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Secretary
Pennsylvania Public Utility Commission
400 North Street, Second Floor
Harrisburg, PA 17120
717.787.3834
www.puc.pa.gov

JUL 31 2020

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

**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)

DELICATO TRANSPORT, 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)

N/A

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 7130389 - ane.
(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).

JOSEPH INDELICATO

6. Physical Address (do not use PO Box)

51 US HIGHWAY 206, SUITE 107
Street Address
AUGUSTA, NEW JERSEY 07822
City, State and Zip Code
973-383-2078 Telephone Number SUSSEX 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. 1407207

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

TRANSPORTATION OF HOUSEHOLD GOODS BETWEEN
ALL POINTS IN 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.

JOSEPH INDELICATO

(Print Name)



(Signature)

7-3-20

(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).

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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.

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DELICATO TRANSPORT, LLC

JUL 31 2020

Legal Name of Applicant

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Trade Name, if any

51 US HWY 206, SUITE 107 AUGUSTA NJ 07822

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.

JOSEPH INDELICATO OWNER/SOLE MEMBER OF
DELICATO TRANSPORT, LLC

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

NONE

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)(+).

DELICATO TRANSPORT, LLC IN BUSINESS FOR 15 YEARS
SINCE 2005. JOSEPH INDELICATO HAS 25 YEARS
PRIOR EMPLOYMENT WITH UNITED & NORTH AMERICAS
VAN LINES COMBINE. BIO ENCLOSED.

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.

600 SF OFFICE, 5,000 SF WAREHOUSE, PHONES, EMAIL,
COMPUTER, QUICKBOOK, MOBILE PHONES, ENCLOSED
PALLETIZED STORAGE, 1 LOADING DOCK,

Joseph Indelicato has 30 years of experience in the transportation industry. After studying business management at Fairleigh Dickinson University and Bergen Community College, Joseph entered the transportation industry in 1986, creating Indy Transport Systems, a pick-up and delivery service and trucking company that primarily serviced the airfreight industry out of Newark International Airport. As Indy Transport Systems' reputation for on-time delivery and reliability grew, so did the fleet of up to 4 trucks that delivered all over the New York tri-state area daily.

Joseph has also maintained long term business relationships with National Furniture Retailers and United Van Lines, acting as a fleet Owner/Operator. In 1996 Joseph dissolved the company and took on the responsibility of Operations Manager for a Residential Moving Company in northern New Jersey where his responsibility included all operational matters as well as residential sales, hiring, scheduling, etc.

In 1998, Joseph accepted a position with North American Van Lines as a Sales Executive and Senior Project Manager in the Commercial Relocation Division. Since then, Joseph has sold and managed more than 2,700,000.00 in commercial moving projects with medium size to fortune 500 companies. From 1998 through 2004, after the passing of his father, Joseph also ran Waackaack Marina and Boatel, Inc. a 100-slip, full service marina in Keansburg, New Jersey.

PRINCIPLE

Mr. Joseph Indelicato

Managing Member, Owner and Senior Project Manager has 30 years of experience in the Transportation and Relocation Industries.

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.

A, DRIVING RECORD CHECKED & BACKGROUND CHECK 3rd PARTY
 B, 3rd PARTY
 C, TRAINED IN ALL ASPECTS OF COMMERCIAL DRIVING BY COMPANY OWNER
 D, THROUGH INSURANCE AGENCY
 E. BOTH STRICTLY FORBIDDEN ON JOB. RANDOM DRUG TESTING

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
2009	INTERNATIONAL	4300	3	1HTMMAA149H265999	250,000
2011	FREIGHTLINER	M2	3	1EYACWDT3BD8D1930	275,000
2001	FREIGHTLINER	FL70	3	1AVAB3ALX2HJD9530	350,000

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).

