



**DAVID A SHEFFER**  
Principal

3601 N. Progress Ave., Suite 202  
Harrisburg, PA 17110  
717.763.9890 • Tel

dsheffer@ausconsultants.com

October 15, 2021

Pennsylvania Public Utility Commission  
Secretary  
Commonwealth Keystone Building  
400 North Street, 2<sup>nd</sup> Floor Room 01  
Harrisburg, PA 17120

RE: Utility Valuation Expert Approved Application  
Change of Address  
Docket # ~~M-2016-2542193~~

Dear Secretary,

A-2016-2566251-AEL-10/25/21

Please find attached AUS Consultants' change of address for the **approved** Utility Valuation Expert Application filed for the 2021 year.

Should the Commission have any questions or require additional information, please contact Sue Macchia 717-503-9238 or by email [smacchia@ausconsultants.com](mailto:smacchia@ausconsultants.com).

Respectfully submitted,  
AUS Consultants

A handwritten signature in black ink that reads 'D.A. Sheffer'.

BY: DAVID A. SHEFFER



BEFORE THE  
PENNSYLVANIA PUBLIC UTILITY COMMISSION

In Re: Application of AUS Consultants Inc.  
to register as an Utility Valuation Expert (UVE) in the  
Commonwealth of Pennsylvania

Docket No: M-2016-2543193

Check one:

Fee:  \$125 fee enclosed

Initial Application

Renewal Application

1. Legal Name of the Applicant: AUS Consultants, Inc.

Attach proof of compliance with appropriate Pennsylvania Department of State filing requirements.<sup>1</sup>

2. Trade or Commercial or Fictitious Names Used by Applicant (d/b/a):

Check this box if the Applicant will not be using a fictitious name.

Check this box if the Applicant will be using a fictitious name or using a d/b/a (doing business as) another name and identify names below. If more space is needed, list names on the back of this page or append list to completed application.

3. Applicant Address:

Street Name & Number: 6059 Allentown Blvd. #306 3601 North Progress Ave. Ste 202

Post Office Box: \_\_\_\_\_

City: Harrisburg

State: PA

Zip Code: 17112 17110

Telephone Number: 717-763-9890

Email Address: Dsheffer@ausconsultants.com

Website Address: www.ausinc.com

<sup>1</sup> A copy of any document from the Pennsylvania Department of State (Pa. Dept. of State) documenting the Applicant's Pa. Dept. of State entity number is adequate. However, the document must indicate that the Applicant's Pa. Dept. of State registration is "active." Certified copies of Pa. Dept. of State documents are not required.

**Application for Registration as a Utility Valuation Expert (UVE)**

4. Point of Contact for this Application:<sup>2</sup>

Name: David Sheffer  
 Title: Principal  
*Complete the following if different than above:*  
 Street Name & Number: \_\_\_\_\_  
 Post Office Box: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip code: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Email address: \_\_\_\_\_

5. Parent & Subsidiary Companies & Affiliates:

*Parent Name and Contact Information.* Provide name and contact information for parent company. Check box if any parent company is currently doing business in Pennsylvania as a UVE or WWDC. If none, do not check the box; insert NONE below.

Parent Name: AUS, Inc.  
 Street Name & Number: 155 Gaither Drive, Suite A  
 Post Office Box: \_\_\_\_\_  
 City: Mount Laurel  
 State: NJ  
 Zip Code: 08054  
 Telephone Number: 856-234-9200  
 Email Address: [pvalentine@ausinc.com](mailto:pvalentine@ausinc.com)  
 Website Address: [www.ausinc.com](http://www.ausinc.com)

*Subsidiaries and Contact Information.* Provide name and contact information for all subsidiary companies. Check this box if any subsidiary is currently doing business in Pennsylvania as a UVE or WWDC. If none, do not check the box; insert NONE below.

Subsidiary Name: AUS Marketing Research System, Inc.  
 Street Name & Number: 53 West Baltimore Pike  
 Post Office Box: \_\_\_\_\_  
 City: Media  
 State: PA  
 Zip Code: 19063  
 Telephone Number: 484-840-4300  
 Email Address: [pvalentine@ausinc.com](mailto:pvalentine@ausinc.com)  
 Website Address: [www.SSRS.com](http://www.SSRS.com)

(Copy above information and paste on separate sheet as necessary for additional Subsidiaries)

<sup>2</sup> PLEASE NOTE: Upon approval of this application, this Contact Information will be listed on the Commission’s UVE Registry.

**Application for Registration as a Utility Valuation Expert (UVE)**

*Affiliates and Contact Information.* Provide name and contact information for all affiliated companies. Check box if any affiliate is currently doing business in Pennsylvania as a UVE or WWDC. If none, do not check the box; insert NONE below.

Affiliate Name: NONE  
 Street Name & Number: \_\_\_\_\_  
 Post Office Box: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

(Copy above information and paste on separate sheet as necessary for additional Affiliates)

6. **Contracts & Business Partnerships:**

Check box if Applicant intends to or has operated under contract with or has partnered with an WWDC within the past five (5) years. Otherwise, insert NONE here: \_NONE\_.

Check box if Applicant intends to or has operated under contract, subcontracted or partnered with a UVE within the past five (5) years. Otherwise, insert NONE here: \_NONE\_\_\_\_\_.

