01
RECEIPT # 198693

IN RE: Application fees for AYERS, KEVIN C

Docket Number A-00118132..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: US PMO 86958294625 010802 177240

CHECK AMOUNT: \$100.00

DOCUMENT
FOLDER

C. Joseph Meisinger
(for Department of Revenue)

REP