

**APPLICATIONS FOR RENEWAL OR UPDATE
OF
CONSERVATION SERVICE PROVIDER (CSP) REGISTRATION**

Instructions: One of the following applications may be used by a registered Conservation Service Provider (CSP) to renew or update CSP Registration as follows:

I am renewing my CSP Registration according to the normal two year renewal cycle and have no changes to my prior application – Use the *Application for Renewal of CSP Registration – No Changes Incurred to Application of Record*. This application should be used when there are NO CHANGES to the CSP Application of record. The filing fee for renewal is \$25.

I am renewing my CSP Registration according to the normal two year renewal cycle and have changes to my prior application – Use the *Application for Renewal of CSP Registration – Changes Incurred to Application of Record*. This application should be used when there are one or more CHANGES to the CSP Application of record. The Applicant is also required to submit a newly completed CSP Application. The filing fee for renewal is \$25.

I am updating my CSP Registration information prior to my next required renewal – Use the *Application to Update CSP Registration*. This application should be used by a currently approved, registered CSP in order to update one or more items of the CSP Application of record. The Applicant is also required to submit a newly completed CSP Application. There is no filing fee to update CSP Registration information of record.

In all three cases listed above, the registered CSP is required to conduct a thorough review of the individual items, parts and subparts of the Applicant's CSP Application of record, which may be obtained by searching the Pennsylvania Public Utility Commission (PUC) website at www.puc.pa.gov.

- *Double click "Search Documents" located on the upper right-hand corner of the PUC website.*
- *Type the last seven (7) digits of your PUC Docket No. for "Docket No."*
- *Click button labeled "Search."*

An entity that uses one of the three applications to renew CSP Registration or to update CSP Registration information, shall be held accountable for identifying each and every item that has changed or contains information that has changed relating to the Commission-approved Application currently on file at the Commission.

File a signed and verified original and one copy of the completed application along with any attachments in person or by first class mail, with your check (if applicable) to the following address:

Filing in person:

Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, PA 17120

Filing by first-class Mail:

Secretary
Pennsylvania Public Utility Commission
P. O. Box 3265
Harrisburg, PA 17105-3265

**APPLICATION FOR RENEWAL OF CSP REGISTRATION
NO CHANGES INCURRED TO APPLICATION OF RECORD**

Applicant (Company) Name and Docket No.:

Key Recycling LLC A-2016-2539561

Contact Information (name, address, phone number and email of person filing application):

Keith Yancheck

1234 N State Street Pottstown, PA 19464

484-369-1217

Key Recycling LLC @ Gmail.com

On behalf of the Applicant I am filing with the Commission this Application for Renewal of CSP Registration. There are NO CHANGES to the Applicant's CSP Application of record on file at the Commission at the Docket Number as indicated herein.

I have reviewed the Applicant's CSP Application of record and no information contained therein has changed. Furthermore, no compliance issues have occurred relating to the Applicant's CSP Application of record regarding responses to Questions 4.a - 4.d. Enclosed are the following items:

- a. Attachment providing all information relating to "Identity of the Applicant," pursuant to Question Nos. 1(a)-1(j) of the CSP Application;
- b. Renewal application fee of \$25;
- c. Affidavit, attesting to the truth and knowledge of these facts; and
- d. Proof of current liability insurance coverage.

Keith Yancheck President

Name and Title of person authorized by Applicant to file this Application

Signature

Keith Yancheck

3/23/22
Date

The Applicant understands that the making of false statement(s) herein may be grounds for denying the Application for Renewal of Conservation Service Provider Registration, 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.



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Order Business Documents

Date: 03/22/2022

Business Name History

Name	Name Type
Key Recycling, LLC	Current Name

Business Entity Details

Officers

Name	Key Recycling, LLC
Entity Number	4183682
Entity Type	Limited Liability Company
Status	Active
Citizenship	Domestic
Entity Creation Date	04/11/2013
Effective Date	04/11/2013
State Of Inc	PA
Address	1234 State Street Pottstown PA 19464 Montgomery

Filed Documents

The information presented below is for your reference. To place an order you will need to log in. If you do not have a PENN File account, you may register for an account by clicking here ([/Account/Register_account](#)).

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/16/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Thomas McKee Insurance Agency, Ltd 1001 E. Darby Rd, Suite 205 Havertown, PA 19083 License #: 685460	CONTACT NAME: Shaun McKee PHONE (A/C, No, Ext): (484)451-8883 E-MAIL ADDRESS: shaun@mckeeinsures.com	FAX (A/C, No): (484)451-8889
	INSURER(S) AFFORDING COVERAGE	
INSURED KEY RECYCLING LLC 1234 N. STATE ST POTTSTOWN, PA 19464	INSURER A: AmGuard Insurance Co 42390	
	INSURER B: Evanston Insurance Company	
	INSURER C: American Interstate Insurance Company 31895	
	INSURER D: ACE FIRE UNDERWRITERS INSURANCE COMPANY 20702	
	INSURER E: StarStone Insurance Co	
INSURER F:		NAIC #

COVERAGES

CERTIFICATE NUMBER: 00001090-359613

REVISION NUMBER: 2

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			KEBP990739	05/01/2021	05/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			EZXS3032860	05/01/2021	05/01/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N <input type="checkbox"/> N/A	AVWCPA2992112021	05/01/2021	05/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Cyber Liability			D9618086A	06/03/2021	06/03/2022	1,000,000
E				77286F210ALI	06/03/2022	06/03/2023	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Certificate Holder is listed as additional insured as required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

General Electric Appliances
 4000 Buechel Bank Rd.
 Louisville, KY 40225

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

(SJM)

AFFIDAVIT

[Commonwealth/State] of Pennsylvania :

: ss.

County of Philadelphia :

Keith Evan Yonchek Jr., Affiant, being duly [sworn/affirmed] according to law, deposes and says that:

[He/she is the Keith Yonchek President (Office of Affiant) of Key Recycling LLC (Name of Applicant);]

[That he/she is authorized to and does make this affidavit for said Applicant;]

That the Applicant herein Key Recycling LLC has the burden of producing information and supporting documentation demonstrating its technical and financial fitness to be registered as a conservation service provider pursuant to Act 129 of 2008.

That the Applicant herein Key Recycling LLC acknowledges that it has answered the questions on the application correctly, truthfully and completely and has provided supporting documentation as required.

That the Applicant herein Key Recycling LLC acknowledges that it is under a duty to update information provided in answer to questions on this application and contained in supporting documents.

That the Applicant herein Key Recycling LLC acknowledges that it is under a duty to supplement information provided in answer to questions on this application and contained in supporting documents as requested by the Commission.

That the facts above set forth are true and correct to the best of his/her knowledge, information, and belief, and that he/she expects said Applicant to be able to prove the same at hearing.

[Signature]
Signature of Affiant

Sworn and subscribed before me this 25 day of MARCH, 2022.

[Signature]
Signature of official administering oath

Commonwealth of Pennsylvania - Notary Seal
Alla Silverstone, Notary Public
Philadelphia County
My commission expires November 11, 2023
Commission number 1360380

My commission expires: 11/11/2023