

VERIFIED STATEMENT OF APPLICANT

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-2016-2582108

PUC Application Docket No.

JEFFREY COLLINS

Legal Name of Applicant

MOVING AHEAD SERVICES, LLC

Trade Name, if any

35160 TOPPS INDUSTRIAL PKWY SUITE 6 WILLOUGHBY OH 44094

Street Address (principal place of business)

City or Municipality

State

Zip Code

The Verified Statement of the Applicant is more or less 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.

At minimum, the Verified Statement of the Applicant should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary 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.

ANSWERS PROVIDED ON ADDITIONAL PAGES.

1. Identify the person making the Verified Statement on behalf of the applicant. If the applicant is a sole proprietor making the statement, this will be the same information as provided above. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number, and indicate that the applicant's directors/owners/partners/etc. have authorized the witness to speak for the business.
2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.
3. Describe your business experience, particularly any experience relating to the operation of a transportation service. You may also include an explanation of education or training that you believe may be relevant.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to include the office area, office machines that will be utilized, and the facility to house vehicles. Household goods in use carriers should include a description of their storage facilities, if applicable. Please include an explanation of your plan to maintain records required by the PUC, as well as normal business records. 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 how you will maintain continuous communication with your drivers. Finally, please state your intended business hours.

5. Please state the number of employees you intend to use, along with a description of their duties. Please explain why that number of employees is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. **(Do not address drivers in your explanation about this item; drivers are addressed separately in item # 6).**

6. Please state the number of drivers you intend to use or hire in your business and explain why that number of drivers is appropriate for the size of the geographical territory you will be serving. In addition, 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.

YEAR MAKE MODEL SEATING
CAPACITY VEHICLE ID #

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 equipment standards (67 Pa. Code, Chapter 175) that are applicable to the type of vehicles used in your business;
 - c. Your system for ensuring your vehicles will maintain compliance with the PUC's requirements for passenger service at 52 Pa. Code, Section 29.403 (applicable to passenger applicants only);
 - d. If applying for taxi authority, your system for replacing vehicles once they are greater than ten model years in age or with mileage greater than 350,000 in compliance with 52 Pa. Code, Section 29.314(c);
 - e. If applying for limousine authority, your system for replacing vehicles once have mileage greater than 350,000 in compliance with 52 Pa. Code, Section 29.333(d);
 - a. If applying for household goods in use authority, your system for ensuring your vehicles will comply with the requirements of 49 CFR Parts 393 and 396, as adopted by the PUC at 52 Pa. Code, Chapter 37.
9. Please explain what steps you have taken to determine if you can obtain and pay the premiums to maintain insurance coverage for the proposed number of vehicles for your business.
10. Please describe your customer service standards. Within your description, please explain:
- a. Your plan to inform customers of the procedures for filing complaints with the PUC;
 - b. Your intended customer complaint resolution procedure.

1. Jeffrey Collins – President/Owner

2. N/A

3. Owner/Operator of highly successful Ohio-based household goods transportation service for 13 years. Served in the Marines from 08/1996 to 08/2004. Recently accepted into Goldman Sachs 10,000 Small Businesses Program and currently attending classes. The program helps entrepreneurs create jobs and economic opportunity by providing them with greater access to education, financial capital and business support services.

4. Current facility is located at 201 Penn Center Blvd Suite 400 Pittsburgh, PA 15235. The location is key for us, because as a new business in Pennsylvania, being on the edge of Monroeville has us situated near dense housing, businesses, and a hospital (UPMC East). This facility is the site of our primary office and includes desks, a main lobby, and a cafeteria. This office area will utilize computers, internet, CRM, phones, and fax machine. As with all of our locations, the facility utilized to house our vehicles will be the parking lot. My goal is to utilize this facility until we find a flex space that includes offices and warehouse space for storage. Our goal is 5000sf warehouse and 1000sf office within the city of Pittsburgh. We are working with a Pennsylvania commercial real estate agent to help us find this flex space.

Process for maintaining PUC and normal business records is Google Drive. This allows us to access the benefits of cloud storage.

Communication network includes a call and email center in our Willoughby, Ohio headquarters. This is where we receive customer requests for transportation/services. Our communication network will set up surveys/estimates and will schedule jobs for our Pittsburgh office. The General Manager working at our 201 Penn Center Blvd office will dispatch the vehicles and crew members using our online scheduling calendars. Our General Manager maintains continuous communication with our drivers via mobile phones and truck mounted GPS. We deliver all prices to our customer in writing. Prices will fall within the limits of our Pennsylvania household goods tariff. We will provide hourly estimates for moves under 40 miles. For services exceeding 40 miles we will provide estimates based on weight and mileage.

Intended business hours: 8am – 4pm Monday through Friday and 8am – 12pm Saturday

5. Employees:

- General Manager – Responsible for scheduling, day-to-day operations, recruiting, outside sales, and business development.
- Office/Warehouse Manager – Responsible for inventories and vehicle maintenance
- (6) Relocation Specialists (Moving Laborers) – Day-to-day moving services

The number is appropriate for Moving Ahead Services. This process has worked for us when opening new locations. Employing 2 office staff and six laborers allows us to provide reasonable and efficient

service while we grow in the new market and make a name for ourselves within the community. Our goal is to provide quality service and get involved in the community in which we provide services. We are an active member of the local Chamber of Commerce and networking groups in all our locations.

6. Our goal is to hire 3-4 drivers locally prior to opening day. This will be adequate to the amount of business we will receive in the first twelve months of operations in Pennsylvania.

6a. We hold our drivers to very high standards. All drivers will be background checked, mandatory drug and alcohol screening. Motor Vehicle Reports (MVR) will also be reviewed.

Driver Standards;

- Passing drug and alcohol screening
- No more than 4 points in previous 3yrs on MVR
- No alcohol or drug related motor vehicle incidents in previous 3yrs

6b. Drivers are not permitted to operate any motor vehicle for Moving Ahead Services prior to a background check, which meets company standards. Company standards are;

- No felonies
- No misdemeanors involving Drugs, Theft or Assaults in previous 5yrs

6c. Moving Ahead Services utilizes the FMCSA approved; Safety Program for Motor Vehicle Operators. Copy of training manual is included with this application

6d. Due to insurance requirements all active drivers MVR's are reviewed quarterly

6e. Moving Ahead Services reviews all employees background checks annually on the anniversary of employees hire dates

6f. As outlined in our Employee Handbook and Safety Program for Motor Vehicle Operator's Drug & Alcohol use in any form will not be tolerated. All drivers are also subject to random testing

We intend to hire 2-4 drivers in the first 12 months. This allows us to have at least 2 crews working when we open our doors and a probability of 4 crews working by the end of our first year. We have found that we can effectively serve a territory the size of Greater Pittsburgh with 4 drivers.

7. We will use (3) 26' straight trucks GVW of 25,900lbs in Pittsburgh. Again, this will be adequate to the amount of business we will receive in the first twelve months of operations in Pennsylvania.

Company Owned Equipment:

- We have not yet obtained trucks for Pennsylvania operations. We will likely use long term commercial lease trucks from Penske Truck Rental. We will place proper identification on leased or company trucks.

8. All company equipment will be inspected daily to ensure equipment is operating within the standards of PA PUC regulations. Trucks are also inspected quarterly and annually. An example of daily, quarterly and annual inspections is attached.

9. Current proof of insurance is attached separately

10a. We will link and mention all rights as required by PA state law. This will be provided in our company website (<https://movingaheadservices.com/pa-damage-claim-form-consumer-complaints>). We will have the formal "Motor Carrier Complaint Form" available for download.

10b. We take customer complaints very seriously. We have extensive customer service training for all of our employees. We try to resolve any issue over the phone, but there are times when we will visit the customer at their request to resolve damage claims or issues with the service they received. We also have a claims department at our headquarters that will stay in contact with the customer until the matter has been resolved.

11. No

12. Statement of Financial Position and Projected Income Statement is attached separately.

11. Criminal Record. Have you been convicted of a misdemeanor or felony for which you remain subject to supervision by a court or correctional institution?

YES

NO

12. 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. Therefore you must complete both parts of the "Statement of Financial Position", which follows this page. The first part is the Balance Sheet. You need only provide the applicable information. The second part of the Statement of Financial Position is the Projected Income Statement. The projection is your estimation of expected revenues and specific expenses for one year. You should use the projected information, along with the financial data reported on your balance sheet to help you determine if proposed business can be feasible. 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.

