
D & J TRANSPORT SERVICES, LLC

September 10, 2018

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
P.O.B 3265
Harrisburg, Pa. 17105-3265

re: Mc 945184

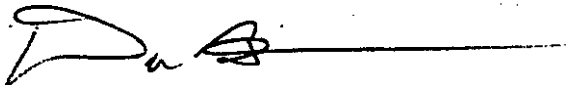
~ C-2018-3003958

To Whom It May Concern,

In response to your letter (see attached), we did not file any insurance with the commission because we stopped operating our trucks as of June 2018.

We were informed that we had to file a MCS 150....see attached...

Sincerely yours,



Dennis Bloom, President

cc: Michael L. Swindler, Deputy Chief Prosecutor

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2018 SEP 12 AM 10:52
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The collection of this information is authorized under the provisions of 49 CFR, Parts 390-399. Public reporting for this collection of information is estimated to be 20 minutes (and 7.5 minutes for the biennial updates) per response, including the time for reviewing the instructions and completing and reviewing the data inserted on the form electronically. All responses to this collection of information are mandatory, and will be provided in confidence to the extent allowed by law. Notwithstanding any other provision of law, no person is required to respond to nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The valid OMB Control Number for this information collection is 2126-0013. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-MBI, U.S. Department of Transportation, Washington, D.C. 20590.



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SEP 12 2018

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Motor Carrier Identification Report

(Application for USDOT Number)

FORM MCS-150

REASON FOR FILING (select only one):

- New Application Biennial Update or Changes Out of Business Notification Reapplication (after revocation of new entrant)

1. LEGAL BUSINESS NAME: D + J Transport Services, LLC

2. DOING BUSINESS AS NAME (if different from Legal Business Name): _____

3-7. PRINCIPAL PLACE OF BUSINESS:

1187 Pocono Blvd MT Pocono PA 18344
3. STREET ADDRESS/ROUTE NUMBER 4. CITY 5. STATE/PROVINCE 6. ZIP CODE 7. COLONIA (Mexico only)

8-12. MAILING ADDRESS: Same as Principal Address Mailing address below:

POB 600 MT Pocono PA 18344
8. STREET ADDRESS/ROUTE NUMBER 9. CITY 10. STATE/PROVINCE 11. ZIP CODE 12. COLONIA (Mexico only)

13-15. CONTACT NUMBERS:

716-281-0199 716-281-0199 _____
13. PRINCIPAL BUSINESS PHONE NUMBER 14. PRINCIPAL CONTACT CELL PHONE NUMBER 15. PRINCIPAL BUSINESS FAX NUMBER

16-19. IDENTIFICATION NUMBERS:

2829584 945184 _____ _____
16. USDOT NUMBER 17. MC or MX NUMBER 18. DUN & BRADSTREET NUMBER 19. IRS/TAX ID NUMBER
(see instructions before completing this section)

20. E-MAIL ADDRESS: DJTransport7548@gmail.com

21. CARRIER MILEAGE (to nearest 10,000 miles for the previous 12 months): _____

22. COMPANY OPERATIONS (check all that apply):

- A. Interstate Carrier B. Intrastate Hazmat Carrier C. Intrastate Non-Hazmat Carrier D. Interstate Hazmat Shipper E. Intrastate Hazmat Shipper

23. OPERATION CLASSIFICATIONS (check all that apply):

- A. Authorized For-Hire B. Exempt For-Hire C. Private Property D. Private Motor Carrier of Passengers (Business) E. Private Motor Carrier of Passengers (Non-Business) F. Migrant G. U.S. Mail H. Federal Government I. State Government J. Local Government K. Indian Tribe

L. Other:

24. CARGO CLASSIFICATIONS (check all that apply):

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> A. General Freight | <input type="checkbox"/> I. Machinery, Large Objects | <input type="checkbox"/> Q. Coal/Coke | <input type="checkbox"/> Y. Paper Product |
| <input type="checkbox"/> B. Household Goods | <input checked="" type="checkbox"/> J. Fresh Produce | <input type="checkbox"/> R. Meat | <input type="checkbox"/> Z. Utility |
| <input type="checkbox"/> C. Metal: Sheets, Coils, Rolls | <input type="checkbox"/> K. Liquids/Gases | <input type="checkbox"/> S. Garbage, Refuse, Trash | <input type="checkbox"/> AA. Farm Supplies |
| <input type="checkbox"/> D. Motor Vehicles | <input type="checkbox"/> L. Intermodal Container | <input checked="" type="checkbox"/> T. U.S. Mail | <input type="checkbox"/> BB. Construction |
| <input type="checkbox"/> E. Drive Away/Towaway | <input type="checkbox"/> M. Passengers | <input type="checkbox"/> U. Chemicals | <input type="checkbox"/> CC. Water Well |
| <input type="checkbox"/> F. Logs, Poles, Beams, Lumber | <input type="checkbox"/> N. Oil Field Equipment | <input type="checkbox"/> V. Commodities Dry Bulk | <input type="checkbox"/> DD. Other: |
| <input type="checkbox"/> G. Building Materials | <input type="checkbox"/> O. Livestock | <input checked="" type="checkbox"/> W. Refrigerated Food | |
| <input type="checkbox"/> H. Mobile Homes | <input type="checkbox"/> P. Grain, Feed, Hay | <input type="checkbox"/> X. Beverages | |

