

A-001172-00
F.2

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2001 NOV 13 PM 1:46

PUC 119 (Revised 12/88)

Before the Pennsylvania Public Utility Commission

**APPLICATION
MOTOR COMMON CARRIER OF PROPERTY**

1. Jeffrey M. Bankosh dba Bankosh Trucking
FULL NAME OF APPLICANT (Individual, Partnership or Corporation)

2. _____
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.

3. RR1 Box 95A1 Slickville, PA 15684 (724) 468-5659
PHYSICAL ADDRESS TELEPHONE NUMBER (REQUIRED)
(City, County, and Zip Code) *Westmoreland County

4. same
MAILING ADDRESS IF DIFFERENT FROM PHYSICAL ADDRESS

5. NONE
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 _____ HOLD INTERSTATE OPERATING
(does or does not) AUTHORITY AT DOCKET NUMBER _____

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

DOCUMENT
FOLDER

DOCKETED

DEC 19 2001

A-11 8200, F.2

NO. 3907
NOV. 9. 2001 12:00PM
PUC 717 787 3114

NO. 3907 P. 16

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

(already in your office)

PUC 717 787 3114

NOV. 9. 2001 12:00PM

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.

Jeffrey M. Bankosh *Jeffrey M. Bankosh* 11/09/01
(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

NOV. 9. 2001 12:00PM PUC 77 787 3114

To Whom It May Concern:

Enclosed please find my second filing for our PUC #00118200. The first filing did not include the Exemption for Cargo. Please find that attached. You stated in our phone conversation on Friday, November 9, 2001 that the insurance information sent to you by our insurance company would be sufficient for this filing.

Please, if you need any other information, call me. You can call me collect if need be. I would like to get this finalized and I thank you for your help and support that you have given me already.

Sincerely,



Tracey Bankosh

(724) 468-5659

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2001 NOV 13 PM 1:46

NO. 3907 P. 18

PUC 717 787 3114

NOV. 9. 2001 12:01PM

EXEMPTION FROM PUC CARGO INSURANCE REGULATIONS

This is to advise that Jeffrey M. Bankosh dba Bankosh Trucking
(Name of applicant/Carrier)
holding PUC authority at Application Docket No. A- 00182001E.2
(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, aggregate, and similar construction materials.
- The value of any one load being transported will not be more than \$500.00 in value.

Jeffrey M. Bankosh
(Signature)
(Individual applicant, authorized partner or corporate president or secretary)

Verification of Statement

The undersigned deposes and says that he/she is the person who signed the statement for the above captioned application/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. 499 relating to unsworn falsification to authorities.

Date 11/09/01
Jeffrey M. Bankosh
(Signature)
Jeffrey M. Bankosh
(Print Name)

Please return to:
Pennsylvania Public Utility Commission
Bureau of Transportation and Safety
Insurance/Filing Unit
PO Box 3265
Harrisburg, PA 17105-3265

Handwritten signature

* This form is used to waive the Commission's requirement for PA PUC certificated carriers to maintain a minimum of \$5,000 insurance for loss or damage to cargo being transported. You must meet at least one of the three criteria above. If none of the three criteria for exemption apply to you, you must submit evidence of cargo insurance.

Form E DOCKET # A-00118200
**UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE**
(Executed in Triplicate)

Filed with PA Public Utilities Commission (hereinafter called Commission)
(Name of Commission)

RECEIVED
BUREAU OF
TRANSPORTATION
2001 OCT -9 AM 10:33

This is to certify, that the Rockwood Casualty Insurance Company
(Name of Company)
654 Main Street, Rockwood, PA 15557
(hereinafter called Company) of 654 Main Street, Rockwood, PA 15557
(Home Office Address of Company)
has issued to Jeffrey M. Bankosh of RR #1, Box 95A1, Slickville, PA 15684
(Name of Motor Carrier) (Address of Motor Carrier)
t/a Bankosh Trucking

a policy or policies of insurance effective from 07-17-2001 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 654 Main Street, Rockwood, PA 15557
(Street Address) (City) (State) (Zip Code)
this 26th day of Sept. XX 2001

Insurance Company File No. TP 8230
(Policy Number)

Andrea L Arnold
Authorized Company Representative

*Bill
has on*

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

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

BANKOSH, JEFFREY M.
BANKOSH TRUCKING
RR1 BOX 95A1
SLICKVILLE PA 15684

DATE 12/20/01
RECEIPT # 199228

IN RE: Application fees for BANKOSH, JEFFREY M.

DOCKETED
DEC 21 2001

Docket Number A-00118200F0002..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: US PMO 86533882615 011110 156840
CHECK AMOUNT: \$100.00

C. Joseph Meisinger
(for Department of Revenue)

REP

DOCUMENT
FOLDER