

# Maiello Brungo & Maiello

ATTORNEYS AT LAW

Brandon D. VanTine  
412-242-4400, Ext. 184  
bdv@mbm-law.net

## DATE OF DEPOSIT

September 19, 2023

SEP 19 2023

Rosemary Chivetta, Secretary  
Pennsylvania Public Utility Commission  
Commonwealth Keystone Building  
400 North Street  
Harrisburg, PA 17120

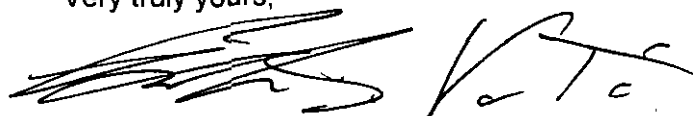
PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

**Re: Application of Little Red Riding Hood, Inc., Docket No. A-2023-3042446**

Dear Ms. Chivetta:

Enclosed please find the requested Application for Motor Common Carrier of Persons in Experimental Service in the above captioned matter. If you have any questions or concerns, please do not hesitate to contact our office.

Very truly yours,



Brandon D. VanTine  
BDV/mrk

366859,13597.0

SEP 19 2023

Secretary PA Public Utility Commission  
 400 North Street, Second Floor  
 Harrisburg, PA 17120  
 717.787.3834  
[www.puc.pa.gov](http://www.puc.pa.gov)

PA PUBLIC UTILITY COMMISSION  
 SECRETARY'S BUREAU

## Application for Motor Common Carrier of Persons in Paratransit Service

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE WHEN PROVIDING TRANSPORTATION ON A NONEXCLUSIVE, ADVANCE RESERVATION BASIS.

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

Little Red Riding Hood, Inc.

- 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)

N/A

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 Vans" 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 Vans" or "J. Doe Vans" 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?**  YES  NO

If NO, you must register (see checklist on how to register)

If YES, provide your PA Corporation Bureau Entity ID Number 0012926177  
 (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).**

Nicole Jones, Sole Owner and Shareholder  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Physical Address** (do not use PO Box)

2216 Broadway Avenue  
Street Address  
Pittsburgh, PA 15216  
City, State and Zip Code  
412-819-7643 Allegheny  
Telephone Number County

The address entered here should be the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment.

7. **Mailing Address** (if different from Physical Address)

\_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City, State and Zip Code

This is the address to which the Commission will send all official documents issued by the Commission. If left blank, it will be assumed that the **MAILING ADDRESS** is the same as the **PHYSICAL ADDRESS**.

8. **Attorney** (if applicable)

Jason J. Kelley, Esq. 412-242-4400  
Attorney's Name & Telephone Number for this Filing  
424 S. 27th Street, Suite 200, Pittsburgh, Pennsylvania 15203  
Attorney's 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).

Little Red Riding Hood, Inc. (the "Company") will provide luxury concierge service to seniors 60 and older. This service will be provided to both members of the public and contractually through hospitals, care facilities, and governmental agencies. The Company will only purchase American manufactured fully electric vehicles to reduce carbon emissions. All of the vehicles will be wholly owned by the Company and the drivers will be employees of the Company. The Company will provide this service to seniors to go wherever they need to increase their independence. The drivers will also perform functions to assist them with their day-to-day needs, such as grocery shopping and performing household activities. This service does not follow a designated route, the Company offers exclusive and non-exclusive services and can be reimbursed through insurance, is not a sightseeing or excursion service, and is not an airport transportation service. The primary purpose will be to transport seniors to and from doctors appointments and taking them to perform daily tasks such as grocery shopping or visiting the bank. As such, The Company's service does not fit into any of the preexisting models laid out in Chapter 29, Section 29.13 (1-5). The service will originally be based in Western Pennsylvania counties, including Allegheny, Westmoreland, Fayette, Beaver, Butler, Mercer, Clarion, Clearfield, Greene, Indiana, Armstrong, Washington, Lawrence, Elk, Forest, and Somerset, but the goal is to expand throughout the Commonwealth.

