

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)

Elite Moving Company, LLC

- 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 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 674217

(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).**

Tiffany E. Konop _____

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

229 Bonita Dr
Street Address
Greensburg, PA 15601
City, State and Zip Code
724-219-3552 _____ Westmoreland
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)

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)

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).

To provide exceptional care while transporting household goods between
points in the state of Pennsylvania.

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.

Tiffany E. Konop

(Print Name)

Tiffany E Konop

(Signature)

7/15/20

(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.

Elite Moving Company, LLC

Legal Name of Applicant

Trade Name, if any

229 Bonita Dr.

Street Address (principal place of business)

Greensburg

City or Municipality

PA

State

15601

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.
 - Tiffany E. Konop
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 or the equivalent as required by 52 Pa. Code §3.381(c)(1)(iii)(A)(II)(-I-).
 - We will be hiring Michael Horton as a Lead Foreman. He worked for B&M Moving from 2011-2015. While B&M was in operation Michael was in charge of quite a few things. He was a foreman, drove trucks, handled job quotes while also assisted in training other employees. We plan on having Michael also assist in training other employees and other basic foreman duties. Michael will be able to add extra detail in bidding jobs, training employees how to pack trucks correctly and efficiently. Michaels contact is 724-691-6561. Proof of employment is provided on additional page by his previous employer with her contact information.
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.

- Our facilities are located at our home currently. We have access for our employees to get all tools to complete the job, including moving blankets, dollies, stretch wrap, floor protection, etc.
 - Record maintenance plan includes the following but not limited to:
We have customers information stored in folders by last names. The folder contains truck rental info if we provide transportation of goods, it includes the work order provided that day with all of the customers contact information, addresses, inventory if provided, time job started with customers initials at time start and time job completed. Paperwork also includes payment amount when job was completed and broken down and customers signature. All paperwork/records are stored, filed and secured.
 - There is no current moving vehicles to house that are used to place household goods in.
 - All records provided by the PUC and all business records will be stored and secured.
 - All requests come from and initiated directly from the customer either by Thumbtack, Facebook, via our website, Google or word of mouth. If and when a customer will require a vehicle for transportation, we will then dispatch the proper size truck at the scheduled time. Maintaining communication with a driver would be through cell phones.
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:
- a. Your hiring standards for drivers;
 - b. Your system for conducting criminal background checks;
 - c. Your driver training program;
 - d. Your system for conducting driver license checks;
 - e. Your policies regarding alcohol and drug use by your drivers.
- We plan on hiring 2-3 drivers. We only plan on operating within a small range of about less than 2 hours from our location address.
 - Standards for drivers is safety, licensed and drug free.
 - Background checks will be performed by clearchecks.com
 - Driver training will be provided by the DVD being purchased through JJ Keller that is called Light and Medium Duty Vehicle Training. The DVD provides training via employee handbooks, awareness poster, a "pre trip" inspection check list, quizzes and a training log for our employees plus more. We plan to use this DVD to train our employees for the truck driving as well as all the safety and importance that comes along with operating these types of vehicles. The website is www.JJKeller.com. The product code is 30194. Any and all service logs will be kept on the vehicle in the office.
 - Checking the drivers record will be performed by ordering a motor vehicle report from the PA DMV. Also, upon hiring employees are required to provide a copy of their license for us to copy and hold on file.
 - There is no toleration for alcohol use during work hours. There is zero toleration for drug usage and will result in termination. Pre employment drug screening will be held in order to be hired as well as a background check and license check. Drug screening will be held at random for employees.

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.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY*</u>	<u>VEHICLE ID #</u>	<u>MILEAGE</u>

- We currently do not own any work vehicles until PUC approval has been made. Then we will purchase one.
7. Describe your vehicle safety program. Please include the following in your explanation:
- a. Your periodic vehicle maintenance plan
 - b. Your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).
- The maintenance performed for the vehicle will have a log. There is also a DVD being purchased through JJ Keller that is called Light and Medium Duty Vehicle Training. The DVD provides training via employee handbooks, awareness poster, a "pre trip" inspection check list, quizzes and a training log for our employees plus more. We plan to use this DVD to train our employees for the truck driving as well as all the safety and importance that comes along with operating these types of vehicles. The website is www.JJKeller.com . The product code is 30194. Any and all service logs will be kept on the vehicle in the office.

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

- Insurance will be obtained by an insurance company that was referred to us by Charlie Morris. The insurance companies are listed on Pennmovers.org which is Pa Moving and Storage Associates. The truck that we plan on obtaining is a 1999 F350 Box Truck once we are PUC approved.

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.

Tiffany E. Konop
(Signature)
Tiffany E. Konop
(Name and Title, printed or typed)

7/15/20
(Date)

Statement of Financial Position (Balance Sheet)

As of (date) 7/15/20

ASSETS

Current Assets		
Cash	<u>\$4,500.00</u>	
Other Current Assets (specify)	<u> </u>	
Total Current Assets		<u>\$4,500.00</u>
Tangible Assets		
Motor Vehicle Equipment	<u> </u>	
Property (buildings, land, etc.)	<u> </u>	
Office Equipment	<u>\$3,000.00</u>	
	TOTAL ASSETS	<u>\$7,500.00</u>

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	<u> </u>	
Credit cards/revolving credit	<u> </u>	
Other Liabilities (Attach schedule)	<u> </u>	
Total Current Liabilities		<u>\$0.00</u>
Long Term Liabilities (Due after one year of date)		
Mortgage	<u> </u>	
Long term commercial loan	<u> </u>	
Other Liabilities (Attach Schedule)	<u> </u>	
Total Long Term Liabilities		<u>\$0.00</u>
	TOTAL LIABILITIES	<u>\$0.00</u>

To whom it concerns

I highly recommended Mr. Horton as a candidate for employment. Mike was employed by my company B & M Moving LLC. Mike was responsible for packing, loading, unloading, driving trucks to and from locations whether that was in state or out of state jobs.

Mike worked at B & M Moving from 2011-2015. Mike had a lot that he was responsible for. He started out just as a laborer for the company. It did not take long for him to become my foreman on the job. Mike had great communication skills with our customers. When I had to leave a jobsite and go bid on another job, I knew things were going to get done with him there.

I can not say enough of this man. He would be a tremendous asset to your company and has my highest recommendation. If you have any questions with regards to his background or qualifications , please do not hesitate to call me .

Sincerely

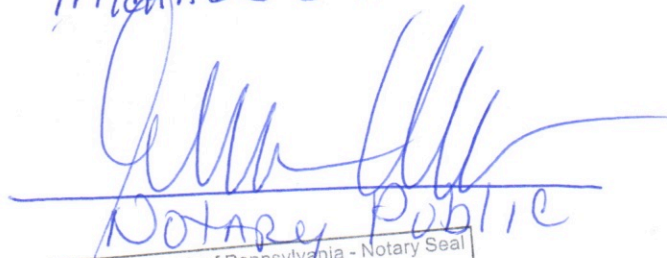


LaurieAnna Hutton B & M Moving
903-219-1443

Commonwealth of Pennsylvania
County of WESTMORELAND

Sworn to and subscribed before me

this 8 day of July, 2020 For
MICHAEL S HORTON



NOTARY PUBLIC

Commonwealth of Pennsylvania - Notary Seal
Eileen Williams, Notary Public
Westmoreland County
My commission expires April 12, 2023
Commission number 1232521
Member, Pennsylvania Association of Notaries