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March 21, 2017

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street, 2nd Floor
Harrisburg, PA 17120

VIA HAND DELIVERY


**RE: In Re: Application of Mountain Movers, LLC
Docket No. A-2017-_____**

Dear Secretary Chiavetta:

Enclosed for filing with the Pennsylvania Public Utility Commission ("PUC" or "Commission") is the Application for Motor Common Carrier of Household Goods in Use on behalf of Mountain Movers, LLC ("Mountain Movers" or "Applicant") in the above-referenced proceeding, together with a personal money order in the amount of \$350 representing payment in full of the filing fee. The Applicant is seeking to provide statewide service as a motor common carrier of household goods in use within the Commonwealth of Pennsylvania. Thank you.

Sincerely,

McNEES WALLACE & NURICK LLC

By 
Kenneth R. Stark

Enclosure

c: Rodney Bender and Robert Bingaman, Technical Utility Services, PUC (via email)
Barbara A. Darkes, McNees Wallace & Nurick LLC (via email)
Montgomery R. Carlin, Mountain Movers, LLC (via email)

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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)

MOUNTAIN MOVERS, 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)

N/A

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?** **NO** **Previous Authority?** **NO**

If YES, at PUC No. A- N/A

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

If YES, provide your PA Corporation Bureau Entity ID Number 6507972
(see checklist and indicate type of business entity registered)

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

1141A PENN AVENUE
Street Address

WYOMISSING, PENNSYLVANIA, 19610
City, State and Zip Code

610 540 7777
Telephone Number

BERKS
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)

N/A
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)

KENNETH STARK, McNEESLAW, 717 237 5378
Attorney's Name & Telephone Number for this Filing

100 PINE STREET, P.O. BOX 1166, HARRISBURG, PA, 17108
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?**

X No _____ Yes, at No. _____

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

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

STATE OF PENNSYLVANIA. INITIALLY WE WILL BE OPERATING IN THE COUNTIES OF LANCASTER, BERKS AND LEHIGH. WE WILL BE RESIDENTIAL AND SPECIALTY MOVERS.

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.

MONTGOMERY R CARLIN

(Print Name)



(Signature)

3/16/2017

(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).

DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS
401 NORTH STREET, ROOM 206
P.O. BOX 8722
HARRISBURG, PA 17105-8722
WWW.CORPORATIONS.PA.GOV

Rodriguez, Danielle
Leisawitz Heller 2755 Century Boulevard
Wyomissing PA 19610

Mountain Movers, LLC

THE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS IS HAPPY TO SEND YOUR FILED DOCUMENT. THE BUREAU IS HERE TO SERVE YOU AND WE WOULD LIKE TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE BUREAU, PLEASE VISIT OUR WEBSITE AT www.dos.pa.gov/BusinessCharities OR YOU MAY CONTACT US BY TELEPHONE AT (717)787-1057. INFORMATION REGARDING BUSINESS AND UCC FILINGS CAN BE FOUND ON OUR SEARCHABLE DATABASE AT www.corporations.pa.gov/Search/CorpSearch.

ENTITY NUMBER : 6507972

IN RE: MOUNTAIN MOVERS LLC

LIST OF MEMBERS, ADDRESSES, TITLE

MONTGOMERY R CARLIN.
1150 FAIRVIEW AVENUE
WYOMISSING, PA, 19610

MEMBER
PRESIDENT AND TREASURER

MICHAEL CIPOLLA
190 HARTMAN LANE
MOHNTON, PA, 19540

MEMBER
VICE-PRESIDENT + SECRETARY