*Examples:*

- *To transport people whose personal convictions prevent them from owning or operating motor vehicles from points in Lancaster County to points in PA, and return.*
- *To transport people from the city and county of Philadelphia to correctional facilities in PA, and return.*
- *To transport people in wheelchair and stretcher vans from points in the city of Pittsburgh to points in Allegheny County, and return.*
- *To transport people between points in Northumberland County.*

**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 Persons in Paratransit Service; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the certificate.

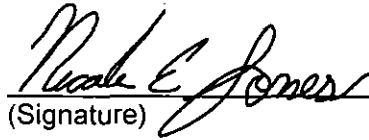
## Verification of Application

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.

Nicole Elizabeth Jones

(Print Name)



(Signature)

09/14/2023

(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).

DATE OF DEPOSIT

SEP 19 2023

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

# 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.

Little Red Riding Hood, Inc.

<b>Legal Name of Applicant</b>			
<b>Trade Name, If any</b>			
2216 Broadway Avenue	Pittsburgh	PA	15216
<b>Street Address (principal place of business)</b>	<b>City or Municipality</b>	<b>State</b>	<b>Zip Code</b>

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.

Nicole Jones as the Owner, Sole Shareholder, and President of Little Red Riding Hood, Inc.  
 2216 Broadway Avenue, Pittsburgh, PA 15216  
 412-819-7643

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

The Applicant is not affiliated with any other carrier.

3. 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.

Little Red Riding Hood, Inc. (the "Company") does not currently have a physical location at which the vehicles will be stored. The Company is currently evaluating properties at which to house the vehicles. The Company is also working with different governmental agencies and localities to potentially contract with them to utilize their electric charging stations for storage purposes. All records will be maintained electronically through cloud based servers. Information and requests for service will be transmitted from the mobile application (the "App") the Company is developing to schedule and request service. The App will communicate the request to the drivers of the vehicles. Alternatively, a dispatcher will be available for individuals to call and request the Company's services. The dispatchers will then communicate the request to the drivers of the vehicles. Drivers will utilize the on-board wifi in the vehicles to keep in contact with the dispatchers and the Company. On-board cameras will be installed that can be viewed at any time by the Company and will be able to maintain constant communication with its drivers. The Company has engaged a Certified Public Accountant to provide accounting and bookkeeping services to maintain all applicable financial data and records and to produce and maintain such records and reports required by the PUC. Further, the Company has engaged a law firm to produce and maintain all legal records required by the PUC.

**DATE OF DEPOSIT**

SEP 19 2023

4. 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.

The Company intends to hire approximately 5-6 part-time drivers per vehicle that the Company purchases and the Company intends to purchase 2-4 vehicles per county that the Company provides its services, so the Company will hire approximately 10-24 drivers per county, depending on the number of vehicles necessary to service each county. In total, the anticipated number of drivers to provide services to every county in the Commonwealth would be 670-1,608. Counties with a lower population will require fewer vehicles and counties with a higher population will require more vehicles. a. All drivers will be subject to a formal interview process. Drivers must possess a valid driver's license and pass a criminal background check, a driving background check, and must submit to drug testing. b. The Company is coordinating with its insurance company to conduct criminal background checks. All new hires must present a valid driver's license or other form of valid identification to the Company before officially becoming hired by the Company. The new hires will provide all necessary information required by the Company's insurance company to perform a criminal background check. c. Upon hiring, the drivers shall complete 2 weeks of training, including in-car training, and will also receive basic CPR and First Aid training. New hires will also receive training from a geriatric nurse to train them to assist the Company's clients (60 years old and older). d. The Company is coordinating with its insurance company to conduct driver's license checks. All new hires must present a valid driver's license to the Company before officially becoming hired by the Company. The new hires will provide all necessary information required by the Company's insurance company to perform a driver's license check. e. Drivers are not permitted to be under the influence of any drugs or alcohol while operating any of the Company's vehicles. This shall explicitly include cannabis, even if it is validly prescribed by a treating physician. In the vent of an accident involving a Company vehicle, the driver shall immediately be subject to drug and alcohol testing. Any driver suspected of operating a Company vehicle while under the influence of drugs or alcohol shall submit to drug and alcohol testing and will be terminated if the driver is determined to be under the influence of drugs or alcohol.

