

DATE OF DEPOSIT

FEB 24 2023

Secretary  
Pennsylvania Public Utility Commission  
400 North Street, Second Floor  
Harrisburg, PA 17120 717.787.3834  
www.puc.pa.gov

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

**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.

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

Cali's Carrier 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.**

• **Trade Name** (Attach a copy of fictitious name registration if applicable)

• Cali's Carrier LLC

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.*

• **Do you currently hold PUC Authority?**  **NO** **Previous Authority?**  **NO**

If YES, at PUC No. A- \_\_\_\_\_

• **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 \_ ~~88-0612949~~  
(See checklist and indicate type of business entity registered) 7450359 (anc)

- If either a Corporation or Limited Liability Company, please list members (LLC) or shareholders and officers (Corporation).

Cameron L. Golding \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Mailing Address

P.O BOX 2

Street Address

Hyde, PA 16843

Clearfield

City, State and Zip Code

County

814-762-3295

caliscarrier@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.*

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

1701 Clarendon Ave

Street Address

Hyde, PA 16843

Clearfield

City, State and Zip Code

County

814-762-3295

caliscarrier@gmail.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 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**

- **Attorney** (if applicable)

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Attorney's Name & Telephone Number for this Filing

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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.

- **Does applicant have a USDOT Number?**

No Yes, at No. 3852750

- **Describe the service area proposed by this application.**  
(Use the space below or attach additional sheet if space provided is not sufficient).

  We plan to transport household goods in use for central Pennsylvania and surrounding areas.

*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.*

- **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.

\_\_\_\_\_ Cameron Lee Golding \_\_\_\_\_  
(Print Name)

 \_\_\_\_\_ 02/20/2023 \_\_\_\_\_  
(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).

## 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.

Cameron Lee  
Golding  
Legal Name of Applicant

Cali's Carrier LLC

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1701 Clarendon Ave	Hyde	PA	16843
Street Address (principal place of business)	City or Municipality	State	Zip Code

The Verified Statement of the Applicant factual details about your proposed transportation service. Your Verified Statement must answer all the items listed below and on the following pages. Provide as much information as possible to prevent delays 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.

Cameron L. Golding / Owner.

2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.  
I Cameron Golding, was employed by Appalachian Movers LLC for five years as their crew leader. (2015-2020)

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 provided 3 years of W-2 tax forms.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, 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 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 currently operate my common carrier entity from a .70-acre lot with a garage and 100sq foot shed located in Hyde, PA. We currently house all our equipment for the moving company here also. To record the

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maintenance records, we will keep paper copies of the maintenance completed on file at the office located in Hyde, PA. We will also be running digital programs through our electronic logging device (ELD). This will help us maintain records of all maintenance past, present and future. Our plans for communication via employer to employee are company paid cell phones, we can also direct message through the ELD devices if necessary. We currently possess one computer to process online inquiries from customers, printer, fax, and copy machines all connected to Wi-Fi network. To file and keep paperwork organized we possess many file folders along with file cabinets to help keep the business paperwork organized. We also have a CPA to help maintain said records (Matt Foster & Associates) that handles our current entities' paperwork.

We plan to receive customer inquiries through social media platforms (Facebook, Yelp and Google). When a potential customer contacts us through these methods we receive a direct message via text, email or a phone call. Once we have fulfilled a customer's wants and needs (estimate) we then schedule a date and time to complete their relocation. Each customer will be scheduled in advance giving us ample time to plan the logistics and too where to dispatch the right equipment/truck to successfully complete the relocation.

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;

Drivers must have five years of clean driving history and a minimum of three years' commercial driving experience.

b. Your system for conducting criminal background checks;

We have an annual membership with truthfinder.com. We supply Truth Finder with the current prospect's personal information. Truth finder then sends a verified report via email/postal mail to confirm the prospects criminal background.

c. Your driver training program;

First each potential driver is required to participate in sixteen hours of pre-trip inspection training. Second sixty hours of passenger seat training.

Third they must apply for a DOT medical card to prove they are physically fit to operate a commercial motor vehicle.

Fourth they will complete one hundred and twenty hours of monitored driving with an experienced commercial driver.

d. Your system for conducting driver license checks:

We process DL checks via . Potential drivers must have five consecutive years clean driving history.

e. Your policies regarding alcohol and drug use by your drivers.

