

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)

Remarkable Solutions Inc.

- 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

(See checklist and indicate type of business entity registered)

7306742

5. If either a Corporation or Limited Liability Company please list members (LLC) or shareholders and officers (Corporation).

Av: Turgeman

6. Physical Address (do not use PO Box)

1650 Market St. suite #3600

Street Address

Philadelphia PA 19103 Philadelphia

City, State and Zip Code

2152740054

Telephone Number

Philadelphia

County

remarkablesolutions1@gmail.com
mm

Email Address

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?

No

Yes, at No. 3208047

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 within
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.

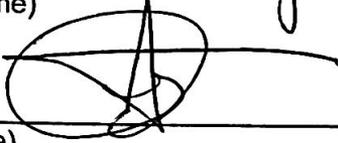
Verification of Application

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.

Avi Turgeman

(Print Name)



(Signature)

6/28/2021

(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.

Avi Turjeman

Legal Name of Applicant

1650 market St. #3600 Philadelphia PA 19103

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.

Avi Turjeman

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

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-).

Operations manager of
Imperial moving and storage.

Since Nov 2006 - Dec 2020

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.

Please See attached procedures manual.

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.

We intend to hire 3 drivers.
Please see attached procedures manual.

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
2014	Hino		3	5PVNJ8T VUE4SE68640	83,341
2015	ISUZU		3	JALE5W/64 F7900069	67,410

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).

Please see attached procedures manual.

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

We have already obtained insurance and have been paying for the past few months.

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

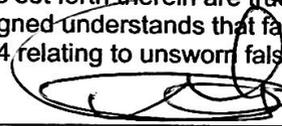
10. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

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.

(Signature)

(Name and Title, printed or typed)


Avi Turgeman President

(Date)

6/28/2021

Remarkable Solutions
Financial Statement

6/28/2021

ASSETS

Current Assets		
Cash Provident- Checking	\$ <u>32755.91</u>	
Total Current Assets		32755.91
Property and Equipment		
Total Property and Equipment		<u>0.00</u>
Other Assets	751.00	
Organization Costs	<116.00>	
Accum Amort – Organ Costs		<u>635.00</u>
Total Other Asserts		33390.91
Total Assets	\$	<u>33390.91</u>

LIABILITIES AND CAPITAL

Current Liabilities		
State Franchise Tax Payable- NJ	\$ <u>250.00</u>	
Total Current Liabilities		250.00
Long Term Liabilities		
Officer Loan	<u>100.00</u>	
Total Long Term Liabilities		<u>350.00</u>
Total Liabilities		<u>350.00</u>
Capital		
Retained Earnings	<252.00>	
Common Stock	1000.00	
Net Income	866.00	
Total Capital		<u>1614.00</u>
Total Liabilities and Capital	\$	<u>1964</u>

**Remarkable
Solutions Inc.**

**Safety and Operations
Policies and Procedures
Manual**

Prepared by
Avi Turgeman

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Driver Qualification Files

Driver Qualification Files are to be completed by each driver of commercial motor vehicles, with the assistance of the Safety Director. The following forms must be completed:

- Driver Application for Employment
- Previous Employer Inquiry of all employers in the past 3 years
- Safety Performance History of all employers, where prospective employee performed as a driver in the past 3 years.
- Motor Vehicle Report for the past 3 years
- Certificate of Road Test
- New Driver Hours of Service for the previous 7 days
- Valid Medical Certification

A completed copy of the Driver Qualification Checklist, signed by the Safety Director must also be completed. This is to be done prior to the driver being allowed to drive a commercial motor vehicle. The Safety Director will provide Juan Cevallos Dispatcher, immediately, a copy of the Driver Qualification Checklist that shows the driver has been qualified and available to drive a commercial motor vehicle.. Dispatch will not utilize a driver until they receive such confirmation. Both a printed copy and an electronic copy are to be maintained by the Safety Director.

If a MVR for a driver of commercial motor vehicles has an out of state license the driver will not be allowed to drive until a Motor Vehicle Report is received by the Safety Director.

Drug & Alcohol

Remarkable Solutions Inc has a zero tolerance policy in regards to drugs and alcohol. Any employee who is observed with or under the influence of drugs or alcohol will be immediately interviewed by the Safety Director. If upon interviewing the employee the Operations finds that employee has used drugs or alcohol on the premises or in the vehicles operated by Imperial Moving, the employee will immediately terminated.

