

## APPLICATION CHECKLIST

### Motor Common Carrier or Motor Contract Carrier Of Household Goods in Use

Use this checklist to make sure you have enclosed all required items or your application will not be processed. You cannot operate in Pennsylvania until you receive a Certificate of Public Convenience from the Commission.

- The original Application with original signatures (unless e-Filed with the Commission's online e-Filing system at [www.puc.pa.gov](http://www.puc.pa.gov) )
- Applicant's Verified Statement.
- A certified check, money order, or check from your attorney for \$350 made payable to "Commonwealth of Pennsylvania;"
- Application is being made as an individual or sole proprietor.
- IF application is being filed by a Partnership, provide a list of the names and addresses of ALL partners.
- IF application is being filed by a Limited Partnership, provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Limited Liability Partnership, provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Limited Liability Company, provide a list of the names and addresses of ALL members and the Title of each member, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Corporation for Profit, provide a list of ALL corporate officers and titles, the name of each shareholder, distribution of shares, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Corporation Non-Profit, provide a list of ALL corporate officers and titles and those serving on the Board of Directors, and your PA Corporation Bureau Entity ID Number.

**ALL Parties to proceedings pending before the Commission must open and use an e-filing account through the Commission's website, OR you may submit your filing by overnight delivery. If a filing contains confidential or proprietary material, the filing is required to be submitted by overnight delivery.**

**If not e-Filed, mail your application and attachments to: SECRETARY PA PUBLIC UTILITY COMMISSION, 400 NORTH STREET, 2<sup>ND</sup> FLOOR, HARRISBURG, PA 17120**

Corporate entities (corporations, LPs, LLPs, and LLCs) and fictitious trade names must be registered with the PA Department of State. Companies incorporated in other states must register as a foreign business corporation. Individuals acting as sole proprietors and partnerships do not have to register.

If you are not registered with the PA Department of State, you can apply at its website at [www.dos.state.pa.us/corps](http://www.dos.state.pa.us/corps) on how to do business in Pennsylvania as:

PA Corporations (Profit and Non-Profit) – apply for Articles of Incorporation

Foreign Corporations – apply for a Certificate of Authority

PA Limited Partnerships (LPs), Limited Liability Partnerships (LLPs), and Limited Liability Companies (LLCs) – apply for an Application of Registration

Fictitious Name Registration – File ONLY IF Trade Name will be different than the business name you register with the PA Department of State.

## **General Information for Preparing and Filing the Application for Motor Common/ Contract Carrier of Household Goods in Use.**

1. 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.
2. Upon approval of the application, you will be notified that prior to providing service in Pennsylvania you must submit evidence of insurance to the Public Utility Commission. Your permanent evidence of insurance will be a Form E for bodily injury and property damage insurance. This form is mailed to the Commission directly from the home office of your insurance carrier. The name and address on your Form E must exactly match the name and address you have provided on your application. Your insurance company must subscribe to the NIC Insurance Filing website at [www.nicinsurancefilings.com](http://www.nicinsurancefilings.com). You will request the insurance company (not the agent) to file the required insurance forms electronically through NIC. Mailed insurance forms are no longer acceptable. The minimum limits of insurance are as follows:

Bodily Injury - The liability of the insurance company on each motor vehicle operated in common or contract carrier service shall be in amounts not less than \$300,000 per accident for a vehicle with a manufacturer's gross vehicle weight rating of 10,000 pounds or less, in the case of a single vehicle, or a manufacturer's gross combination weight rating of 10,000 pounds or less, in the case of an articulated vehicle. The liability of the insurance company on each motor vehicle operated in common or contract carrier service shall be in amounts not less than \$750,000 per accident for a vehicle with a manufacturer's gross vehicle weight rating over 10,000 pounds, in the case of a single vehicle, or a manufacturer's gross combination weight rating over 10,000 pounds, in the case of an articulated vehicle. Insurance coverage of motor carriers of household goods shall meet the requirements of 75 PA C.S. §1711 (relating to required benefits).

Cargo - \$5,000 for loss or damage to cargo being transported.

## 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)

Roadrunner Moving 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)

Roadrunner Moving

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** \_\_\_\_\_ 87-4236188

(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).**

Michael Wojcik	President	3173 Aramingo Avenue Philadelphia, PA 19134
Andrew Mirande	CMO	320 Daly Street Philadelphia, PA 19148
Isaac Jaeggi	CFO	868 Mercer Street Philadelphia, PA 19125

6. **Mailing Address**

3173 Aramingo Avenue  
 Street Address

Philadelphia, PA 19134 Philadelphia  
 City, State and Zip Code County

908-839-6446 roadrunnermovingphl@gmail.com  
 Telephone Number E-Mail Address

*This is the e-mail address to which the Commission will send all official documents issued by the Commission until further notice.*

7. **Physical Address** (if different from Mailing Address. Do not use a PO Box.)

Street Address

City, State and Zip Code County

Telephone Number E-Mail Address

The address entered here should reflect the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment. If left blank, it will be assumed that the **PHYSICAL ADDRESS** is the same as the **MAILING ADDRESS**

8. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address E-mail 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. 3838760

10. **Describe the service area proposed by this application.**

(Use the space below or attach additional sheet if space provided is not sufficient).

To transport household goods in use between points in Pennsylvania.

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*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.

Michael Wojcik

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(Print Name)

*M Wojcik*

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(Signature)

5/5/22

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(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.

Roadrunner Moving LLC			
<b>Legal Name of Applicant</b>			
Roadrunner Moving			
<b>Trade Name, if any</b>			
3173 Aramingo Avenue	Philadelphia	PA	19134
<b>Street Address (principal place of business)</b>	<b>City or Municipality</b>	<b>State</b>	<b>Zip Code</b>

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.