5. 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
2023	Cadillac	Lyriq	5		
2024	Cadillac	Lyriq	5		

\*Vehicles with seating capacity of more than 15 passengers, including driver, can't be used in paratransit service.

6. 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).

All Company vehicles are being outfitted with 3 on-board cameras and will be monitored through the App. All drivers and passengers will be required to wear their seatbelts while the vehicle is in operation. The Cadillac Lyriq will be the only vehicle utilized by the Company. The Lyriq was chosen due to its litany of safety features, including forward collision avoidance with pedestrian and cyclist detection, automatic emergency braking, blind-spot assist, reverse automatic braking, lane-keep assist, land departure warning, front and rear parking assist, and rear cross-traffic alert. The Company is currently exploring an agreement with Rohrich Cadillac of Pittsburgh ("Rohrich") to serve as its designated mechanic on all of the Company's vehicles. Rohrich will also be the dealership at which all applicable inspections to ensure compliance with 67 Pa. Code, Chapter 175.

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

The Company has engaged an insurance broker to secure adequate insurance coverage for the Company and its vehicles

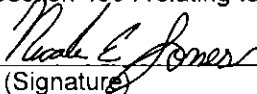
8. State whether the applicant has been convicted of a misdemeanor or felony. If applicant is partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

\_\_\_\_ YES       NO

9. 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.



(Signature)

Nicole Elizabeth Jones, President

(Name and Title, printed or typed)

09/14/2023

(Date)

**DATE OF DEPOSIT**

**SEP 19 2023**

**PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU**

**Statement of Financial Position (Balance Sheet)**  
**As of (date) \_\_\_\_\_**

ASSETS

Current Assets		
Cash	\$40,000.00	
Other Current Assets (specify)	\$1,000.00	
Total Current Assets		<u>\$41,000.00</u>
Tangible Assets		
Motor Vehicle Equipment	\$0	
Property (buildings, land, etc.)	\$0	
Office Equipment		<u>\$0</u>
<b>TOTAL ASSETS</b>		<u><u>                    </u></u>

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	\$0	
Credit cards/revolving credit	\$0	
Other Liabilities (Attach schedule)	\$0	
Total Current Liabilities		<u>\$0</u>
Long Term Liabilities (Due after one year of date)		
Mortgage	\$0	
Long term commercial loan	\$0	
Other Liabilities (Attach Schedule)	\$0	
Total Long-Term Liabilities		<u>\$0</u>
<b>TOTAL LIABILITIES</b>		<u><u>                    </u></u>

View/Print Label

1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialogue box that appears. Note: If your browser does not support this function, select Print from the File menu to print the label.

2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS  
Customers with a scheduled Pickup

- o Your driver will pickup your shipment(s) as usual.

Customers without a scheduled Pickup

- o Schedule a Pickup on ups.com to have a UPS driver pickup all of your packages.
- o Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. To find the location nearest you, please visit the Locations' Quick link at ups.com.

UPS Access Point™  
ADVANCE AUTO PARTS STORE 1266 THE UPS STORE  
1937 WHARTON ST  
PITTSBURGH PA 15203-1847

UPS Access Point™  
THE UPS STORE  
1735 E CARSON ST  
PITTSBURGH PA 15203-1705

UPS Access Point™  
THE UPS STORE  
3945 FORBES AVE  
PITTSBURGH PA 15213-3507

FOLD HERE

MEGAN KIRIK 4122424400 JOHN PROROK 424 S. 27TH STREET PITTSBURGH PA 15203		1 LBS PAK	1 OF 1
SHIP TO: ATTN: ROSEMARY CHIVETTA, SECRETARY PA PUBLIC UTILITY COMMISSION 400 NORTH STREET COMMONWEALTH KEYSTONE BUILDING HARRISBURG PA 17120		DWT: 17,13,1	
	PA 171 9-20 		
UPS NEXT DAY AIR		1	
TRACKING #: 1Z F10 2V4 01 9066 6396			
			
BILLING: P/P			
Reference #1: 13597.0			
XOL 23.09.02		NV45 38.DA 09/2023*	

RECEIVED

SEP 20 2023

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU