

RECEIVED

Secretary  
Pennsylvania Public Utility Commission  
400 North Street, Second Floor  
Harrisburg, PA 17120  
(717) 772-7777  
[www.puc.pa.gov](http://www.puc.pa.gov)

OCT 24 2017

Revised 7/17/17

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

**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)**

Keith M. Chitwood

- 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)**

Mike Moves Pittsburgh

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? X NO Previous Authority?    NO**

**If YES, at PUC No. A- 2017-2625362**

**4. Are you a business entity registered with the PA Dept. of State?    NO**

**If NO, you must register (see checklist on how to register)**

**If YES, provide your PA Corporation Bureau Entity ID Number A-8917684**

**(See checklist and indicate type of business entity registered)**

5. **If either a corporation or limited liability company please list members (LLC) or shareholders and officers (corporation).**

None

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

606 James Street

Street Address

Turtle Creek, PA 15145

City, State and Zip Code

412-708-5121

Telephone Number

Allegheny

County

The address entered here should be the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment.

7. **Mailing Address** (if different from Physical Address)

Same as above

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**.

8. **Attorney** (if applicable)

None

Attorney's Name & Telephone Number for this Filing

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.

9. **Does applicant have a USDOT Number?**

X No

Yes, at No. \_\_\_\_\_

- 10. Describe the service area proposed by this application.**  
(Use the space below or attach additional sheet if space provided is not sufficient).

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The service area that will be fixated upon, but not limited to, points in southwestern PA where household goods shall be transported per customer request. This is a local moving, hauling, and delivery service.

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*Examples:*

- *To transport household goods in use between points in Pennsylvania.*
- *To transport household goods in use from points in Centre County to points in Pennsylvania, and vice versa.*

**11. 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 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.

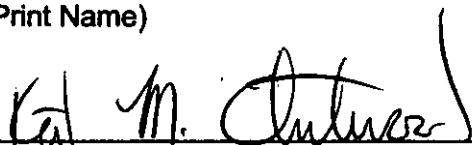
## Verification of Application

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.

Keith M. Chitwood

(Print Name)



(Signature)

Oct. 23, 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).

## 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.

Keith M. Chitwood

Legal Name of Applicant

Mike Moves Pittsburgh

Trade Name, if any

606 James Street

Turtle Creek

PA

15145

Street Address (principal place of business)

City or Municipality

State

Zip Code

The Verified Statement of the Applicant factual details about your proposed transportation service. Your Verified Statement must answer all of the items listed below and on the following pages. Provide as much information as possible to prevent delay in processing your application. If you need more space to provide your answer, please attach additional pages identifying the appropriate item number.

1. Identify the person making the Verified Statement on behalf of the applicant. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number.

Keith M. Chitwood

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

Owner- Mike Moves Pittsburgh

3. Please provide evidence of minimum of two-years' experience with a licensed household goods carrier as required by 52 Pa. Code §3.381(c)(1)(iii)(A)(II)(1-).

**I have no experience working for a licensed household goods carrier in the state of PA. I have worked for two moving companies in Virginia Beach and have packed trucks and unloaded trucks for the better part of 30 years in various states and with the US Army.**

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to including office machines that will be utilized, and the facility to house vehicles. As a carrier of household goods in use, applicant should include a description of 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.

I have a home-based business. I have my trucks services as needed: quarterly oil changes, new tires as needed, brakes replaced as needed and repairs when the truck breaks down. I am the sole driver of my trucks. I communicate through cell phone to my customers and as needed when I hire someone to help with a job. The only office machines at my location are a laptop computer, printer, and copier. I have 2 trucks. One is parked at my house, the other at Store Express in Wilmerding, PA. Whatever records are required by the PUC that I maintain will be my sole responsibility and will ensure that they are kept and submitted as required once the conditions are made known to me. As a Sole Proprietor I keep my own business records on a spreadsheet and bring them to a tax professional to file my taxes. I do not provide customers any transportation- I just make deliveries and perform household moves or haul things away. As stated, I am the sole driver. I have no need as of

this date to communicate with other drivers. When I do, I will ensure they have a cell phone as a primary source of communication before I would hire them.

5. 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 territory you will be serving. In addition, please explain:
- Your hiring standards for drivers;
  - Your system for conducting criminal background checks;
  - Your driver training program;
  - Your system for conducting driver license checks;
  - Your policies regarding alcohol and drug use by your drivers.

