

DATE OF DEPOSIT

MAY 30 2024

Secretary  
Pennsylvania 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 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)

Allan M. Watson A&J Moving Co. ydd/sec 6/12/24.

- 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)

A&J Moving Co.

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 7179164  
(see checklist and indicate type of business entity registered)

7479164 ydd/sec 6/12/24.

5. If either a corporation or limited liability company, please list members (LLC) or shareholders and officers (corporation).

Allan M. Watson  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Mailing Address

1205 West Front St.  
Street Address  
S. Williamsport Pa 17702 Lycoming  
City, State and Zip Code County  
(570)980-8033 aandjmoving40@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.

7. Physical Address (If different than mailing address. Do not use a post office box.)

1205 W Front St.  
Street Address  
S. Williamsport Pa 17702 Lycoming  
City, State and Zip Code County  
570-980-8033 aandjmoving40@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 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. Do you have a USDOT Number?

     No  Yes, at No. 4186295

10. What type of commodities do you intend to transport other than your own?

We would like to move household items/goods  
and property.

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.

Allan M. Watson  
(Print Name)

Allan M. Watson (Signature) 5-29-24 (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).

PRESS FIRMLY TO SEAL



PRESS FIRMLY TO SEAL

Retail



17120

U.S. POSTAGE PAID  
PME  
WILLIAMSPORT, PA 17701  
MAY 30, 2024

\$30.45

R2304H109415-93

RDC 07

# PRIORITY MAIL



## PRIORITY MAIL EXPRESS



EI 507 947 407 US

**CUSTOMER USE ONLY**

**FROM:** (PLEASE PRINT) PHONE ( )  
*A+J Moving Co.  
 1205 W. Front St.  
 S. Williamsport PA 17702*

**DELIVERY OPTIONS (Customer Use Only)**

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

**Delivery Options**

No Saturday Delivery (delivered next business day)  
 Sunday/Holiday Delivery Required (additional fee, where available)  
\*Refer to USPS.com® or local Post Office™ for availability.

**TO:** (PLEASE PRINT) PHONE ( )  
*Rosemary Chiavetta, Secretary  
 Pennsylvania Public Utility Commission  
 Commonwealth Keystone Building  
 400 North St.  
 Harrisburg PA 17120  
 ZIP + 4® (U.S. ADDRESSES ONLY)  
 17120*

**PAYMENT BY ACCOUNT (if applicable)**

USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

**ORIGIN (POSTAL SERVICE USE ONLY)**

1-Day  2-Day  Military  DPO

PO ZIP Code <i>17703</i>	Scheduled Delivery Date (MM/DD/YY) <i>5-31-24</i>	Postage <i>\$ 30.45</i>
Date Accepted (MM/DD/YY) <i>5-30-24</i>	Scheduled Delivery Time <i>RECEIVED</i>	COD Fee \$
Time Accepted <i>9:09</i>	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Return Receipt Fee \$
Special Handling/Frag. Fee \$	PA Public Utility Commission SECRETARY'S BUREAU	Live Animal Transportation Fee \$
Weight <i>3.2</i>	Flat Rate <input checked="" type="checkbox"/>	Acceptance Employee initials <i>MEL</i>
<b>DELIVERY (POSTAL SERVICE USE ONLY)</b>		Total Postage & Fees <i>30.45</i>
Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

717-706-1952

To: CHIAVETA, R. PUC

Agency: PUC

Floor:

External Carrier: EXPRESS

5/31/2024 7:43:42 AM



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USPS.COM/PICKUP



PS10001000006

EP13F July 2022  
OD: 12 1/2 x 9 1/2

PEEL FROM THIS CORNER

LABEL 11-B, MAY 2021

PSN 7690-02-000-9999



UNITED STATES POSTAL SERVICE