25. HAZARDOUS MATERIALS (Carrier or Shipper) (check all that apply):

(C=Carrier; S=Shipper; B=Bulk, in cargo tanks; NB=Non-Bulk, in packages)

	C	S	B	NB		C	S	B	NB		C	S	B	NB
A. DIV 1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	O. DIV 2.3D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CC. DIV 6.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. DIV 1.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P. CLASS 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DD. CLASS 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. DIV 1.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Q. CLASS 3A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EE. HRCQ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. DIV 1.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R. CLASS 3B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FF. CLASS 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. DIV 1.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	S. COMB LIQ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GG. CLASS 8A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. DIV 1.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	T. DIV 4.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HH. CLASS 8B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. DIV 2.1 (Flam. Gas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	U. DIV 4.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	II. CLASS 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. DIV 2.1 LPG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	V. DIV 4.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JJ. ELEVATED TEMP. MAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. DIV 2.1 (Methane)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W. DIV 5.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	KK. INFECTIOUS WASTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. DIV 2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X. DIV 5.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LL. MARINE POLLUTANTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. DIV 2.2D (Ammonia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Y. DIV 6.1A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM. HAZARDOUS SUB (RQ)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. DIV 2.3A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Z. DIV 6.1B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NN. HAZARDOUS WASTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M. DIV 2.3B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AA. DIV 6.1 POISON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OO. ORM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N. DIV 2.3C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BB. DIV 6.1 SOLID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

26. NUMBER OF VEHICLES THAT WILL BE OPERATED IN THE U.S.:

	Straight Trucks	Truck Tractors	Trailers	Hazmat Cargo Tank Trucks	Hazmat Cargo Tank Trailers	Motor-coach	Number of vehicles carrying number of passengers (including the driver)												
							School Bus			Bus	Passenger Van		Limousine						
							1-8	9-15	16+	16+	1-8	9-15	1-8	9-15	16+				
Owned																			
Term Leased																			
Trip Leased																			

27. DRIVER INFORMATION:

DRIVER INFORMATION	INTERSTATE	INTRASTATE	TOTAL DRIVERS	TOTAL CDL DRIVERS
Within 100-Mile Radius				
Beyond 100-Mile Radius				

28. IS YOUR USDOT NUMBER REGISTRATION CURRENTLY REVOKED BY THE FMCSA?

Yes No If yes, enter your USDOT Number: _____

29. COMPLIANCE CERTIFICATION:

ALL MOTOR PASSENGER CARRIER APPLICANTS must certify as follows:

Applicant is fit, willing, and able to provide the proposed operations and to comply with all pertinent statutory and regulatory requirements, including the U.S. Department of Transportation's Americans with Disabilities Act regulations for over-the-road bus companies located at 49 CFR Part 37, Subpart H, if applicable.

YES

Private entities that are primarily in the business of transporting people, whose operations affect commerce, and that transport passengers in an over-the-road bus (defined as a bus characterized by an elevated passenger deck over a baggage compartment) are subject to the U.S. Department of Transportation's Americans with Disabilities Act regulations located at 49 CFR Part 37, Subpart H. For a general overview of these regulations, go to the Federal Motor Carrier Safety Administration's Web site at www.fmcsa.dot.gov/rules-regulations/bus/company/ada-guidelines.htm.

30. PLEASE ENTER NAME(S) OF SOLE PROPRIETOR, PARTNERS, OR OFFICERS AND TITLES

(e.g., president, treasurer, general partner, limited partner)

1. Priscilla Bloom - owner
2. D. Bloom - President
(please type or print names)

31. CERTIFICATION STATEMENT *(to be completed by authorized official):*

I, Dennis Bloom, certify that I am familiar with the Federal Motor Carrier Safety Regulations and/or Federal Hazardous Materials Regulations. Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete.

Signature: *Dennis Bloom* Title: President Date: 9/10/18
Priscilla Bloom *owner* 9/11/18
(please type or print name) (please type or print)

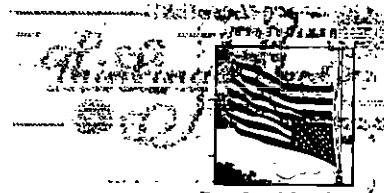
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MT POC-44, PA 18344

LENIX VALLEY PA 120

20 SEP 2011 PM 11



Rosemary Chiavetta, Secretary

Pennsylvania P.U.C

P.O.B. 3265

Hannabury, PA. 17105-3266

17105-326565