**If applicable, provide name(s) of WWDC(s) and UVE(s) and contact information for each and briefly describe the nature of business services associated with each contract and/or partnership. Attach additional pages as needed.**

---



---



---

7. Identify principal officers (i.e., owners, executives, partners and/or directors, etc.), as appropriate for Applicant’s organizational structure. Provide an organizational chart and the names, titles, business addresses and telephone numbers for each office.

See Attachments #1-3 for Directors & Officers of AUS, Inc.  
 AUS Consultants, Inc. and AUS Marketing Research System, Inc.

---



---

8. Attach to this Application a brief biography or single page professional resume for all principal officers and management directly responsible for Applicant’s operations.

See Attachment “A”

9. Provide Applicant’s Federal Employer Identification No. (EIN): \_\_22-1943906\_\_\_\_\_

**Application for Registration as a Utility Valuation Expert (UVE)**

10. Registered Agent

a. If the Applicant does not maintain a principal office in the Commonwealth, the Applicant is required by the Pennsylvania Department of State to designate an approved Registered Agent as its representative in the Commonwealth. Check one of the boxes below, as applicable:

YES, the Applicant has registered its business with the Pennsylvania Department of State. Following is the Name and Contact information for the Applicant’s Registered Agent approved by the Pennsylvania Department of State.

Registered Agent: Jerry J. Reilly

Street Name & Number: 155 Gaither Drive, Suite A

Post Office Box: \_\_\_\_\_

City: Mount Laurel

State: NJ

Zip Code: 08054

Main Telephone Number: 856-234-9200

Email Address: [pvalentine@ausinc.com](mailto:pvalentine@ausinc.com)

Website Address: [www.ausinc.com](http://www.ausinc.com)

NO, the Applicant has not registered its business with the Pennsylvania Department of State.



b. Applicant has registered its business with the Pennsylvania Department of State. Please check appropriate registration type for Applicant as designated with the Department.

- Sole proprietor
- Domestic corporation (none)
- Domestic general partnership
- Domestic limited liability company
- Domestic limited liability partnership
- Foreign corporation
- Foreign general or limited partnership
- Foreign limited liability company
- Foreign limited liability general partnership
- Foreign limited liability limited partnership

See Attachments # 4 & 5

**Application for Registration as a Utility Valuation Expert (UVE)**

c. If Applicant is not domiciled in the Commonwealth of Pennsylvania and is registered as a "foreign" entity as identified above, please identify all other states where applicant is registered and name the appropriate state department(s):

See Attachment #5

11. Technical Fitness

Attach to this Application a copy of any certification(s) or similar documentation that would demonstrate the technical fitness of Applicant, such as professional licenses, technical certifications, and/or names of current or past clients with a description of dates and types of services provided by Applicant.

See Attachment "B"

12. Falsification

The Applicant understands that the making of false statement(s) herein may be grounds for denying the Application, or if later discovered, for revoking any authority granted pursuant to the Application. This Application is subject to 18 Pa. C.S. §§4903 and 4904, relating to perjury and falsification in official matters.

Signature of Principal Official:  \_\_\_\_\_

Official's Name & Title : David Sheffer - Principal  
(Please Print)

Date: Dec. 10, 2020

**Application for Registration as a Utility Valuation Expert (UVE)**

APPENDIX A

**AFFIDAVIT**

[Commonwealth/State] of Pennsylvania \_\_\_\_\_ :  
County of Dauphin \_\_\_\_\_ : SS.

David Sheffer \_\_\_\_\_, Affiant, being duly sworn or affirmed according to law, deposes and says that:

Affiant is the Principal \_\_\_\_\_ (Office of Affiant) of AUS Consultants, Inc. \_\_\_\_\_ (Name of Applicant);

That Affiant is authorized to and does make this affidavit for said Applicant;

That AUS Consultants, Inc. \_\_\_\_\_, the Applicant herein, has the burden of producing information and supporting documentation demonstrating technical fitness to be registered as a Utility Valuation Expert pursuant to Section 1329. 66 Pa. C.S. § 1329.

That AUS Consultants, Inc. \_\_\_\_\_, the Applicant herein, acknowledges that it has answered the questions on the application correctly, truthfully and completely and has provided supporting documentation as required.

That AUS Consultants, Inc. \_\_\_\_\_, the Applicant herein, acknowledges that it is under a duty to update information provided in answer to questions on this application and contained in supporting documents.

That AUS Consultants, Inc. \_\_\_\_\_, the Applicant herein, verifies that neither the UVE nor the UVE's firm, including affiliates, have a conflict of interest that would compromise, or have the appearance of compromising, the UVE's professional judgement and ability to perform the valuation in an unbiased manner.

That the facts above set forth are true and correct to the best of Affiant's knowledge, information, and belief, and that Affiant expects said Applicant to be able to prove the same at hearing.

  
\_\_\_\_\_  
Signature of Affiant

Sworn and subscribed before me this 10<sup>th</sup> day of Dec, 2020.

Patty Wachter  
\_\_\_\_\_  
Signature of official administering oath

My commission expires: Dec 11 / 2021 \_\_\_\_\_.