Michael Wojcik will be making the verified statement.

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

- I, Michael Wojcik am the President of Roadrunner Moving LLC and am not affiliated with any other carrier.

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-).

- I have worked in the household carrier business for 7 years with Old City Movers LLC located in Philadelphia, PA. I have tax returns and payroll stubs as proof for this.

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.

- We have an office with a printer, computer and phone. We rent a secure parking lot in a storage facility to house vehicles, and the option for customers to easily access a storage unit if they choose. Our communication is done mostly over email so that a clear line of communication can be established when booking jobs. We also plan to communicate with our drivers and crews over the phone throughout the day and dispatch them where they need to go. Every job will have a bill of lading and an inventory of items to be moved that will be filled out by the customer prior to the start of the job. Customers will request services on our website by filling out an estimate form, which will go to our email inbox. We will then provide an estimate and if they agree, we confirm the job and add it to our schedule. Records will be organized and filed in our office for PUC as well as all normal business records.

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. We do not intend to hire any drivers. We intend to have the owners of Roadrunner exclusively to drive the trucks. For our size operation and the territory we cover, we will not need more than 3 drivers at any given time. As owners, we have a combined 15 years experience driving box trucks. In addition, we all have up to date Commercial Driver Medical Certifications as well as clean driving records.

b. We will conduct criminal background checks through an independent third party service.

c. When we want to train a new driver, they will have to obtain a medical examiners certificate. Then that new trainee will have to be taught in a controlled environment by the owners/supervisors.

d. Each driver will have to provide us with a copy of their valid drivers license and medical examiners certificate.

e. Our drivers are prohibited from any alcohol or drug use and will be fired immediately if they do. Our drivers will not be operating any vehicles over 26,000 GVW.

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.

<b>YEAR</b>	<b>MAKE</b>	<b>MODEL</b>	<b>SEATING CAPACITY*</b>	<b>VEHICLE ID #</b>	<b>MILEAGE</b>
2019-2022	Penske	16 FT SAG LGHT HICUBE	3	91612756	45,705

- The box truck we intend to use will be a rental. The rental companies will have the responsibility of making sure all trucks rented to us are up to date on inspection and complying with applicable Pennsylvania vehicle equipment standards.

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).

- We plan to rent trucks on a per job basis. All of the responsibility for maintenance will be to the rental company (Penske) in this case.



CUSTOMER COPY



24/7 Roadside Assistance:  
1-800-526-0798

# Rental Agreement Cover Sheet

Rental Agreement #:84503819

Created by: M.BARONE  
Completed by: M.BARONE  
Entered At: 7810-10  
Status: COMPLETED

COMMERCIAL LOCAL

Pick Up Date: 05/04/22 07:29 AM  
Expected Drop-Off: 05/06/22 07:29 AM  
Actual Drop-Off: 05/05/22 06:54 AM  
End Bill Date 05/05/22 06:54 AM

### CUSTOMER INFORMATION

Acct: 36R02000 - 7810  
ROADRUNNER MOVING  
3173 ARAMINGO AVE  
PHILADELPHIA, PA 19134-4421 USA  
Day (908) 396-6446

### PICK UP/DROP OFF LOCATION

PENSKE CENTRAL PHILADELP (7810-10)  
2215 E WESTMORELAND ST  
PHILADELPHIA, PA 19134 USA  
Voice (215) 425-8855  
Fax (215) 425-4865

DRIVER NAME(S): MICHAEL WOJCIK

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

### UNIT INFORMATION

Unit #:91612756  
1315 - 16FT SAG LIGHT HICUBE  
License #: 3187999  
License State: IN  
License Exp: 01/31/2023  
Owning Location: 7810-10

Max. Payload: 4,425 lbs.  
Height: 10 ft.6 in.

Rented With Damage: NO  
Returned With Damage: YES  
Mileage Out: 45,435  
Mileage In: 45,705  
Unleaded Fuel Out: FULL  
Unleaded Fuel In: FULL

Customer shall be responsible for all tolls incurred in the operation of the Vehicle, whether or not the provided transponder is used.

NO HAZARDOUS MATERIAL BEING TRANSPORTED

### OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility	*ACCEPTED*
Rates: \$1,061.66/Month \$245.00/Week	\$35.00/Day
Limited Damage Waiver/LDW \$2,000 Responsibility	*DECLINED*
Limited Damage Waiver/LDW \$5000 Responsibility	*DECLINED*
Liability Coverage/LIABILITY ACCIDENT INSURANCE	*PENSKE PROVIDES*
Rates: \$758.33/Month \$175.00/Week	\$25.00/Day
Supplemental Liability	*DECLINED*

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THIS PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

**Statement of Financial Position (Balance Sheet)**

**As of (date) 5/5/2022**

**(Must be less than 6 months old)**

ASSETS

Current Assets			
Cash	\$2,425		
Other Current Assets (specify)			
Total Current Assets			<u>\$2,425</u>
Tangible Assets			
Motor Vehicle Equipment			
Property (buildings, land, etc.)			
Office Equipment			<u>\$4,000</u>
	<b>TOTAL ASSETS</b>		<u><b>\$6,425</b></u>

LIABILITIES

Current Liabilities (Due within one year of date)			
Loans			
Credit cards/revolving credit	\$1,002.51		
Other Liabilities (Attach schedule)	\$3,828 Insurance		
Total Current Liabilities			<u>\$4,830.51</u>
Long Term Liabilities (Due after one year of date)			
Mortgage			
Long term commercial loan			
Other Liabilities (Attach Schedule)			
Total Long-Term Liabilities			
	<b>TOTAL LIABILITIES</b>		<u><b>\$4,830.51</b></u>