No new driver of commercial motor vehicles will operate a commercial motor vehicle until a negative drug and alcohol test result has been received by the Safety Director.

Medical Certification

All new drivers of commercial motor vehicles will be required to present a valid medical certificate to the Safety Director before being allowed to drive a commercial motor vehicle. The driver will also be responsible to ensure they maintain a valid medical certification while employed by Imperial Moving. Failure to do so will result in the driver not being dispatched until the driver presents a valid medical certification for review to the Safety Director. Imperial Moving will maintain an Outlook email alert system to monitor medical certificate and driver's license expirations. This system will notify the Safety Director 30 days prior to any expiration.

Any driver of commercial motor vehicles who is cited for failure to present a valid medical certificate during a roadside inspection will not be dispatched the following day A 2nd occurrence will result in a 3 day suspension and any subsequent occurrence will result in immediate termination. Any driver of commercial motor

vehicles who is cited for failure to present a valid medical certificate during a roadside inspection and does not have a valid medical certificate will be suspended until such time he is able to produce a valid medical certificate to the Safety Director.

Driver Requirements

All drivers of commercial motor vehicles will be required to present to Dispatch a copy of their driver's license and a valid medical certification for review, whenever requested. If a driver is unable to present either, the driver will be sent home without pay and will not be dispatched until, such time, the driver presents both documents for review. On the second occurrence the driver will be sent home without pay and will not be dispatched until, such time, the driver presents both documents for review. On subsequent occurrences the driver will be suspended for three days, without pay and will not be dispatched until, such time, the driver presents both documents for review.

Roadside Inspections

If a driver of a commercial motor vehicle has a roadside inspection, the driver is to contact Dispatch, immediately, at the conclusion of the inspection and advise them of all violations that were identified, Failure to do so will result in the driver not being dispatched the following day. Failure to not be truthful about the violations found or failure to turn the roadside inspection report in to dispatch at the completion of the trip will result in the driver not being dispatched the following day. If a driver of a commercial motor vehicle is placed out of service or the commercial motor vehicle the driver is operating is placed out of service, the driver is not to violate the out of service order. If a driver does violate the out of service order the driver will be

immediately dismissed from the employment of Shleppers Moving & Storage.

Hours of Service Records

Hours of Service records are to be completed on a daily basis and turned in on the Friday of each week to the Safety Director. Failure to comply will result in the driver not being dispatched until the driver presents the documents for review. Driver's Daily Logs must be turned within 13 days of completion by law. Failure to do so will result in the driver not being dispatched until the driver presents the documents for review.

Commercial Motor Vehicle Inspections

All drivers of commercial motor vehicles are required to perform a pre trip inspection before driving their vehicle and a post trip inspection, in writing, at the completion of their day. This vehicle inspection report is to be turned into on a daily basis to the Safety Director. Any driver of a commercial motor vehicle who receives a violation or ticket for a safety violation that should have been detected during their pre trip inspection will be held accountable for that violation. Failure to do so will result in the driver not being dispatched until the driver presents the documents for review.

Commercial Motor Vehicle Violations

It is the responsibility of all driver's of commercial motor vehicles to perform a pre trip inspection on their commercial motor vehicles prior to driving it and to report any deficiencies, immediately, to Juan

Motor Vehicle Accidents

Motor Vehicle Accident is the unintended collision of one motor vehicle with another, a stationary object, or person, resulting in injuries, death and/or loss or damage to property.

All drivers of commercial motor vehicles must report any motor vehicle accident to the Operations Manager immediately. Failure to report any motor vehicle accident, immediately, to the Operation Manager will result in a 2 day suspension. Any subsequent occurrence will result in immediate termination.

Customer Relations

It is the responsibility of the foreman, on each job, to see that all employees present themselves in a professional manner during each move.

Parking Location

All trucks will be parked at 1701 South 25th St Philadelphia PA 19145. This lot is where the dispatcher will be meeting the drivers who will be receiving instructions and documents pertaining to the moving jobs.

Moving Violations

All drivers of commercial motor vehicles must report any moving violation to dispatcher, immediately, and again upon conviction. Failure to do so will result in disciplinary action being taken.