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)

(Name and Title, printed or typed)

Jeffrey Collins PRESIDENT

(Date)

04/06/2017

Moving Ahead Services, LLC

BALANCE SHEET

As of March 28, 2017

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
Bonuses & Co. Events - 8181	1.21
Buildings & Utilities - 8207	1,349.87
Business Savings - 8413	2.35
Development - 8215	2.62
Furniture Account - 8397	302.67
MAS Primary - 8439	43,088.49
Owner's Draw - 8405	-40.00
Owners Draw Account 8421	0.00
Petty Cash - Cleveland Office	471.79
Refunds & Truck Maint - 8173	6.18
Taxes - 8199	1.69
Total Bank Accounts	\$45,186.87
Accounts Receivable	
Accounts Receivable	83,105.23
Total Accounts Receivable	\$83,105.23
Other Current Assets	
Inventory	0.00
Inventory - Furniture	9,111.29
Uncategorized Asset	0.00
Undeposited Funds	0.00
Total Other Current Assets	\$9,111.29
Total Current Assets	\$137,403.39
Fixed Assets	
Accum Depr - Computers & Equip	-6,447.01
Accum Depr-Furniture & Fixtures	-40,067.92
Accum Depr-Vehicles & Trailers	-450,906.92
Accumulated Depreciation	0.00
Computers and CPU Equipment	6,785.91
Furniture and Equipment	43,046.49
Trucks and Trailers	553,532.08
Vehicles	0.00
Total Fixed Assets	\$105,942.63
Other Assets	
Employee Adv	1,470.82
Long distance contingency cash	2,075.00
Start Up Costs	125.00
Accumulated Amortization	-125.00
Total Start Up Costs	0.00
Temporary Loan to Officer	119,521.25
Total Other Assets	\$123,067.07

	TOTAL
TOTAL ASSETS	\$366,413.09
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	
American Express	-41,462.71
Cash Flow Account 2352	50,480.44
USbank Central Billing 9221	12,601.87
Total Credit Cards	\$21,619.60
Other Current Liabilities	
401k	0.00
Ohio Business Gateway Payable	0.00
Ohio Taxes Payable	24.58
Sales Tax Payable	564.34
Total Ohio Taxes Payable	588.92
Payroll Liabilities	0.00
Sales Tax Agency Payable	190.47
Wage Garnishment	0.00
walgreens Payable	541.98
Sales Tax Payable	0.00
Total walgreens Payable	-541.98
Total Other Current Liabilities	\$1,321.37
Total Current Liabilities	\$22,940.97
Long-Term Liabilities	
Forklift Loan	1,919.72
Note Payable - 2011 Chevy Silve	3,727.80
Note Payable - 2011 GMC Sierra	14,962.72
Note Payable - GE Capital	202,679.25
Note Payable - US Bank Capital Lease	58,715.36
Note Payable - US Bank Equipment Finance	39,872.06
Total Long-Term Liabilities	\$321,876.91
Total Liabilities	\$344,817.88
Equity	
Common Stock	500.00
Opening Bal Equity	0.00
Owners Draw	-112,047.29
Owners Equity	25,690.91
Net Income	107,451.59
Total Equity	\$21,595.21
TOTAL LIABILITIES AND EQUITY	\$366,413.09

STATEMENT OF FINANCIAL POSITION
One Year Projected Income Statement

REVENUE and GAINS

Operating Revenue	500,000.00
Net Revenue from non-carrier operations	-
Dividend and interest revenues	-
Other non-operating revenue	-
Gains	-
Total Revenue and Gains	500,000.00

EXPENSES

Equipment Maintenance and Garage Expense	\$ 1,250.00
Insurance Expense	2,000.00
Employee Salaries	150,000.00
Supervisory Salaries	62,500.00
Officer Salaries	-
Fuel Expense	23,000.00
Purchased Transportation (Lease Expense)	43,500.00
Materials and Supplies Expense	8,500.00
General Office Expense	3,000.00
Advertising Expense	7,500.00
Telephone Expense	250.00
Accounting Expense	-
Legal Expense	-
Uncollectible Revenue	500.00
Depreciation Expense	-
Amortization	-
Operating Taxes and Licenses	5,000.00
Rent Expense	23,400.00
Loss	8,500.00
Total Operating Expenses and Losses	- 338,900.00
<u>Net Income Before Taxes</u>	161,100.00
Provision for Income Taxes	- 48,330.00
<u>Net Income (Loss)</u>	\$ 112,770