Mike Moves Pittsburgh is not a one trick pony. I utilize my truck(s) to provide more than one income stream because I like to work and pay my bills. I do not have a hiring standard for hiring drivers because I am the only driver. Should the occasion arise for another driver, I would hire them as a 1099 Independent Contactor Driver. I would ensure they have a medical DOT card and a drivers license before entrusting them with either of my trucks.

My wife, Cherri Chitwood, is adept at computer searches as she has a degree in Computer Information Management. She can find out what anybody may have been charged with and make it known to me.

Any driver I would utilize would already have 2 or more years experience driving box trucks. Still, I would ride with them for 3 days to ensure they know the intimate details of operating the truck I entrust them with.

Each new driver will be required to bring me a copy of their MVR.

No drug or alcohol use/abuse will be tolerated at Mike Moves Pittsburgh. Any violation is meant with immediate expulsion.

6. 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 territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below.

<b>YEAR</b>	<b>MAKE</b>	<b>MODEL</b>	<b>SEATING CAPACITY*</b>	<b>VEHICLE ID #</b>	<b>MILEAGE</b>
1995	Ford	F-350	3	1	301, 126
1998	Ford	E-450	2	2	141, 528

Truck #2 is currently not in use. I just bought it and it needs work before it will pass a State safety inspection. I hope to have it on the road by spring 2018. Truck #2 is a 16ft. box while truck #1 is just a 14ft. box. I plan to use the bigger truck for moving and the smaller one for deliveries as is its current use as I'm contracted with T-Force to deliver for Office Depot/Office Max.

7. Describe your vehicle safety program. Please include the following in your explanation:
- Your periodic vehicle maintenance plan
  - Your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

I have the oil changed quarterly, brakes check semi-annually, tires replaced annually and any other service as needed.

Vehicles are inspected by a state certified inspection station to ensure the safety of all systems and other drivers on the road. If it's not safe, it won't be on the road.

8. Please explain what steps you have taken to determine if you can obtain insurance and pay the required insurance premiums.

I have been contracted with a middle-man agency to deliver Office Depot products for almost 7 years. I have maintained continuous coverage on my vehicle(s) since I've owned them. This includes cargo insurance and meeting the minimum requirements for the 3 different middle man agencies I've been contracted with: and their requirements are more stringent than the state of PA.

9. State whether the applicant has been convicted of a misdemeanor or felony. If applicant is partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

\_\_\_\_ YES    X NO

10. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining 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.

Keith M. Chitwood

(Signature)

Keith M. Chitwood Owner Mike Moves Pittsburgh

(Name and Title, printed or typed)

Oct. 23, 2017

(Date)

**Statement of Financial Position (Balance Sheet)**

As of (date) \_\_\_\_\_

**ASSETS**

**Current Assets**

Cash

Varies weekly

Other Current Assets (specify)

Total Current Assets

Varies weekly

**Tangible Assets**

Motor Vehicle Equipment

\$5000.00

Property (buildings, land, etc.)

Office Equipment

\$600.00

**TOTAL ASSETS**

**\$5600.00**

**LIABILITIES**

**Current Liabilities (Due within one year of date)**

Loans

Credit cards/revolving credit

\$6807.00

Other Liabilities (Attach schedule)

Total Current Liabilities

\$6807.00

**Long Term Liabilities (Due after one year of date)**

Mortgage

Long term commercial loan

\$6247.00

Other Liabilities (Attach Schedule)

Total Long Term Liabilities

\$6247.00

**TOTAL LIABILITIES**

**\$13,054.00**

Revised 7/17/17

The moving portion of my business will be strictly part time- after hours and weekends- as my primary focus is delivering for the company I am contracted with, T-Force Final Mile, under their authority, to deliver Office Depot/Office Max products. The average pay for performing this contracted job is \$1000 per week, sometimes less, sometimes more. This primary job pays my bills and is financing my dream of being in business for myself, should the PUC approve my request. Thank you for your consideration.



Keith M. Chitwood  
606 James St.  
Turtle Creek, PA 15145

CERTIFIED MAIL



7015 3010 0002 2626 6920



1000



17120

U.S. POSTAGE  
PAID  
PITTSBURGH, PA  
15222  
OCT 24, 17  
AMOUNT

**\$4.75**

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Secretary, PA Public Utility Comm.  
400 North Street, 2<sup>nd</sup> floor  
Harrisburg, PA 17120