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Revised 7/17/17

Secretary
Pennsylvania Public Utility Commission
400 North Street, Second Floor
Harrisburg, PA 17120
(717) 712-7777
www.puc.pa.gov

2018 MAY 11 PM 1:48

PA PUC
SECRETARY'S BUREAU
FRONT DESK

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)

MAYA'S MOVERS LLC (ANTHONY HUDSON)

- 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)

MAYA'S MOVERS LLC (ANTHONY HUDSON)

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 Dept. of State?** NO
If NO, you must register (see checklist on how to register) **YES**

If YES, provide your PA Corporation Bureau Entity ID Number _____
(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).**

ANTHONY HUDSON

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

3918 EASTGATE DR
Street Address
YORK, PA 17402
City, State and Zip Code
717-825-4738 YORK
Telephone Number 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
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)

N/A
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?**

 No Yes, at No. 3128183

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

MOVING OF HOUSEHOLD GOODS
TRANSPORT OF HOUSEHOLD GOODS IN USE BETWEEN
POINTS IN PA.

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.

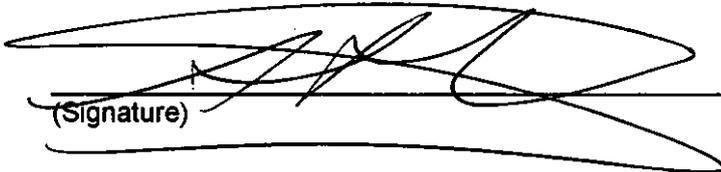
Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Household Goods in Use; and acknowledges that failure to report 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.

ANTHONY HUDSON
(Print Name)


(Signature)

5/7/18
(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).

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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.

ANTHONY HUDSON
Legal Name of Applicant

MAY'S MOVERS LLC
Trade Name, if any

3918 EASTGATE DR YORK PA 17402
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.

ANTHONY HUDSON (OWNER)

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

OWNER

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 WORKED FOR MOVING MADE AWESOME FOR 3 YEARS AND WON COMPANY OF YEAR BACK TO BACK.

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.

MY CURRENT HOME
 COMPUTER (LAPTOP) (PRINTER) (PHONE)
 FILING SYSTEM (FILE CABINET) FUTURE - BACK-UP HARD DRIVE
 • VCR
 • EMAILS
 • PHONE CALLS

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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.

- ① FOR NOW
- ② WWW.CLEARCHECKS.COM / EMPLOYERS
WWW.BETTERTEAM.COM
- ③ FIELD DRIVING TEST (MONTHLY TRAINING)
- ④ WWW.DMV.ORG / BACKGROUND CHECKS
- ⑤ DUI'S / DRUGS - SUSPENSION OF DRIVING AND/OR TERMINATION

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.

YEAR	MAKE	MODEL	SEATING CAPACITY*	VEHICLE ID #	MILEAGE
94	GMC		2	1GBKH32K2A381926	157000

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).

DAILY / WEEKLY VCR FORMS
PHYSICAL JOB / POST TRIP INSPECTIONS

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

GL - PAID
COMMERCIAL - PAID
CARGO - PAID

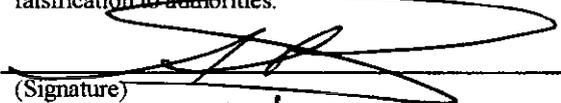
9. State whether the applicant has been convicted of a misdemeanor or felony. If applicant is partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

YES NO
I WAS IT AND THEN TRIED AT 18.
SOME PEOPLE STOLE SOME MONEY FROM A
TURKEY HILL. I WAS ASKED TO "LIE OR SNITCH" AND
I COULDN'T. I DID NOT PHYSICALLY SEE THEM DO IT.
CHARGED WITH - THEFT BY UNLAWFUL TAKEN
(2000 - 2001) - CONSPIRACY TO COMMIT THEFT.

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.



