

US Dot- 1185432  
MC# 473527  
EIN- 35-287551

## **APPLICATION CHECKLIST** **Motor Common Carrier of Property**

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) )
- A certified check, money order, or check from your attorney for \$100 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.
- DO NOT SUBMIT AND APPLICATION IF ONE OR MORE OF THE LISTED EXEMPTIONS APPLY.

**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 Carrier of Property.

1. This application is required to request a Certificate of Public Convenience to operate as a commercial carrier of property for compensation between points in Pennsylvania.
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:

The minimum limits of insurance are:

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 property shall meet the requirements of 75 PA C.S. Section 1711.

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

Cargo insurance may be waived if you meet any one of the following criteria:

1. All transportation will be provided in dump trucks.
2. All transportation will be limited to farm products, garbage, ashes, rubbish, coal debris, earth, crushed stone, amesite, and similar construction materials.
3. The value of any one load being transported will not be more than \$500 in value.

If applicant meets one of these three criteria, you may complete a Cargo Waiver available on the Commission's website at [www.puc.pa.gov](http://www.puc.pa.gov) under Online Forms.

## Application for Motor Common Carrier of Property

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE TO OPERATE AS A COMMERCIAL CARRIER OF PROPERTY FOR COMPENSATION BETWEEN POINTS IN PENNSYLVANIA.

1. **Legal Name of Applicant** (Individual, Partnership or Corporation)

Poppa's 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)

\_\_\_\_\_

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 PA PUC Authority?**  NO **Previous Authority?** \_\_\_ NO

**If yes, at PUC No. A-** \_\_\_\_\_

4. **Are you a business entity registered with the PA Department of State?** \_\_\_ NO  
If No, you must first register (see checklist)

**If Yes, provide your PA Corporation Bureau Entity ID Number** 7519584  
(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).**

Single member- LLC                      Kodey Schenck  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Mailing Address**

2055 Eagle Valley Rd  
Street Address  
Beech Creek PA 16822                      Clinton  
City, State and Zip Code                      County  
570-660-0390                      Kodeys98@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 than mailing address. Do not use a post office 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. **Do you have a USDOT Number?**

       No                      X Yes, at No. 1185432

10. **What type of commodities do you intend to transport other than your own? Please note applicable exemptions on pages 4-5.**

Steel, wood, building materials, General Freight, Machinery  
Grain, feed, Hay Agricultural / Farm Supplies

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 Property; 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.

Kodey Schenck  
(Print Name)

Kodey Schenck 6-17-2022  
(Signature) (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).

## ***PUC EXEMPTIONS***

**Agricultural Products** (see exemptions – **farm owners**)

**Anti-skid Materials** in dump trucks (except 5 axle tractor-trailers)

**Ashes** in dump trucks (except 5 axle tractor-trailers)

**Buy and Sell Operation** - own property to purchasers

**Chemical Wood** from wood lots (see **Wood Lot** definition)

**Cooperative Associations** for members on a nonprofit basis

**Excavated Materials** in dump trucks (except 5 axle tractor-trailers) - purpose of excavation is to create a hole or cavity, not valuable soil

**Farm Owner or Operator** - transporting agricultural products from the farm or farm supplies to the farm. This may include independent contractor if hauling exclusively for farm owners (but still must be agricultural products from farm or farm supplies to farm)

NOTE: livestock is agricultural

**Federal Government moves** – Under contract with a federal department or agency

**Free Transportation** - no compensation of any type

**Hazardous Waste** - Flue dust and Electric arc furnace dust

**Incidental** to primary non-transportation business

**Interstate Transportation** - See Federal Highway Administration

**Lessor** - under a vehicle sale lease, where lessor has no responsibility for vehicle maintenance, supervision or control

**Logs** (saw or veneer) from wood lots (see **Wood Lot** definition)

**Motor Vehicles** - wrecked or disabled

must be towed (tow truck, wrecker-type, flatbed, lowboy, etc.)

does not have to be from accident or breakdown

can be from place vehicle was towed to after accident if it's being towed to a place for repairs resulting from accident

replacement vehicles are exempt if to or from accident or breakdown

stolen or repossessed vehicles

NOT INCLUDED salvaged vehicles to and from auctions

**Non-Profit Cooperative Enterprises**

**Private Transportation of Property** by the owner to himself or to purchasers directly from him, in vehicles owned and operated by the owner of the property