Moving Equipment

It is the responsibility of the Forman to ensure all necessary moving equipment required to perform the move has been loaded on the vehicle.

Household Goods Moving Paperwork

It is the responsibility of the Forman to ensure all necessary paperwork is in their possession prior to leaving for the shippers. This is to include:

- Estimate (must be marked Binding or Non Binding)
- Signed Order for Service (must be marked Binding or Non Binding)
- Bill of Lading (must be marked Binding or Non Binding)

The foreman is also responsible to ensure they are completed properly by both the shipper and the moving company.

It is the responsibility of the sales people to make sure an estimate is printed prior to

FREE WORKPLACE POLICY & PROCEDURE

Remarkable Solutions Inc. is dedicated to providing safe and efficient service to our community. Moreover, we are dedicated to providing a safe workplace for our employees.

In order to meet this goal, we hereby endorse the Federal Highway Administration substance abuse regulations. We will provide training, education and other assistance to all employees driving school vehicles. Drug testing, in compliance with DOT regulations, is an integral part of our program. Non-compliance with this policy or violation of the regulations may result in severe disciplinary action including suspension or dismissal.

EMPLOYEE ASSISTANCE PROGRAM

Remarkable Solutions Inc. has established an Employee Assistance Program (EAP) which includes education and training for drivers, supervisors and company officials about controlled substances and alcohol.

The training program will cover the effects of controlled substance use on personal health, safety and the work environment. Manifestations and behavioral changes that may indicate controlled substance use and abuse will also be addressed. Documentation of these training sessions will be maintained.

PROHIBITIONS

No driver shall report for duty within 4 hours of consuming alcohol.

No driver shall use alcohol while on-duty.

No driver shall be on duty while having an alcohol concentration of 0.04 or greater.

No driver shall be on duty or operate a commercial motor vehicle while the driver possesses alcohol, unless the alcohol is manifested and transported as part of a shipment

No driver shall use alcohol for eight hours following an accident, or until he/she undergoes a post-accident alcohol test, whichever occurs first.

No driver shall use controlled substances, except when pursuant to the instructions of a physician who has advised the employee that such use will not adversely affect the employee's ability to safely operate a commercial motor vehicle.

DRUG AND ALCOHOL TESTING PROGRAM

This policy applies to all those drivers requiring commercial driver's license as defined by the Department of Transportation Title 49 Code of Federal Regulations part 383.5., as well as, all drivers driving commercial motor vehicles that do not require a commercial driver's license.

Types of tests

Drug testing for marijuana, cocaine, opiates, amphetamines and PCP will be performed on urine specimens. Alcohol testing will be performed by means of breath testing devices approved by the National Highway Traffic Safety Administration. Testing procedures will comply with Federal Motor Carrier regulations 49 CFR Part 40. Individual test reports will be maintained in each employee's confidential file.

Six types of drug and alcohol tests are required under federal regulations: pre-employment, random, reasonable cause, return to duty, follow-up and post-accident. In addition, testing may be done as part of the periodic physical exam.

- 1. All applicants for employment will submit to drug testing only.**
- 2. Throughout the year, drivers are subject to unannounced testing on a random basis. The total number of random drug tests will equal or exceed 50% of the average number of commercial motor vehicle employee positions for which testing is required. The minimum alcohol-testing rate will be 10%. Since drivers are chosen at random throughout the year, each individual driver may not be tested or may be tested once, twice or more in a given year.**
- 3. A driver shall submit to testing, upon reasonable cause, when requested to do so by the Municipal. A supervisor or school official must directly observe conduct, triggering the testing. The supervisor making this determination must have received training in the identification of behavior indicative of use of a controlled substance. Documentation of the employee's conduct shall be prepared and signed by the witness within 24 hours.**
- 4. If a driver who violates this policy is allowed to return to duty, a test will be conducted prior to the performance of a safety-sensitive function. In addition, the employee will be subject to unannounced follow-up testing. The frequency of such tests will be prescribed by a substance abuse professional and will consist of a minimum of 6 tests in the first 12 months following the employee's return to duty.**

5. The driver will test for alcohol and drugs as soon as possible after an accident, if the employee receives a citation for a moving traffic violation related to the accident or there is a fatality. The alcohol test should be performed within 2 hours of the accident. If not tested within 2 hours, the employee may be tested for alcohol up to 8 hours following the accident. The drug test will be performed within 32 hours of the accident.

