

## 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)

BUDD VAN LINES INC.

- 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)

\_\_\_\_\_

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-\_\_\_\_\_

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

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

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

24 SCHOOLHOUSE ROAD  
Street Address

SOMERSET NJ 08873  
City, State and Zip Code

732 627 0600 SOMERSET  
Telephone Number 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)

24 SCHOOLHOUSE RD.  
Street Address

SOMERSET NJ 08873  
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)

MCELROY DEUTSCH MULLVANNEY & CARPENTER LLP (973) 475-8706  
Attorney's Name & Telephone Number for this Filing

1700 MT. KEMBLE AVENUE PO BOX 2075 MORRISTOWN NJ 07962-2075  
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?**

     No   X   Yes, at No. MC-152533

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

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

Household Goods Relocation Services

**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.

DAVID W. BUDD, SR.  
(Print Name)

David W. Budd SR 1-22-2018  
(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, a member (if a limited liability company), or by the President or Secretary (if a corporation).

**Budd Van Lines**

**PA Corporation Bureau Entity ID: 6577533**

<b>Board of Directors</b>	<b>% of Shares</b>
<b>David W. Budd, Sr</b>	<b>100%</b>

<b>Corporate Officers</b>	<b>Title</b>
<b>David W. Budd Sr</b>	<b>CEO/Chairman of the Board</b>
<b>Kim Budd</b>	<b>Senior Vice President</b>
<b>Gary Grund</b>	<b>Senior Vice President, National Sales</b>
<b>Marcella Scalera Budd</b>	<b>Vice President, Corporate Relations</b>
<b>Arlene T. Yanogacio</b>	<b>Chief Financial Officer</b>

# 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.

PUC Application Docket No.

BUD VAN LINES INC  
Legal Name of Applicant

Trade Name, if any

24 SOUTH HANSE RD.

Street Address (principal place of business)

EDMUNDET

City or Municipality

NY

State

08873

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.

*see attached*

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

*see attached*

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.

*see attached*

4. Describe the 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.

*see attached*

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.

*see attached*

6. Please explain: *see attached*

- 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.

*see attached*

<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;

*see attached*

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 Taxi or Limousine Authority, explain how vehicles will be replaced once they are greater than eight model years in age;

d. 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.

*see attached*

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) 9/30/17

ASSETS

Current Assets

Cash

Other Current Assets (specify) A/R + Prepaids

1,048,629  
12,256,773

Other Assets

Motor Vehicle Equipment

Building and Structures

Office Equipment

Investments and Funds (specify) Accumulated Dep

10,291,945  
604,426  
1,405,193  
(4,917,312)

TOTAL ASSETS

18,985,644.

LIABILITIES

Current Liabilities (Due within one year of date)

Long Term Liabilities (Due after one year of date)

TOTAL LIABILITIES

13,354,370.

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

5,231,274

**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.

David W. Budd Sr.  
(Signature)  
DAVID W. BUDD, SR. COO / CHAIRMAN  
(Name and Title, printed or typed)

1-22-18  
(Date)



- 1.) Arlene T. Yanogacio, Chief Financial Officer (officer)
- 2.) Not applicable
- 3.) 43 years in relocation of household goods and storage with interstate authority.
- 4.) Budd Van Lines will not be domiciled in PA. Services will be provided from our corporate office located in Somerset, NJ.
- 5.) Budd Van Lines will not be targeting a local PA relocation rather our moves will be related to our corporate accounts requiring relocation within PA. All requests will be coming from our corporate accounts to our headquarters in NJ.
- 6.) Please explain:
  - a. Your hiring standards for drivers: Qualified drivers are required to:
    - i. Must have 2-4 years of commercial driving experience
    - ii. Must meet DOT Standards
    - iii. Must have no more than 1 moving violation in 2 years or no more than 2 violations in 5 years on their Motor Vehicle Record (MVR)
    - iv. Must possess high school diploma or GED
    - v. Pass a DOT physical
  - b. 7-10 year background check is done during the hiring process
  - c. Monthly online training videos for all drivers. At the end of the videos there is a quiz that the driver must take and pass. The driver is then given a certificate for that training.
  - d. We maintain a driver management system that tracks all the time sensitive documents such as licenses, medical cards, and other related driver documents. A notice is given to the driver when one of these documents are due to expire in 30 days.
  - e. Criminal background checks are tracked through our driver management system and are done every 2 years at the end of the 1<sup>st</sup> quarter.
  - f. We are a drug and alcohol free workplace and drivers must sign our drug and alcohol free policy. On a quarterly basis, we run mandatory, random alcohol and drug screen tests on our drivers.
- 7.) We currently have 117 vehicles available to service BVL business. The vehicles will be dispatch to the area when the need calls for it.
- 8.) Vehicle Safety Program
  - a. Please see attached Systematic Maintenance and Repair Program
  - b. We conduct a bi-annual DOT inspection on every BVL vehicle.
  - c. N/A
  - d. We conduct a bi-annual DOT inspection on every BVL vehicle plus our Systematic Maintenance and Repair Program to ensure we meet ALL regulatory standards.

9.) We currently have business insurance to cover all needs through Capacity Coverage Thomas  
Wentworth Phone 201-661-2420 Fax 201-661-7359

10.)No

11.)See application

# BUDD VAN LINES

## Systematic Maintenance and Repair Program

Budd Van Lines is committed to providing customers with safe Transportation of their household goods. This commitment requires a three step approach as outlined in this policy.