**Property** from storage, if in storage 90 days or more

**Pulpwood** from wood lots (see **Wood Lot** definition)

**Railroad** ballast stone is considered a road construction material

**Road Construction Materials:** this does NOT include material for parking lots. Includes stone for railroad ballast, must be to: construction site repair site of road (private, public and stockpile)

**Rubbish** in dump trucks (recycled materials are NOT rubbish)

**Voting Machines** to and from polling place


**Warehoused Merchandise** - transportation to or from warehouse and customer's home or business performed by warehouseman. Tristate hhgs tariff, rule 45(b): a shipment in storage for more than 90 days becomes liability of warehouseman

**Waste** (no value) – DOES NOT include goods for recycling (have value)

**Wood Chips** from wood lots

**Wood Lot Definition** - an area devoted to the growing of forest trees

**PENNSYLVANIA DEPARTMENT OF STATE  
 BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to:		Certificate of Organization Domestic Limited Liability Company  TCO220502JF1587
Name	<u>Legalzoom.com</u>	
Address	<u>c/o PennCorp Servicegroup, Inc.</u>	
City	<u>penncorp2@penncorp.net</u> Zip Code	
<input type="checkbox"/> Return document by email to: <u>163096</u>		

Read all instructions prior to completing. This form may be [www.pennsylvania.gov/corporations](http://www.pennsylvania.gov/corporations)

Fee: \$125       I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 15 Pa.C.S. § 8821 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company is: Poppa's Transport LLC  
*(designator is required, e.g., "company," "limited" or "limited liability company" or any abbreviation thereof)*

2. Complete part (a) or (b) – not both:

(a) The address of this limited liability company's registered office in this Commonwealth is:  
*(post office box alone is not acceptable)*

2055 Eagle Valley Rd., Beech Creek, Pennsylvania 16822, Clinton

Number and Street	City	State	Zip	County
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(b) The name of this limited liability company's commercial registered office provider and county of venue is:

c/o:  
 Name of Commercial Registered Office Provider      County

3. The name of each organizer is *(all organizers must sign on page 2)*:

Cheyenne Moseley, Legalzoom.com, Inc.

4. Effective date of Certificate of Organization *(check, and if appropriate complete, one of the following)*:

The Certificate of Organization shall be effective upon filing in the Department of State.

The Certificate of Organization shall be effective on: \_\_\_\_\_ at \_\_\_\_\_  
 Date (MM/DD/YYYY)      Hour (if any)

DSCB:15-8821-2

**5. Restricted professional companies only.**

*Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).*

The company is a restricted professional company organized to render the following restricted professional service(s):

- Chiropractic
- Dentistry
- Law
- Medicine and surgery
- Optometry
- Osteopathic medicine and surgery
- Podiatric medicine
- Public accounting
- Psychology
- Veterinary medicine

**6. Benefit companies only.**

*Check the box immediately below if the limited liability company is organized as a benefit company:*

This limited liability company shall have the purpose of creating general public benefit.

*Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.*

This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):

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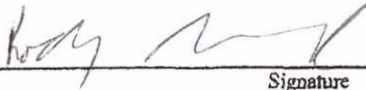
7. For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).

IN TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this

27th day of April, 2022.



Cheyenne Moseley, Organizer, Legalzoom.com, Inc.



Signature

Signature

Date of this notice: 06-03-2002

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Employer Identification Number:  
35-2757551

Form: 99-E

Number of this notice: CP 575 G

POPPAS TRANSPORT  
KODEY A SCHENCK SOLE MBR  
2055 EAGLE VALLEY RD  
BEECH CREEK PA 16822

For assistance you may call us at  
1-800-829-4933

FOR YOUR SERVICE, ANYTIME, ANYWHERE  
CALL US TODAY.

### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

We have assigned you an Employer Identification Number (EIN) 35-2757551. This EIN will identify your entity, including, but not limited to, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please visit [www.irs.gov](http://www.irs.gov).

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

#### IMPORTANT REMINDERS

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.
- \* Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is POPP. You will need to provide this information, along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at [www.irs.gov/forms-pubs](http://www.irs.gov/forms-pubs) or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter. If you do not need to write us, do not complete, and return this stub.

Thank you for your cooperation.