

BUSINESS PLAN OF APPLICANT FOR MOTOR CARRIER AUTHORITY

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

A-2016-2574101

PUC Application Docket No.

Alexander Paul Golden

Legal Name of Applicant

Trade Name, if any

1200 Center St. Wilkesburg, PA 15221-1922

Street Address (principal place of business)

City or Municipality

State

Zip Code

This document is a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

You are encouraged to provide as much information as possible to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person providing the information by giving your name and indicate whether you are the owner, employee, officer, or attorney for the applicant.

Alexander Paul Golden, owner; applicant;

2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.

I have leased from Yellow Cab of Pittsburgh for 15 years.

3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. An explanation of education or training that you believe may be relevant may also be included.

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4. Describe the physical location, to include the office area, office machines that will be used, and where vehicles will be stored. Household goods in use carriers should include a description of their storage facilities, if applicable.

5. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and continuous communication with drivers.

6. Please explain:
 - a. Your hiring standards for drivers;

 - b. Your system to ensure prospective drivers will be subject to a criminal background check;

 - c. Your driver training program;

 - d. Your system for ensuring that your drivers are properly licensed at all times;

 - e. Your system to ensure that all drivers will be subject to a criminal background check every two years;

 - f. Your policies regarding alcohol and drug use by your drivers.

7. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below. Taxicabs and limousines may not be used if the vehicle's age is greater than eight model years.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY</u>	<u>VEHICLE ID #</u>

8. Describe your vehicle safety program. Please include the following in your explanation:

- a. Your periodic vehicle maintenance plan;
- b. Your system for ensuring your vehicles will continuously comply with Pennsylvania's inspection standards and the Commission's equipment standards;
- c. If applying for Household Goods Authority, explain how it will be ensured that vehicles meet all USDOT equipment standards.

9. As proof that an effort has been made to determine that insurance is affordable, list the name and phone number of insurance agents you have contacted and the prices of premiums they have quoted.

10. Criminal Record. Has the applicant* been convicted of a misdemeanor or felony for which applicant remains subject to supervision by a court or correctional institution?
YES ___ NO ___

**If applicant is a partnership, limited partnership, limited liability partnership, limited liability company, or corporation, this question applies to all partners, members, shareholders and corporate officers. In the event that the answer is yes for one of those individuals, a separate page identifying the individual and stating relevant information should be attached.*

11. Financial Data. In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation service. You may use the "Statement of Financial Position" which follows this page or supply a balance sheet prepared by an accountant. You need only provide the applicable information. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

PLEASE NOTE: COMMISSION REGULATIONS REQUIRE THAT PARTNERSHIPS, LIMITED PARTNERSHIPS, LIMITED LIABILITY PARTNERSHIPS, LIMITED LIABILITY COMPANIES, AND CORPORATIONS MUST FILE A CURRENT INCOME STATEMENT.

Statement of Financial Position (Balance Sheet)

As of (date) _____

ASSETS

Current Assets

Cash _____

Other Current Assets (specify) _____

Other Assets

Motor Vehicle Equipment _____

Building and Structures _____

Office Equipment _____

Investments and Funds (specify) _____

TOTAL ASSETS _____

LIABILITIES

Current Liabilities (Due within one year of date)

Long Term Liabilities (Due after one year of date)

TOTAL LIABILITIES _____

NET WORTH / OWNER'S EQUITY (Subtract total liabilities from total assets) _____

Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that 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 penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.



(Signature)

2-8-2017

(Date)

Alexander Paul Golden

(Name and Title, printed or typed)

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February 8, 2017

Business Plan of Alexander Paul Golden for Motor Carrier Authority

PUC Application Docket No: A-2016-2574101

Legal Name of Applicant: Alexander Paul Golden

Trade Name: No fictitious name at this time

Street Address: 1200 Center St. Wilkinsburg, PA 15221-1922

1. Alexander Paul Golden, owner of proposed business and applicant for limousine authority
2. I have leased taxis from Yellow Cab of Pittsburgh for the past 15 years. During this time, I have established a large customer base and inherited several more through a death and a retirement of two colleagues.
3. I have driven for fifteen years and have serviced my customer base for the past ten. Three years ago my customer base grew substantially after absorbing customers from two long time driver/ dispatchers. To fulfill all customer requests and appointments, I have used many drivers over the years. I believe that I have developed considerable skill in managing logistics, particularly in times of great customer demand and driver scarcity.

Prior to working in the transportation industry I worked extensively in restaurant and retail management. I have several years of experience hiring and evaluating personnel and achieving profitability targets within set budgets. I also have experience in marketing and merchandizing. While I will start this limousine business as a sole proprietor with no employees, I believe this experience will help if I choose to expand at some point.
4. Generally, the vehicle will be stored at my home (1200 Center St. Wilkinsburg, PA 15221) although occasionally at my mother's house (120 Newburn Ave. Pittsburgh PA, 15227.) Both locations have off-street parking. My office is in my home and includes a 2015 MacBook, a printer, a FAX machine and a filing cabinet for all receipts and all business specific papers.
5. Customer requests are received by phone, text or e-mail and are nearly all (at least 95%) appointment for future service. All on-demand requests will be forwarded to colleagues in the taxi industry. Since I manage pre-arranged appointments almost exclusively, I have not needed to have continuous communication with drivers. Most appointments are made at least 24 hours ahead. In most cases, I out source drivers when I am double or triple booked or when the appointment is either very early (before 5:00 AM) or very late (after 10:00 PM). I text drivers all relevant information including customer name, address, phone number and any special instructions, usually 1-12 hours ahead of the due time of the request for service.
6. For now, I will be the only "employee." For future expansion, I would likely lease vehicles, rather than hiring employees. Either way, my standards and systems would be very similar.
 - a. I prefer drivers with at least 1 year of experience, clean driving records, high school diplomas with an orientation towards service and professional etiquette. Drivers also must pass drug screening.

