

RECEIVED

FEB 14 2020

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Ankney Trucking

2176 RT. 381

Rector, Pa. 15677-1610

Phone# 724-593-7981 FAX# 724-593-3681

Cell# 412-298-1800

E-Mail d.ankney@icloud.com

Rosemary Chiavetta, Secretary

Pennsylvania Public Utility Commission

Bureau of Investigation and Enforcement

400 N. Street

Harrisburg, Pa. 17120

Concerning, DOCKET NO. C-2020-3017992

For PUC A-00116626

Ms. Chiavetta, I am Elois Ankney, I changed insurance companies this year.

From Sentry to Progressive, I am enclosing a copy of my payment receipt, which I paid in full, on 12-16-2019 and the conformation number 016257.

Also, the policy number 01542412-0. I am also sending copies of the filings, which I was told were sent, and a copy of Insurance Coverage Summary, and you can see it is dated 12-17-19 Liability and Cargo are listed. If there is anything else I can do to clear this up please let me know.

Thank you,

Elois A. Ankney



Ankney Trucking

KIRK CAVICCHIO
MERIT INSURANCE SVCS
520 STOKES RD BLD#B-6
MEDFORD, NJ 08055

PROGRESSIVE
COMMERCIAL

ELOIS ANKNEY
DBA: ANKNEY TRUCKING
2176 RT 381
RECTOR, PA 15677

Policy number: 01542412-0

Underwritten by:
United Financial Casualty Company
December 16, 2019
Policy Period: Dec 30, 2019 - Dec 30, 2020
Online Service
progressiveagent.com
Customer Service
1-800-444-4487

Payment Receipt for commercial auto insurance initial payment

Payment information

Receipt for your payment

Amount: \$7,326.00
Payment Method: Credit Card
Card Type: Credit
Account number: **** * 8240
Confirmation number: 016257
Transaction date and time: Dec 16, 2019 1:46 pm
Merchant ID: United Financial Casualty Company

Form Payrec (06/05)

RECEIVED

FEB 14 2020

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE

DOT# A00116626

Filed with the PENNSYLVANIA PUBLIC UTILITIES COMMISSION (hereinafter called Commission) of PO BOX 3265, HARRISBURG, PA 17105

This is to certify, that the United Financial Cas Co (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to ELOIS ANKNEY, ANKNEY TRUCKING of 2176 RT 381, RECTOR, PA 15677-0000 a policy or policies of insurance effective from 01/31/2020 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State Commission, such thirty (30) days notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143

this 31st day of January, 2020

Insurance Company File No. CA 01542412
(Policy Number)



(Authorized Company Representative)

MC1633a(08/99)

IRB3539B

FORM F

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE ENDORSEMENT

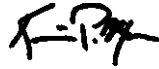
It is agreed that:

1. The certification of the policy, as proof of financial responsibility under the provisions of any State motor carrier law or regulations promulgated by any State Commission having jurisdiction with respect thereto, amends the policy to provide insurance for automobile bodily injury and property damage liability in accordance with the provisions of such law or regulations to the extent of the coverage and limits of liability required thereby; provided only that the insured agrees to reimburse the company for any payment made by the company which it would not have been obligated to make under the terms of this policy except by reason of the obligation assumed in making such certification.
2. The Uniform Motor Carrier Bodily Injury and Property Damage Liability Certificate of Insurance has been filed with the State Commissions indicated below.
3. This endorsement may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the company or the insured giving thirty (30) days notice in writing to the State Commission with which such certificate has been filed, such thirty (30) days notice to commence to run from the date the notice is actually received in the office of such Commission.

Attached to and forming part of policy No. CA 01542412-0 issued by United Financial Cas Co, herein called Company, of PO BOX 94739, CLEVELAND, OH 44101 to ELOIS ANKNEY, ANKNEY TRUCKING of 2176 RT 381, RECTOR, PA 15677-0000

Dated at MAYFIELD VILLAGE, OH 44143 this 31 st day of January, 2020

Countersigned by



Authorized Representative

X - - INDICATES STATE COMMISSIONS WITH WHOM UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE HAS BEEN FILED							
ALABAMA		ILLINOIS		MONTANA		RHODE ISLAND	
ALASKA		INDIANA		NEBRASKA		SOUTH CAROLINA	
ARIZONA		IOWA		NEVADA		SOUTH DAKOTA	
ARKANSAS		KANSAS		NEW HAMPSHIRE		TENNESSEE	
CALIFORNIA		KENTUCKY		NEW JERSEY		TEXAS	
COLORADO		LOUISIANA		NEW MEXICO		UTAH	
CONNECTICUT		MAINE		NEW YORK		VERMONT	
DELAWARE		MARYLAND		NORTH CAROLINA		VIRGINIA	
DISTRICT OF COLUMBIA		MASSACHUSETTS		NORTH DAKOTA		WASHINGTON	
FLORIDA		MICHIGAN		OHIO		WEST VIRGINIA	
GEORGIA		MINNESOTA		OKLAHOMA		WISCONSIN	
HAWAII		MISSISSIPPI		OREGON		WYOMING	
IDAHO		MISSOURI		PENNSYLVANIA	X		

**Form H
UNIFORM MOTOR CARRIER CARGO
CERTIFICATE OF INSURANCE**

DOT# A00116626

Filed with the PENNSYLVANIA PUBLIC UTILITIES COMMISSION, PO BOX 3265, HARRISBURG, PA. 17105 (hereinafter called Commission)

