

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)

Cullen 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)

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

(See checklist and indicate type of business entity registered)

13578847

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

Christopher Charles Cullen JR (owner)

6. **Mailing Address**

11 Rosalie Ln

Street Address

Aston, PA 19014

City, State and Zip Code

Delaware

County

215-327-9733

Telephone Number

~~Christoph~~ Chrisccullen@live.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.)

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. _____

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

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.

Christopher Charles Cullen JR

(Print Name)



(Signature)

9/15/2023

(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.

Cullen Moving & Storage, LLC
Legal Name of Applicant

11 Rosalie Ln Aston PA 19014
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 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.

Christopher Charles Cullen JR (owner)

11 Rosalie Lane Aston PA 19014, 215-327-9733

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

Cullen Moving & Storage is 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)(-+).

Please see attached

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.

Please see attached

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:
- Your hiring standards for drivers;
 - Your system for conducting criminal background checks;
 - Your driver training program;
 - Your system for conducting driver license checks;
 - Your policies regarding alcohol and drug use by your drivers.

Please see attached

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.

YEAR	MAKE	MODEL	SEATING CAPACITY*	VEHICLE ID #	MILEAGE
2021	Chevrolet	Silverado	6	1GCUYDED2M2417280	28,000

Please see attached - 1GCUYDED2M2417280
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7. Describe your vehicle safety program. Please include the following in your explanation:
- Your periodic vehicle maintenance plan
 - Your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

Please see attached

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

I have researched different companies to provide this level of insurance. I have funds to cover the premiums.

9. State whether the applicant has been convicted of a misdemeanor or felony. If 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 NO

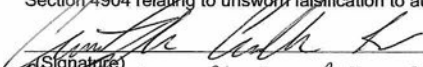
10. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

I have more than enough funds to get me started. I've operated in this business at all levels and have the ~~the~~ knowledge, skills, and experience to be successful.

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)
Christopher Charles Cullen Jr - Owner
(Name and Title, printed or typed)

09/15/2023

(Date)

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-).

Please see attached document. I was employed at PICKUP as a Operations Manager in different capacity's over the last 3 years. I was laid off July 1st 2023 and I have been a contractor with them ever since. I have worked moving household goods from delivery driver to Sr Operations Manager overseeing Operations on a nationwide scale over the last 3 years. I still work with them today but in a contractor capacity. Pickup Now Inc is an industry leader in final mile logistics for moving big and heavy household goods across the country.

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.

I plan to start small. I have a pickup truck that will be used to haul an enclosed trailer once approved. I have my own space in my house I use as an office. I currently have all equipment needed to get started like furniture dolly, ratch straps, moving boxes, moving blankets etc.

Record maintenance will include excel spreadsheets and backing them up with google cloud storage. I will keep a filing cabinet with all documentation and scan everything into my work computer to stay organized and as a back up for the paperwork using google cloud storage. I also plan to use QuickBooks to stay organized.

I will advertise using my phone number and will communicate with customers on my cell phone or email. I plan to stay a small business and have no plans to hire drivers. That might change but for now I will only operate as a very small business.

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;

- a. High School Diploma
- b. No Felony Convictions
- c. No misdemeanors or any kind of theft, domestic violence or otherwise heinous crimes
- d. Must be 21 years of age
- e. No more than three moving violations and or accidents within the last three years, subject to review
- f. A physical examination
- g. A written test on traffic regulations and driving attitudes
- h. A road test in a vehicle of the type to be driven over a similar route
- i. Successful completion of probation period

B. Your system for conducting criminal background checks;

- a. I have a private investigator or who pull criminal background checks

C. Your driver training program.

I will provide mandatory training through <https://www.nsc.org> and requirement to take this course <https://www.nsc.org/safety-training/defensive-driving/courses/online>

- a. Orientation on company policy for vehicle safety
- b. Review of rules and procedures stressing the driver's responsibilities for vehicle safety
- c. On-the job training covering vehicles to be used, maintenance and safe work practices
- d. Continued training as needed based on periodic performance evaluations

D. Your system for conducting driver license checks;

- a. I have a private investigator who can pull motor vehicle records

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

- a. Zero tolerance for drug and alcohol while on the job.
- b. Zero tolerance for illegal drug use on or off the job. Drug tests to be administered at random. Or in compliance with all applicable laws.

I do not plan on hiring any drivers (Eventually that might change). I plan to do moves myself and a hire part time helper that will work under my strict supervision. Once I have enough business to justify full time employees, I will access the historical data I have to forecast my growth to justify the number of employees needed.

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.

I have 1 personally owned Pickup truck that I will use to haul an enclosed trailer. I plan to start very small doing small apartment moves. If I acquire business that will need larger moving space, I'll rent a the appropriate size box truck from Penske, Enterprise, or other rental company. My company will be very small and I plan on being the only driver with one part time helper.

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).

Before beginning travel, Drivers and myself will complete a PMCS (Preventative Maintenance Checks and Service) of the vehicle. Checking to ensure all lights work, all fluids are at an acceptable level, inspecting for any leaks, and check for anything abnormal that could potential interfere with safe travel or operation of the vehicle. A Post trip inspection will be completed as well in order to prioritize any deficiencies prior to the next trip.

A log of all maintenance will be kept of all work performed on the vehicle and the vehicle will be receive regular maintenance as required or recommended by the owner's manual. This we be checked weekly/monthly/quarterly to ensure compliance and will be documented to record maintenance compliance with all applicable laws for each vehicle



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Ste 290
Plano TX 75093
800-560-2168
www.pickupnow.com

September 15, 2023

Subject: Letter of Employment Verification

Christopher Cullen was employed as Sr. Manager Operations Strategy Innovation at Pickup Now Inc between August 3, 2020 and July 1, 2023.

Sincerely,

Robyn Westerkamp

HR Consultant

Point Pickup Technologies, Inc.

E: robyn.westerkamp@pointpickup.com

M: 860-694-8480



POINT PICKUP



Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717.787.1057
dos.pa.gov/BusinessCharities

September 12, 2023

Cullen Moving & Storage, LLC
11 ROSALIE LANE
ASTON, PA 19014

Entity Name: Cullen Moving & Storage, LLC
Entity File Date: September 9, 2023
Entity Number: 0013578847
Filing Type: Domestic Limited Liability Company

The Bureau of Corporations and Charitable Organizations is happy to send your filed document. The Bureau is here to serve you and we would like to thank you for doing business in Pennsylvania.

Thank you for registering with the Department of State to do business in Pennsylvania. Like many other businesses, you may have employees, sell taxable products, or provide a taxable service to consumers in Pennsylvania. Please visit www.pa100.state.pa.us to register for business taxes with the Department of Revenue and the Department of Labor and Industry. You may also visit www.Business.pa.gov to find resources for businesses through all stages of development.

Beginning in 2025, annual reports are required for all domestic filing entities, limited liability general partnerships and registered foreign associations. More information will be forthcoming from the Bureau. However, to ensure that you receive notice of how and when to make annual reports, keep all information on file with the Bureau up-to-date, particularly registered office address.