February 8, 2017

- b. I will research Criminal Background Check services and subscribe to the best available. Any hires will furnish photo ID and social security numbers.
 - c. Training will cover the following: Federal, State and local driving laws, safe driving emphasizing defensive driving practices, all PUC requirements such as manifests or trip sheets. I will also train drivers on customer service and proper use of any equipment such as GPS navigation systems.
 - d. Upon hiring, drivers must present a current PA drivers license. The expiration date will be recorded. Drivers must resubmit copies of their Pa drivers licenses prior to the expiration date. If drivers fail to resubmit current PA licenses, they will be suspended from operating until they do so.
 - e. Drivers will be subject to criminal background checks every two years from a reliable Criminal Background Check service. I will keep records of this and schedule background checks at least 2 weeks prior to all 2-year anniversaries of employment or leasing.
 - f. I will not tolerate any drug or alcohol use, subject to immediate termination of employment. I will implement random drug testing for all hires.
7. I plan to use one vehicle initially, with an eye towards adding one or more additional vehicles over time. Since I am providing "by appointment only" service, I will need only to cover the needs of my customer base, and not those of a particular geographical territory. I will obtain the first vehicle upon approval of this application. I intend to purchase either a late model AWD Lincoln MKT or Acura MDX, perhaps adding a larger vehicle such as a late model Chevy Suburban and possibly a luxury sedan.
- 8.
- a. I will follow a meticulous maintenance plan that is based on the manufacturer's recommended maintenance schedule and all PUC requirements and recommendations. Tire pressure and oil will be checked daily and vehicles will be checked by professional mechanics no more than 24 hours after any warning lights come on. Vehicles with warning lights on will not service customers until checked and repaired by professional mechanics who work at authorized state inspection facilities. Maintenance will be funded by putting \$50 per week in repair escrow.
 - b. I will personally inspect all vehicles as needed to ensure compliance with Pennsylvania inspection standards and PUC equipment standards on a weekly basis. All vehicles that fail to comply with the standards will be removed from service until they are brought back into compliance. I will keep detailed records that can be easily audited upon request.
 - c. I am not applying for household goods authority at this time.
9. From Jason Bidish at Barr's Insurance Agency 814-677-3012:
National Indemnity \$8835 per year for Lincoln MKT
Progressive: \$4981 per year for 2014 Acura MDX AWD
- From Kali Hoovler at GEICO (866) 509-9444:
GEICO quote number 4126572125 \$4,372 per year for 2014 Lincoln MKT AWD
- From Matt at Progressive 888-814-6494 ext 7833:
Progressive: \$5600 per year for 2014 Acura MDX AWD

February 8, 2017

10. I have never been convicted of a misdemeanor or felony.

11. Statement of Financial Position (Balance Sheet) as of February 8 2017:

Current Assets:

Cash	\$6250
Checking	\$1,874
Savings	\$16,604

Other :

Motor Vehicle Equipment:	\$8,000
Office Equipment:	\$2,000
Construction Tools:	\$4,000
Gold Jewelry	\$7,000
Misc household items	\$3,000

Total Assets: \$48,728

Current Liabilities: \$900

Long Term Liabilities: \$5493

Total Liabilities: \$6393

Net Worth \$43,335

I believe that I have sufficient resources to operate a one vehicle start-up limousine service. My major purchase will be a car for which I intend to finance approximately \$20,000 over 5 years. I also expect to invest about \$1,000 in professional attire. This will be treated as schedule C business expense. My fixed expenses including insurance, car payment, repair escrow, airport sticker fees and PUC fees should be approximately \$300 per week. My volume has easily cleared this threshold every week for years.

I want to thank the PUC for this opportunity. Please call with any questions. My customer and I are excited to start this service and appreciate your consideration. I look forward to hearing from you.



Alexander Paul Golden

2-8-2017

Alex Golden
1200 Center St.
Wilkesburg, PA 15221
(A-2016-2574101)

Lisa Milletics
COMMONWEALTH OF PENNSYLVANIA
PUBLIC UTILITY COMMISSION
P.O. BOX 3265
HARRISBURG, PA 17105-3265

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1200 Center St.
Wilkinsburg, PA 15221

PAYMENT BY ACCOUNT (if applicable)

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SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options

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Date Accepted (MM/DD/YY) **2-8** Scheduled Delivery Time 10:30 AM 3:00 PM 12 NOON Insurance Fee \$ COD Fee \$

Time Accepted **11:55** 10:30 AM Delivery Fee AM PM \$ Return Receipt Fee \$ Live Animal Transportation Fee \$

Special Handling/Fragile Sunday/Holiday Premium Fee \$ Total Postage & Fees \$

Weight Flat Rate **3** lbs **0** oz Acceptance Employee Initials **Jin** \$ **23.75**

DELIVERY (POSTAL SERVICE USE ONLY)

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Delivery Attempt (MM/DD/YY) Time AM PM Employee Signature

COMMISSION

9 2017

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