

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)

Ultra Industrial, 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 4198376
(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).**

Adam Goryl

6. **Mailing Address**

2226 Homestead Duquesne Rd
Street Address
West Mifflin PA 15122 USA
City, State and Zip Code County
724-350-2046 Adam@ultrainds.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.)

121 Saint Clair Ave
Street Address
Clairton, PA 15025 USA
City, State and Zip Code County
412-945-3221 Adam@ultrainds.com
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 Yes, at No. 2443579

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

Steel & Aluminum

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.

Adam Goryl

(Print Name)



(Signature)

8/4/22

(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).



8/4/2022

RCVD PUC SEC BUR
AUG 8 2022 AM 10:40

To whom it may concern,

This letter is to inform you that Ultra Industrial, LLC is solely owned by Adam Goryl. As the sole owner he is the only one authorized to sign on the behave of the company.

Respectfully,

Ultra Industrial, LLC

4. *Strike out if inapplicable term*

A member's interest in the company is to be evidenced by a certificate of membership interest.

5. *Strike out if inapplicable:*

Management of the company is vested in a manager or managers.

6. The specified effective date, if any is: _____

month date year hour, if any

7. *Strike out if inapplicable: The company is a restricted professional company organized to render the following restricted professional service(s):*

8. For additional provisions of the certificate, if any, attach an 8 1/2 x 11 sheet.

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

11 day of June, 2013




Signature

Signature

Signature

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return document by mail to: Name Address City State Zip Code	Registration of Fictitious Name DSCB:54-311  TML2207261948
<input checked="" type="checkbox"/> Return document by email to: <u>Adam@ultrainds.com</u>	

Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$70

I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

1. The fictitious name is:
Ultra Industrial, LLC

2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:
Metal Fabrication and equipment repairs

3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable):
121 St. Clair Ave Clairton PA 15025 Allegheny
Number and street City State Zip County

4. The name and address, including number and street, if any, of each individual interested in the business is:

Name	Number and Street	City	State	Zip
<u>Adam Goryl</u>	<u>2226 Homestead Duquesne Rd.</u>	<u>West Mifflin</u>	<u>PA</u>	<u>15122</u>

PA DEPT OF STATE

JUL 25 2022

5. Each entity, other than an individual, interested in such business is (are):




Name	Form of Organization	Organizing Jurisdiction
Principal Office Address		
PA Registered Office, if any		
Name	Form of Organization	Organizing Jurisdiction
Principal Office Address		
PA Registered Office, if any		

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

20th day of July, 2022

 Individual Signature	_____ Individual Signature
 Individual Signature	_____ Individual Signature
Ultra Industrial, LLC Entity Name	_____ Entity Name
 Signature	_____ Signature
President Title	_____ Title

Ultra Industrial, LLC

121 St. Clair Ave.
Clairton, PA 15025



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17120

U.S. POSTAGE PAID
FCM LG ENV
PITTSBURGH, PA
15238
AUG 05, 22
AMOUNT

\$1.68

R2305P150267-50

Secretary PA Public Utility
Commission
400 North Street 2nd Floor
Harrisburg, PA 17120