We carry a zero-tolerance policy for drug/alcohol dependence. Every potential employee is mandated to have a drug screening twenty-four hours prior to hire. We currently have an annual membership to D.D.T.A, which is registered with the FMCSA drug consortium.

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>
2010	Ram	1500	5	1DRV1CT6AS199118	150, XXX
2022	Ram	2500	6	3C6UR5HLXNG143227	73, XXX
2021	Wells Cargo	Road force/trailer	16ft	7KA1E1629MP000846	3500
2022	Big Tex	22GN/trailer	40FT	16V3F482XN6203088	62, xxx

We plan to buy one twenty-six-foot moving van to help service our area. We have contacted various local sellers regarding purchasing said truck. I am certain buying one moving van a Along with our current trucks and trailers will accommodate all our future customers' needs. There is a wide selection of truck leasing companies in the area we can utilize if the situation arises.

7. Describe your vehicle safety program. Please include the following in your explanation:  
 f. Your periodic vehicle maintenance plan

We perform routine maintenance on all vehicles every fifteen thousand miles. Starting with routine fluid changes, daily inspections of all components tires, brakes, wipers, filters, steering components and lights just to name a few. We also have a maintenance program set up with a local truck certified inspection station. Our trucks are scheduled every twenty-five thousand miles for a certified mechanic inspection.

- g. Your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

For our vehicle safety, we will conduct daily pre/post-trip inspections on every vehicle being utilized that day. Daily inspections will include but not limited to tire tread depth, brakes, wipers, lights, suspension, fire extinguisher, safety reflectors and spare fuses.

4. Please explain what steps you have taken to determine if you can obtain insurance and pay the required insurance premiums.

We currently carry insurance premiums of \$150,000 motor truck cargo and \$1,500,000 liability through progressive commercial insurance. We contacted our current provider and to increase is an additional \$2,500.00 annually.

5. State whether the applicant has been convicted of a misdemeanor or felony. If the applicant is a partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

YES       NO

I Cameron Golding have misdemeanor charges, these stem from 2011/2012. One is for simple assault, the other is for terroristic threats. I was in a verbal altercation with another individual, when I said I was going to "beat him up" and that is classified as terroristic threats. I was young at the time and can honestly say that I have learned a very valuable lesson from my actions because they still to this day follow me in certain aspects of life where I am trying to better myself.

I also have two felonies, these were from 2015/2016. Both of which are from a minor car accident I was involved in. I recently switched insurance companies about a month prior to my accident. After my accident I thought everything was ok as far as any injuries sustained from the accident, but roughly a week later I started having terrible back issues. I went to the doctor, and they asked normal questions which I answered to the best of my ability and knowledge. Months go by and the DA comes to my house saying I was being charged for attempting to commit insurance fraud. Whenever I filed the paperwork, I wrote down the insurance company I had just switched from previously to my accident. Now the felonies I was charged with was theft by deception and fraud of incomplete insurance claim, both of which I pled guilty to, simply because at the time I had no means to a lawyer to properly fight the case and was scared that going in representing myself would end with me being arrested and I was terrified to lose what little assets I did have at the time. I never collected so much as one cent from the insurance company! I did pay thousands of dollars in medical bills and chiropractor bills out of pocket due to said injury.



6. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining why you believe you have sufficient funds to ensure your transportation business can provide a reliable service to the public in a safe manner.

I have been putting money aside, I also have credit cards and an operational trucking company I operate daily that will 100% back the growth of the moving company. I am prepared to pay for all things that are needed to get this business up and operational in the proper way. I am fully aware there is going to be expenses and running costs to run this business efficiently and safely. As for equipment, we have secured many items in advance. Moving blankets around fifty dozen, dollies, straps, shrink wrap, piano boards and various other tools/equipment used in everyday moving.

### Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.

  
(Signature)

\_\_\_\_\_  
(Date) 2/20/2023

Cameron L. Golding, Owner

\_\_\_\_\_  
(Name and Title, printed or typed)

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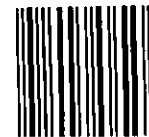
PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

FROM:

Cameron Golding  
P.O. BOX 2  
HYDE, PA 16843



RDC 99



17120

U.S. POSTAGE PAID  
FCM LG ENV  
HYDE, PA  
16843  
FEB 24, 23  
AMOUNT

**\$6.37**

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RECEIVED

FEB 27 2023

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

TO:

PA PUC  
400 N. ST  
2nd. FLOOR  
Harrisburg, PA  
17120.