Procedures for drug tests

Drug testing is done by means of urine collection and analysis. The specimen will be collected by trained personnel in accordance with DOT regulations. The specimen is divided into 2 separate containers (the primary sample and the split sample) and sealed in a tamper-evident container and shipped to a SAMHSA-certified lab for testing. Laboratory test results are reported to the medical review officer (MRO). Before reporting a positive test to the employer, the MRO will attempt to contact the employee to discuss the test results. If the MRO is unable to contact the employee directly, the MRO will contact the employer's Drug Program Administrator who will contact the employee. If no legitimate explanation for the positive test is found, the MRO will report the test as positive. If there is a valid explanation for the positive test other than illegal drug use, the MRO will report the test as negative. A test showing the presence of a medication, which the employee has used in accordance with a valid prescription, will be considered a negative test.

In the event of a positive drug test, the employee has the right to request that the split sample be sent to a different certified lab for testing. This request must be made within 72 hours of the time the employee was informed of the results by the MRO. The

cost of the split performed will be at the driver's expense.

Procedures for alcohol tests

Certified breath alcohol technicians will perform these tests using evidential breath testing devices. If the test shows a result less than 0.02, the test is considered negative. If the alcohol concentration is 0.02 or greater, a confirmation test must be conducted. The confirmation test will be performed fifteen minutes after the initial test and the results of this test determine what actions will be taken.

CONSEQUENCES OF A POSITIVE TEST

1. Applicants for employment who test positive for drugs will not be hired.
2. Any driver who tests positive for alcohol at a level of 0.04 or higher or who tests positive for drugs will be removed from service, placed on unpaid leave of absence and be referred to a substance abuse professional (SAP). The SAP will determine what treatment the driver needs in resolving the problem.
3. If a driver tests positive for alcohol and the test result is between 0.02 and 0.04, the driver must be removed from driving or performing safety-sensitive duties for 24 hours. The driver must undergo an alcohol test with a negative result before returning to duty. No other action will be taken against the driver based solely on test results showing an alcohol concentration less than 0.04.

CONSEQUENCES OF REFUSING A DRUG OR ALCOHOL TEST

The consequences of refusing a test are the same as testing positive.

REHABILITATION

In order to be eligible to return to duty after a positive drug test or an alcohol level of 0.04 or higher, a driver must complete the course of rehabilitation prescribed by the substance abuse professional and undergo a return-to-duty test with a negative result. After returning to work, the driver must continue in an after-care program and be subject to follow-up testing. If any follow-up test is verified positive for drugs or alcohol (0.04 or higher), the driver's employment will be terminated.

The costs of evaluation, rehabilitation and return-to-duty tests are the responsibility of the driver. The company will pay for follow-up tests. Furthermore, the company does not guarantee that a driver will be re-hired after completing rehabilitation.

DESIGNATED EMPLOYEE REPRESENTATIVE (DER)

The designated employee representative to whom all questions concerning questions about this policy is Avi Turgeman, Safety Director.

Records Completion & Retention

Record	Completion	Retention Period
Driver's Employment Application	Prior To Driving A CMV	3 Years after Employee's Departure
Safety Performance History	Within 30 Days of Hiring	3 Years after Employee's Departure
Road Test Certification (Non CDL)	Prior To Driving A CMV	3 Years after Employee's Departure
Original MVR (Abstract)	Within 30 Days of Hiring	3 Years after Employee's Departure
Annual Record of Violations	Every 12 Months	3 Years
Annual MVR (Abstract)	Every 12 Months	3 Years
Annual Driver Certification	Every 12 Months	3 Years
Driver Medical Certification	Every 24 Months	3 Years
Hours of Service Records	Daily	6 Months
Driver's Daily Log Sheets	Daily	6 Months
CMV Maintenance Files	Any Repair or Maintenance	1 Year and/or 6 Months after Vehicle Departure
Driver Vehicle Inspection Reports	Daily – At the End of Tour of Duty	3 Months
Pre Employment Drug Test	Prior to Driving a CMV	5 Years
Drug & Alcohol Policy	At Time of Hiring	5 Years
Drug & Alcohol Records	Pre Employ & Random	5 Years
Roadside Inspection Reports	Within 15 Days of Inspection	1 Year
Accident Register	Upon Notification	1 Year