Vehicle Inspection Report

Date: _____ Driver: _____ Truck: _____ Trailer: _____ Time: _____ Odometer Reading: _____

*Check any defective item and give details under "Remarks"

CHECK OUT

Good	Bad	
		Belts & hoses - No rips
		Parking Brake - Holding
		Fluid levels- Oil, trans Washer, etc
		Horn - Works
		Lights- Head, tail, park, dash
		Turn signals- Work
		Mirrors- No cracks
		Muffler- Not loud
		First Aid- All supplies

Good	Bad	
		Fire Extinguisher- Full
		Reflective Triangles-Set of 3
		Tires - Good
		Windows - No cracks
		Windshield- No cracks or chips
		Windshield wipers - Work
		Box lights - Work
		Ramps- Working order
		Safety belts- working order

#	Equipment Inventory
	# Of Pads
	# Of 2 Wheelers
	# Of 4 Wheelers
	# Of Door Jam Pads
	# Of Ratchet Straps
	# Of Carpet Shield
	(2) Wardrobe Boxes
	(2) 4.5 Boxes
	Broom

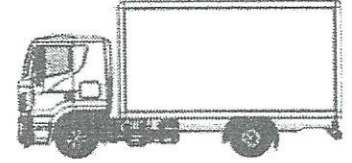
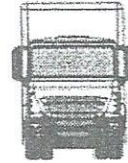
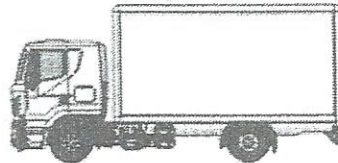
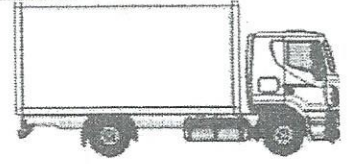
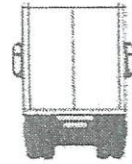
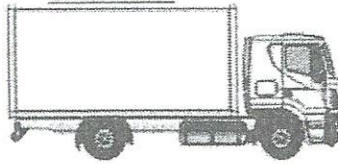
Remarks _____

Truck Cab Clean- YES NO

Truck Box Clean- YES NO

Mark Clearly All Damage Or Deficiencies Found By Using Following Symbol(s)

C=CUT D=DENT BR=BROKEN M=MISSING S=SCRATCH P=PATCHED CR=CRACKED
CHECK OUT CHECK IN



CHECK IN

Good	Bad	
		Belts & hoses - No rips
		Parking Brake - Holding
		Fluid levels- Oil, trans Washer, etc
		Horn - Works
		Lights- Head, tail, park, dash
		Turn signals- Work
		Mirrors- No cracks
		Muffler- Not loud
		First Aid- All supplies

Good	Bad	
		Fire Extinguisher- Full
		Reflective Triangles-Set of 3
		Tires - Good
		Windows - No cracks
		Windshield- No cracks or chips
		Windshield wipers - Work
		Box lights - Work
		Ramps- Working order
		Safety belts- working order

#	Equipment Inventory
	# Of Pads
	# Of 2 Wheelers
	# Of 4 Wheelers
	# Of Door Jam Pads
	# Of Ratchet Straps
	# Of Carpet Shield
	(2) Wardrobe Boxes
	(2) 4.5 Boxes
	Broom

Remarks _____

Truck Cab Clean- YES NO

Truck Box Clean- YES NO

Drivers Name: _____

Drivers Signature: _____

RECORD OF ANNUAL INSPECTION

(49 CFR, 396.17-23)