1. **Knowledge and Compliance.** Everyone at Budd Van Lines directly involved in this process must;
  - a. Be knowledgeable of the rules and regulations of the systematic maintenance and repair program per Federal Motor Carrier Safety Regulations Part 396.
  - b. Everyone including our managers, drivers and maintenance service providers must comply with the rules in this policy.
  
2. **Systematic Maintenance and Repair Program.** The Federal Motor Carrier Safety Administration (FMCSA), requires that we must ensure our fleet must be systematically inspected, repaired and maintained to ensure they are in safe operating condition.
  - a. All parts and accessories must be in safe and proper operating conditions at all times. These include specific parts and accessories that may affect safety operation , including but not limited to, frame, frame assemblies, suspension systems, axles, and attaching parts, wheels and rims, brake systems and related components, and steering systems.. Our fleet shall be properly lubricated and free of excessive oil and grease leaks.
  
3. **Driver Vehicle Inspection Reports.** The Federal Motor Carrier Safety Administration Regulations require that every carrier require its drivers to perform a daily pre-trip inspection prior to operating a commercial motor vehicle on a public highway. Drivers are also required to perform a post trip inspection and the end of their shift. FMCSA regulations requires that a written Driver Vehicle Inspection be completed if a defect is discovered during the pre-trip or post trip inspection. **The FMCSA regulations shall not be interpreted as not requiring a pre-trip/post trip inspection.**

**NOTICE:** Budd Van Lines policy requires all drivers complete a Driver Vehicle Inspection Report regardless if a defect is discovered or not.

4. When a driver is either unsure or believes the discovered defect may affect the safe operation of the vehicle he/she shall contact the safety manager immediately. If required a qualified mechanic shall make the determination if repairs are necessary or are not necessary for the safe operation of the vehicle.

**All no time shall any vehicle operated in behalf of Budd Van Lines be operated in such a condition as to likely cause an accident or a breakdown of the vehicle.**

# BUDD VAN LINES

## Systematic Maintenance and Repair Program

To ensure our fleet is complying with Federal Motor Carrier Safety Regulations all commercial motor vehicles operated on behalf of Budd Van Lines shall be systematically inspected. All company vehicles maintenance records shall include the nature and due dates of the various inspections as follows;

### TRACTOR TRUCK

TYPE INSPECTION OF INSPECTION	DUE DAYS AT TIME
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#### SCHEDULE A MAINTENANCE PLAN

Lighting Devices	90 Days
Safety Equipment	90 Days
Brake/ABS Inspection	30 Days
Low Air Warning System	30 Days

### TRACTOR TRUCKS

TYPE INSPECTION OF INSPECTION	DUE MILEAGE AT TIME
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#### SCHEDULE B MAINTENANCE PLAN

Tires and Wheels	15,000 Miles
Frame/Frame Assemblies	15,000 Miles
Suspension	15,000 Miles
Axles	15,000 Miles
Steering Systems	15,000 Miles
Lubrication	15,000 Miles
Tire Rotation	15,000 Miles

# BUDD VAN LINES

## Systematic Maintenance and Repair Program

### TRACTOR TRUCKS

TYPE INSPECTION OF INSPECTION	DATE AT TIME
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#### SCHEDUL C MAINTENANCE PLAN

Periodic Safety Inspection	Annually
Pre-Trip/Post-Trip Inspection	Daily

### SEMI-TRAILERS

TYPE INSPECTION OF INSPECTION	DUE MILEAGE AT TIME
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#### SCHEDUL B MAINTENANCE PLAN

Tires and Wheels	10,000 Miles
Frame/Frame Assemblies	10,000 Miles
Suspension	10,000 Miles
Axles	10,000 Miles
Steering Systems	10,000 Miles
Lubrication	10,000 Miles
Tire Rotation	10,000 Miles

# BUDD VAN LINES

## Systematic Maintenance and Repair Program

### DRIVER VEHICLE INSPECTION

Any motor vehicle operated by Budd Van Lines, including company owned, term leased, trip leased and owner operated, shall not be driven unless the driver is satisfied that the vehicle is in good working order. This will be accomplished by performing a pre-trip inspection prior to operating the vehicle. The driver shall also perform a post trip inspection at the end of his/her day identifying any abnormalities observed while operating the vehicle.

Drivers shall prepare a written report documenting any defects discovered. The original copy shall be turned into the safety department daily but no less than 13 days after completion. Drivers shall review the previous days DVIR to determine if the previous driver cited any defects that need to be verified as completed. The reviewing driver shall sign the previous days DVIR certifying the cited defects have been repaired.

Report any defects to the maintenance to determine if repairs are required for safe operation and/or take corrective action. They must include, at a minimum the following parts and accessories:

Parking Brake	Service Brake Systems
Lighting devices and reflectors	Steering Mechanism
Horn	Tires/Wheels/Lugs
Rear-vision mirror or mirrors	Windshield Wipers
Emergency Equipment	Spare Fuses
Current Annual Inspection	Turn Signals
Tail Lights	Excessive Leaks
Emergency Equipment	Fluid Levels
Electric Wiring Chaffing/Cracking/Exposed	Load Securement
Current Annual Inspection	

Note: Vehicle defects cited during a roadside inspection shall be included in the driver's vehicle inspection report that day and every day the defects has not been repaired.