

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)

Riverfront Moving & Storage, 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)

* see attached * (Attachment #1)

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- 8916074

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 ~~46 3152964~~
(See checklist and indicate type of business entity registered)

Entity ID #4196744-AEL-5/5/23

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

Dante R' Reeves

6. **Mailing Address**

201 Mill St. (Unit 1)
Street Address

Bristol PA. 19007 Bucks
City, State and Zip Code County

(215) 921-0276
Telephone Number

riverfrontmovingandstorage@gmail.com
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.)

N/A
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)

N/A
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. 2630471

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

* Below *

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.

* 10) To transport, as a common carrier, by motor vehicle, household goods in use, from all points in the city and county of Philadelphia, Pennsylvania and from all points in Bucks County, Pennsylvania, south and east of Pennsylvania Route 232 at The Montgomery County Line and extending to Route 332 of Richboro, Pennsylvania, and south of Pennsylvania Route 332 at Richboro, Pennsylvania, and extending to the Delaware River in Yardley, Pennsylvania and vice versa.

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.

Dante Reeves

(Print Name)

Dante Reeves

(Signature)

5-3-23

(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.

Dante' R. Reeves
Legal Name of Applicant

Riverfront Moving & Storage, LLC.
Trade Name, If any

<u>201 Mill St. (Unit 1)</u>	<u>Bristol</u>	<u>PA.</u>	<u>19007</u>
Street Address	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 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.

Dante' R. Reeves, Owner Previous address: 321 Mill St.
201 Mill St. (Unit 1) Bristol, PA. 19007
Bristol, PA 19007
(215) 921-0276

2. List the applicant's affiliation (owner, manager, controls) with another carrier, with the Description of affiliation.

None

3. Describe your business experience, particularly any experience relating to the operation of a transportation service. You may also include an explanation of education or training that you believe may be relevant.

Initially hired as a driver, then worked as a mover for 4 years. Job responsibilities included: running the crew, explaining paperwork, collecting monies due, packing trucks, dealing directly with customers, providing estimates, answering phones, and responding to sales calls to generate business.

Previously worked as a foreman, running the crew for a fencing company.

Previously ran a landscaping company.

Has been running a clean out/removal service since 2008. Found the need existed to provide moving services.

Has been running Riverfront Moving and Storage, LLC. from:
Effective Date: January 16, 2015 – April 25, 2023, when insurance company failed to send updated insurance (which had no lapse in coverage) to the P.U.C.

Previous Certificate of Public Convenience A-2013-2388999

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to include the office area, 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 their 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.

Riverfront's office space is located at 201 Mill Street (previously 321 Mill St.) in the downtown business district of Bristol, Pennsylvania and consists of an office space with a lobby and 2 office workstations, equipped with computers, fax machine, copier, telephone system, electronic schedule/calendar, moving software/CRM, IPAD tablets, file cabinets, calendars, white boards, and push pin boards. Vehicles are parked in a secured, camera surveillance, gated parking lot in close proximity to Mill Street office location. Physical location: 2999 Old Rodgers Rd., Bristol, PA. 19007. The need for a storage facility does not exist at this time.

PUC records will be kept to the standards as set out in the PUC Guidelines and will be maintained on the computer and in a hard copy filing system. Normal business records are currently kept in a digital filing system (CRM- Moving Software) with a backup paper filing system, utilizing an accountant set-up expense and income system. Additionally, a file exists for each job which documents hours, labor, expenses (fuel, tolls). This filing system will eventually be upgraded to a computer filing system utilizing Excel spreadsheets. Daily schedules, etc. are digitally displayed on 65" Flatscreen TV hanging on the office wall for ease of visual access.

Customer requests for moving services come in over the telephone, website, lead generation sites, social media outlets (Facebook/ Instagram), email, and are subsequently dispatched through the office. Crews are assigned specific jobs and meet at the parking lot where trucks are housed and once dispatched must maintain continuous contact with office/owner via required cell phones.

The intended business hours are 8:00 a.m. to 6:00 p.m.

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.

Riverfront will utilize four (4) drivers because at the present time there are four (4) trucks in operation. The four (4) trucks sufficiently service the area and jobs.

In addition, please explain:

5a) Your hiring standards for drivers:

All drivers must have a valid Pennsylvania Driver's License, must be at least 21 years of age, and must have three (3) years of experience driving a truck under 26,000 lbs. All drivers must have a clean driving record. They must show proof of and carry a valid medical card. Drivers will be subject to a regular substance abuse screening which must show negative results prior to being hired by Riverfront.

5b) Your system for conducting criminal background checks:

Riverfront will contract with an outside service to perform a criminal background

check. As part of the hiring process, prospective employees will sign documentation allowing Riverfront to run an initial criminal background check. Upon hire, employees will sign documentation allowing Riverfront to run criminal background checks every two years thereafter.

5c) Your driver training program:

All drivers will be hired for a provisional period whereby they must complete a road test by licensed experienced driver with a valid DOT medical card, and complete sixteen (16) hours of supervised driving before they are hired as a regular employee/driver, able to drive on their own. All drivers are required to take a DOT physical exam to obtain a medical card, and drug screening with negative results for employment.

5d) Your system for conducting driver license checks:

Riverfront owner/ office manager will check driving history (3yrs prior) and perform semi-annual checks with Penn Dot to ensure licenses are in good standing.

5e) Your policies regarding alcohol and drug use by your drivers:

We have a zero-tolerance policy on the use of drugs or alcohol. Drug and alcohol tests will be given pre-employment, post-accident, randomly, and under reasonable suspicion.

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.