Prepare Separate Report for Each Vehicle Inspected

DATE

07/23/2015

D7139872

COMPANY NAME Moving Ahead Services		VEHICLE TYPE <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> CONVERTER DOLLY	
STREET ADDRESS 3560 Top Industrial Pkwy		VEHICLE MAKE Int	MODEL 4300
CITY Willoughby	STATE OH	YEAR 2016	VEHICLE IDENTIFICATION (Company No., State Tag No. or VIN) 6L229504
INSPECTOR'S NAME (Please Print) JOSH Harter		EMPLOYEE NO. 67877	

REPORT OF CONDITION (For Detailed Information on Inspection Procedures see FMCSR Section 396, Appendix G)

	OK	REPAIR		OK	REPAIR		OK	REPAIR		OK	REPAIR
BRAKES			EXHAUST			STEERING			FRAME		
Adjustment	✓		Leaks	✓		Adjustment	✓		Members	✓	
Mechan. Compon.	✓		Placement	✓		Column/Gear	✓		Clearance	✓	
Drum/Rotor	✓		LIGHTING			Axle	✓		TIRES		
Hose/Tubing	✓		Headlights	✓		Linkage	✓		Tread	✓	
Lining	✓		Tail/Stop	✓		Power Steering	✓		Inflation	✓	
Low Air Warning	NA		Clearance/Marker	✓		Other			Damage	✓	
Trailer Air Supply	NA		Identification	✓		FUEL SYSTEM			Other		
Compressor	NA		Reflectors	✓		Tank(s)	✓				
Parking Brakes	✓		Other			Lines	✓		WHEELS/RIM		
Other			CAB/BODY			SUSPENSION			Fasteners	✓	
COUPLERS			Access	✓		Springs	✓		Disc/Spoke	✓	
Fifth-Wheel & Mount	NA		Eqpt./Load Secure	✓		Attachments	✓		WINDSHIELD	✓	
Pin/Upper Plate	NA		Tie-Downs	✓		Sliders	NA		WINDSHLD. WIP.	✓	
Pintle-Hook/Eye	NA		Headerboard	✓		MIRRORS					
Safety Chain(s)	will		Other								

REMARKS

This vehicle has been inspected and repaired as needed to comply with 49 CFR Part 396, Appendix G.

QUALIFIED INSPECTOR'S SIGNATURE *Josh Harter*

DATE 7/23/2015

APPLY LABEL TO A CLEAN, DRY SURFACE. USE WITH AN OVERLAMINATE (221-SN) TO IMPROVE DURABILITY UNDER NORMAL WEATHER CONDITIONS.

AN INDELIBLE INK MARKER IS RECOMMENDED FOR USE WHEN FILLING OUT THE LABEL. INDELIBLE INK IS PERMANENT AND WILL NOT WASH OFF, BUT MAY FADE DUE TO EXPOSURE TO ULTRAVIOLET LIGHT OVER TIME. CAREFUL DISCRETION IS ADVISED REGARDING APPLICATION OF LABEL TO AN AREA NOT EXPOSED TO EXCESSIVE ULTRAVIOLET LIGHT AND/OR ELEMENTS AND IT IS RECOMMENDED THAT THE READABILITY OF THE LABEL BE CHECKED PERIODICALLY.

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401-FC-02 3136
(Rev. 8/08)

FEDERAL ANNUAL INSPECTION

THIS VEHICLE HAS PASSED AN ANNUAL INSPECTION
CONDUCTED IN ACCORDANCE WITH 49 CFR, PART 396, FMCSR

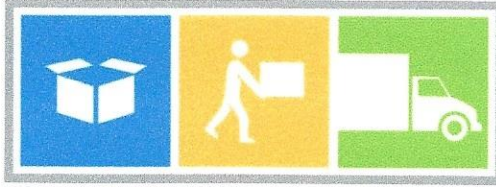
MONTH 07	YEAR 2015	D7139872
VEHICLE ID (Company No.)		STATE/TAG NO. OR VIN 6L229504

LOCATION OF RECORDS:

Company Moving Ahead

Street Address 3560 Top Industrial Pkwy

City, State, Zip Willoughby OH:0 44094



Moving Ahead Services
Premiere Home & Office Relocation

Maintenance Inspection Sheet

Maintenance Manger Name: _____ Date: _____

Vehicle Name: _____ Vehicle Mileage/ Hrs : _____

Next Service Date: _____ Service Location: _____

Notes:

Signature: _____

Date: _____