This is to certify, that the United Financial Cas Co (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to ELOIS ANKNEY, ANKNEY TRUCKING of 2176 RT 381, RECTOR, PA 15677-0000 a policy or policies of insurance effective from 02/07/2020 12:01 a.m., standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carrier Cargo Insurance Endorsement, has or have been amended to provide cargo insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State Commissioner, such thirty (30) days notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143

this 7th day of February, 2020

Insurance Company File No. CA 01542412

(Policy Number)

MC2443a (09/99)



Authorized Company Representative

MERIT INSURANCE SVCS
520 STOKES RD BLD#B-6
MEDFORD, NJ 08055

PROGRESSIVE
COMMERCIAL

Named insured

ELOIS ANKNEY
ANKNEY TRUCKING
2176 RT 381
RECTOR, PA 15677

Policy number: **01542412-0**

Underwritten by:
United Financial Casualty Company
December 17, 2019
Policy Period: Dec 30, 2019 - Dec 30, 2020
Page 1 of 4

progressiveagent.com

Online Service

Make payments, check billing activity, print policy documents, or check the status of a claim.

1-609-975-8893

MERIT INSURANCE SVCS

Contact your agent for personalized service.

1-800-444-4487

For customer service if your agent is unavailable or to report a claim.

Commercial Auto Insurance Coverage Summary This is your Declarations Page

Your coverage begins the later of December 30, 2019 at 12:01 a.m. or at the time your application is executed on the first day of the policy period. This policy period ends on December 30, 2020 at 12:01 a.m.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (06/10). The contract is modified by forms 2852PA (03/11), 1652PA (03/11), 2433PA (03/11), 2434 (08/11), 2371 (06/10), MCS90 (01/17), 4881PA (03/11), 4852PA (10/04) and Z228 (01/11).

The named insured organization type is a sole proprietorship.

COLLISION COVERAGE FOR RENTAL VEHICLES

IF THIS POLICY PROVIDES COLLISION COVERAGE ON A PRIVATE PASSENGER VEHICLE, IT WILL APPLY TO A PRIVATE PASSENGER VEHICLE YOU RENT IF THE RENTAL IS COVERED AS A "TEMPORARY SUBSTITUTE AUTO" AS PROVIDED FOR IN PART II OF THIS POLICY.



Outline of coverage

Auto coverage part

Description	Limits	Deductible	Premium
Liability To Others			\$4,088
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured Motorist - Nonstacked	\$35,000 combined single limit		28
Underinsured Motorist	Rejected		--
Combined First Party Benefits	\$177,500		302
Without Workers Compensation			
Medical/Income Loss/Funeral/Accident Death			
Extraordinary Medical Benefits	Rejected		--
Comprehensive			492
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			997
See Auto Coverage Schedule	Limit of liability less deductible		
Subtotal policy premium			\$5,907

Commercial General Liability coverage part

Description	Limits	Premium
Limited General Liability - Trucking Operations	\$1,000,000/\$2,000,000	\$322
Each Occurrence	\$1,000,000	
General Aggregate	\$2,000,000	
Products/Completed Operations Aggregate	\$2,000,000	included
Personal and Advertising Injury	\$1,000,000/any one person or organization	included
Damage to Premises Rented to You	\$100,000/any one premises	included
Medical Expense	\$5,000/any one person	included
Subtotal policy premium		\$322

Motor Truck Cargo coverage part

Description	Limits	Deductible	Premium
Motor Truck Cargo	\$100,000	\$1,000	\$1,062
Subtotal policy premium			\$1,062
Fees			35
Total 12 month policy premium and fees			\$7,326

Rated drivers

1. ELOIS ANKNEY
2. STEVE ANKNEY
3. MERRIL ANKNEY

Rated commodities

1. LUMBER
2. OTHER MISC.

PATL060 000026 012 C 011 003 < 2886 PA (03/11) * 1781 PA (03/11) * 2884 (09/11) >



SEAL

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HE U.S.



1007



17120

U.S. POSTAGE PAID
PME 1-Day
LIGONIER, PA
18058
FEB 14, 20
AMOUNT
\$26.35
R2305K134138-07

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POSTAGE REQUIRED



**PRIORITY
MAIL
EXPRESS®**



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CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE (724) 543-7981

Elois A. Ankney
Ankney Trucking
2176 Rt. 381
Rector, Pa. 15677

DELIVERY OPTIONS (Customer Use Only)

- SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
 - Delivery Options**
 - No Saturday Delivery (delivered next business day)
 - Sunday/Holiday Delivery Required (additional fee, where available)
 - 10:30 AM Delivery Required (additional fee, where available)
- *Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT) PHONE ()

Rosemary Chiavetta Secretary
Pa. Public Utility Commission
Bureau of Investigation & Enforcement
400 North Street
Harrisburg, Pa.
17120

ZIP + 4® (U.S. ADDRESSES ONLY) 17120

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 insurance included.

PAYMENT BY ACCOUNT (if applicable)

USPS® Corpor Federal Agency Acct. No. or Postal Service™ Acct. No.

ORIGIN/POSTAL

1-Day

PO Zi Code

568

Date Accepted (M/D)

2/1

Time Accepted

3:3

Special Handling

\$

Weight

DELIVER

Delivery Attempt



To: PUC MASTER

Agency: PUC

Floor:

External Carrier: EXPRESS

CMPC



EJ299074568US

2/18/2020 9:54:36 AM

PM

Delivery Attempt (MM/DD/YY) Time

AM

PM

Employee Signature

PEEL FROM THIS CORNER

LABEL 11-B, MARCH 2019

PSN 7890-02-000-9996

SEI