ALL TRUCKS ARE REGULARLY MAINTAINED BY 3rd PARTY MECHANIC TO ASSURE SAFETY AND COMPLIANCE WITH ALL D.O.T AND STATE REQUIREMENTS. INCLUDING REGULAR INSPECTIONS

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

ALREADY HAVE ALL REQUIRED INSURANCE COVERAGE. C.O.I'S ENCLOSED.

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

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.

Joseph Indelicato

(Signature)

7-3-20

(Date)

JOSEPH INDELICATO SOLE MEMBER/OWNER

(Name and Title, printed or typed)

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PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Public Movers and Warehousemen

HAS LICENSED

DELICATO TRANSPORT LLC
DELICATO TRANSPORT LLC
51 Route 206
Augusta NJ 07822

FOR PRACTICE IN NEW JERSEY AS A(N): PMW Branch

09/30/2019 TO 09/30/2020
VALID

39PC00092603
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

Delicato Transport LLC
Balance Sheet
As of June 30, 2020

	Jun 30, 20
ASSETS	
Current Assets	
Checking/Savings	
Dime Bank	42,494.14
Total Checking/Savings	42,494.14
Other Current Assets	
Inventory	15,910.16
Total Other Current Assets	15,910.16
Total Current Assets	58,404.30
Fixed Assets	
1997 GMC High Cube Truck	10,325.25
1999 International	15,031.66
2001 Freightliner	21,448.94
2009 International 4300	16,500.00
Accum Deprec - Sign	-1,016.54
Accum Deprec - Truck	2,065.05
Sign	1,016.54
Total Fixed Assets	65,370.90
TOTAL ASSETS	123,775.20
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,471.00
Total Accounts Payable	2,471.00
Other Current Liabilities	
American Leasing & Financial	2,326.00
Federal W/H Tax Payable	3,864.33
FUTA Taxes Payable	522.10
Garnishment-Child Support Pay	2,145.00
NJ GIT W/H Payable	763.15
NJ Sales Tax Payable	1,271.70
NJ SUI/SDI Taxes Payable	3,671.00
PA. State W/H Taxes Payable	261.57
Social Security Taxes W/H Pay.	5,374.99
Total Other Current Liabilities	20,199.84
Total Current Liabilities	22,670.84
Long Term Liabilities	
Financial Pacific Leasing Pay	9,421.50
Total Long Term Liabilities	9,421.50
Total Liabilities	32,092.34
Equity	
Net Income	21,693.06
Retained Earnings	69,989.80
Total Equity	91,682.86
TOTAL LIABILITIES & EQUITY	123,775.20

Statement of Financial Position (Balance Sheet)

As of (date) 6-30-20

ASSETS

Current Assets

Cash

Other Current Assets (specify)

Total Current Assets

42,494.14
15,910.16 58,404.30

Tangible Assets

Motor Vehicle Equipment

Property (buildings, land, etc.)

Office Equipment

TOTAL ASSETS

123,775.20

LIABILITIES

Current Liabilities (Due within one year of date)

Loans

Credit cards/revolving credit

Other Liabilities (Attach schedule)

Total Current Liabilities

22,670.84

Long Term Liabilities (Due after one year of date)

Mortgage

Long term commercial loan

Other Liabilities (Attach Schedule)

Total Long Term Liabilities

9,421.50
32,092.34

TOTAL LIABILITIES

SEE ATTACHED BALANCE SHEET

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SECRETARY'S BUREAU



Retail

P

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\$8.05

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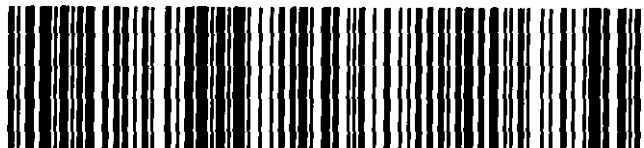
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51 US HWY 206, SUITE 107
AUGUSTA, NJ 07822

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UTILITY COMMISSION
400 NORTH STREET
2ND FLOOR
HARRISBURG, PA. 17120