(Signature)
ANTHONY HUDSON

(Name and Title, printed or typed)

5/7/18

(Date)

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Statement of Financial Position (Balance Sheet)
As of (date) _____

ASSETS

Current Assets		
Cash	11,000 +	
Other Current Assets (specify)	CAR / 30	
Total Current Assets		
Tangible Assets		
Motor Vehicle Equipment	CAR / BOX TRUCK	OWN PAID
Property (buildings, land, etc.)		
Office Equipment		
	TOTAL ASSETS	<u>\$20,000</u>

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	—	
Credit cards/revolving credit	300 BALANCE	
Other Liabilities (Attach schedule)		
Total Current Liabilities		<u>ONE \$300</u>
Long Term Liabilities (Due after one year of date)		
Mortgage	—	
Long term commercial loan	—	
Other Liabilities (Attach Schedule)	—	
Total Long Term Liabilities		
	TOTAL LIABILITIES	<u>\$300</u>

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Anthony Hudson

3918 Eastgate Dr.
York, Pa 17402
May 5th, 2011

**Bureau Of Technical Utility Services
Compliance Office
Pennsylvania Public Utility Commission
Po Box 3265
Harrisburg Pa 17105-3265**

To whom this may concern:

I submit this transmittal letter for the preparation and filing of my initial Tariff of Common and Contract Carriers for Household Goods.

Your consideration for my initial filing is greatly appreciated.

Sincerely,

Anthony Hudson

Certificate No. A-

For Household goods authority Pa. P.U.C. No.1

Maya's Movers, LLC

Rates and Rules Governing the transportation of household goods authority

Description of authorized rights exactly as it appears in the order.

Issued: May 11, 2018

Effective: May 12, 2018

Issued under authority of 52 PA Code Section 31.27

By: Maya's Movers
Anthony Hudson
3918 East Gate Drive
717-825-4738

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Rules and Regulations

1. Advanced Reservations

Advance reservations must be prior to the service being rendered.

2. Rates

Rates for mileage are determined by the odometer of the vehicle in use and begin when the vehicle leaves passenger's/ carrier's premises. The final mileage reading is determined upon return to passenger's/carriers premises.

3. Hourly Rates

Rates begin when movers arrive on location to start job task

4. Holiday Rates

Services provided on the following holidays will be assessed at 25% of the published charge. Christmas eve. Christmas Day. Thanksgiving.

5. Driver Gratuity

Gratuity is not a demand. However it is appreciated.

6. Additional Expenses

All tolls, parking fees, and other out of pocket expenses will be the responsibility of the customer and added to the carrier's charges.

7. Promotional Fees

Discounts offered by special promotions will be validated and applied to the customer total bill following the completion of work.

8. Deposits and Cancellation Policy

All reservations require a deposit of 20%. Deposits are subject to forfeiture of 50% if trip is cancelled more than 15 days but less than 30 days prior to the trip, and forfeiture of the total amount if cancelled in 15 days or less to the trip.

Schedule of Rates

Moves Under 40 Miles are charged on an hourly basis. The charges begin upon arrival at the origin and continue until the move is completed at the new destination. To compensate for our travel to and from the job, Travel Time is added to the time we are physically on the job.

	Pricing			
HOURLY RATES	2 Movers/Truck	3 Movers/Truck	4 Movers/Truck	5 Movers/Truck
WEEK	400	450	500	550
WEEKENDS	425	475	525	575
PEAK	475	525	575	625
HOLIDAYS	500	550	625	675
Additional Hrs	95	110	125	140

Hourly rates based on crew size and calendar date with a 3 hour minimum and billed 15 minute increments thereafter.

Weight	Miles	100	250	500	750	1000
2500		1700	1850	2050	2250	2375
3000		2040	2220	2460	2700	2850
4000		2720	2960	3280	3600	3800
5000		3400	3700	4100	4500	4750
6000		4080	4440	4920	5400	5700
7000		4760	5180	5740	6300	6650

These prices are a rough estimate. Please call our office to receive an accurate quote.

	Sizes	Packed By Maya's Movers LLC	
China Pac	18x18x30	\$35.00	\$6.00
Larges/4.5 Cubic Ft.	18x18x24	\$18.00	\$4.00
Linen/3.0 Cubic Ft.	18x18x16	\$15.00	\$3.00
Book Cartons	18x12x12	\$ 9.00	\$2.00
Picture/Mirror		\$35.00	\$6.00
White Paper	25lb. Bail		\$25.00
Wardrobes	24x21x46	\$15 Brought on the day of the move, when requested in advance	

Carrier's Liability is limited to 60 cents per pound per article which is standard throughout the industry. This limited coverage is included at no additional cost. Upon request we can extend our Bill of Lading Liability to an amount equal to the Full Value of the Entire Shipment, Minimum of \$5000.00 per room. The cost of this additional coverage is \$10.00 per thousand based on the declared value of the entire shipment. We do not sell insurance and our liability in either of the options is limited to the conditions spelled out on the Bill of Lading approved by the PA PUC, which you will be required to sign on the day of the move. You may wish to check with your personal insurance agent to see what protection they offer under your homeowners policy. A copy of the liability release is on the carrier's liability page.