Riverfront will utilize 4 trucks, one 26 ft. overhead moving body ramp truck, one 26 ft. liftgate truck, one 24 ft. liftgate truck, and one 24 ft. ramp truck. The 26 ft. trucks are used for larger jobs, and the 24 ft. trucks are used for smaller jobs. All trucks can be used for larger or smaller jobs should it be necessary.

Riverfront's service area is not a large area, and the four trucks are sufficient for the type and number of job requests Riverfront typically receives. Riverfront will seek to expand if job requests increase and jobs warrant additional trucks.

<u>Year</u>	<u>Make</u>	<u>Model</u>	<u>Seating Capacity</u>	<u>Vehicle ID #</u>	<u>Milage</u>
2000	International	4700 T444	3	1HTSCABM1YH216624	240,000
2005	International	DT466	3	1HTMMAAM75H686885	220,000
2012	Ford	F650	5-6	3FRNX6FB4CV478823	190,000
2018	International	4300	3	1HTMMMMLXJH539362	150,000

7. Describe your vehicle safety program. Please include the following in your explanation:

7A) Your periodic vehicle maintenance plan:

Visual inspections will be conducted on the trucks daily. A checklist will be maintained to ensure the following has been checked:

- Oil
- Anti-Freeze
- Lights
- Turn Signals and Emergency Flashers
- Horn
- Windshield Washer Fluid
- Tire Pressure
- Mileage
- Fire Extinguisher in truck
- Emergency Triangle in truck

Trucks will be inspected by a mechanic every two months and necessary repairs/maintenance will be performed.

7B) Your system for ensuring your vehicles will continuously comply with Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

Vehicles will go thru daily visual check and will be inspected by a mechanic every two months, with State inspection done every 6 months. Log will be kept in the office of inspections. Riverfront will comply with the rules, regulations, and requirements of the PUC & DOT.

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

All insurance policies and coverage are currently in effect and up to date with no lapse in coverage. Our Current Insurance Company failed to send proof of coverage to the P.U.C. All bills including vehicle insurance bills (commercial auto, cargo, general liability policy, bondage insurance, and workers comp) are paid upon receipt. As long as we continue to secure jobs, insurance bills/ premiums will be paid.

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

_____ YES ___X___ NO

10. 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 reliable service to the public in a safe manner.

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.

Dante Reeves
(Signature)

5-3-23
(Date)

Dante Reeves, owner
(Name and Title, printed or typed)

Statement of Financial Position (Balance Sheet)

As of (date) _____
 (Must be less than 6 months old)

ASSETS

Current Assets	\$ 25,000	
Cash	_____	
Other Current Assets (specify)	_____	\$ 1,115,000.00
Total Current Assets		_____
Tangible Assets	\$ 150,000	
Motor Vehicle Equipment	_____	
Property (buildings, land, etc.)	\$ 1,100,000	\$ 15,000
Office Equipment	_____	_____
	TOTAL ASSETS	_____

LIABILITIES

Current Liabilities (Due within one year of date)	\$ 163,000	\$ 223,000.00
Loans	\$ 60,000	
Credit cards/revolving credit	\$ 155,000.00	
Other Liabilities (Attach schedule)	_____	
Total Current Liabilities		_____
Long Term Liabilities (Due after one year of date)	\$ 640,000	
Mortgage	\$ 0	
Long term commercial loan	_____	
Other Liabilities (Attach Schedule)	_____	
Total Long-Term Liabilities		_____
	TOTAL LIABILITIES	_____

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Certificate of Change of Registered Office
Limited Liability Company
(15 Pa.C.S. § 8906)

Name: Ronald V. McGuckin & Associates
Address: P.O. Box 2126
City: Bristol State: PA Zip Code: 19007

Document will be returned to the name and address you enter to the left.

Commonwealth of Pennsylvania
DOMESTIC - CHANGE OF REGISTERED OFFICE 2 Page(s)



Fee: \$70

In compliance with the requirements of the 15 Pa.C.S. § 8906 (relating to change of registered office) the undersigned limited liability company, desiring to effect a change of registered office, hereby states that:

1. The name of the company is:
Riverfront Moving & Storage, LLC

2. The (a) address of the company's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department:
(a) Number and street: 3513 Fitter St. City: Philadelphia State: PA Zip: 19114 County: Philadelphia
(b) Name of Commercial Registered Office Provider: _____ County: _____
c/o: _____

3. Complete part (a) or (b):
(a) The address to which the registered office of the company in this Commonwealth is to be changed is:
321 Mill St. City: Bristol State: PA Zip: 19007 County: Bucks
(b) The registered office of the company shall be provided by:
Name of Commercial Registered Office Provider: _____ County: _____
c/o: _____

PA DEPT. OF STATE

AUG 29 2013

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: 12/1/2011
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 8½ x 11 sheet.

IN TESTIMONY WHEREOF, the organizer(s) has (have) signed this Certificate of Organization this 23rd day of November, 2011.



Signature

IN TESTIMONY WHEREOF, the undersigned company
has caused this certificate to be signed by a duly
authorized member or manager thereof this

26th day of Aug., 2013

Riverfront Moving & Storage, LLC

Name of Company

x Dante Klement

Signature

Manager

Title

EIN Assistant

1. Get Started 2. Assign EIN 3. Assign EIN 4. Assign EIN 5. Assign EIN

Congratulations! The EIN has been successfully assigned.

EIN Assigned: 46-3152964

Legal Name: RIVERFRONT MOVING & STORAGE LLC

The confirmation letter will be mailed to the applicant. This letter will be the applicant's official IRS notice and will contain important information regarding the EIN. Allow up to 4 weeks for the letter to arrive by mail.

We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using the new EIN.

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Help Topic

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