

## **APPLICATION CHECKLIST** **Broker of Household Goods in Use**

Use this checklist to make sure you have enclosed all required items or your application will not be processed. You cannot operate in Pennsylvania until you receive a Certificate of Public Convenience from the Commission.

- The original Application with original signatures (unless e-Filed with the Commission's online e-Filing system at [www.puc.pa.gov](http://www.puc.pa.gov) )
- A certified check, money order, or check from your attorney for \$350 made payable to "Commonwealth of Pennsylvania;"
- The Application must clearly state whether you are applying as an individual or sole proprietor, partnership or corporate entity
- IF the application is being filed by a general partnership, you must provide a list of the names and addresses of ALL partners.
- IF the application is being filed by a limited partnership, you must provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF the application is being filed by a limited liability partnership, you must provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF the application is being filed by a limited liability company, you must provide a list of the names and addresses of ALL members and the Title of each member, and your PA Corporation Bureau Entity ID Number.
- IF the application is being filed by a for-profit corporation, you must provide a list of ALL corporate officers and titles, the name of each shareholder, distribution of shares, and your PA Corporation Bureau Entity ID Number.
- IF the application is being filed by a non-profit corporation, you must provide a list of ALL corporate officers and titles and those serving on the Board of Directors, and your PA Corporation Bureau Entity ID Number.

ALL Parties to proceedings pending before the Commission must open and use an e-filing account through the Commission's website, OR you may submit your filing by overnight delivery. If a filing contains confidential or proprietary material, the filing is required to be submitted by overnight delivery.

If you do not e-File your application, mail it and all attachments to: SECRETARY PA PUBLIC UTILITY COMMISSION, 400 NORTH STREET, 2<sup>ND</sup> FLOOR, HARRISBURG, PA 17120

Corporate entities (corporations, LPs, LLPs, and LLCs) and fictitious trade names must be registered with the PA Department of State. Companies incorporated in other states must register as a foreign business corporation. Individuals acting as sole proprietors and partnerships do not have to register.

If you are not registered with the PA Department of State, you can apply at its website at [www.dos.state.pa.us/corps](http://www.dos.state.pa.us/corps) on how to do business in Pennsylvania as:

PA Corporations (Profit and Non-Profit) – apply for Articles of Incorporation

Foreign Corporations – apply for a Certificate of Authority

PA Limited Partnerships (LPs), Limited Liability Partnerships (LLPs), and Limited Liability Companies (LLCs) – apply for an Application of Registration

Fictitious Name Registration – File ONLY IF Trade Name will be different than the business name you register with the PA Department of State.

## Application for Broker of Household Goods in Use

THIS APPLICATION IS TO BE USED FOR A LICENSE TO OPERATE AS A BROKER WHO WILL ARRANGE FOR THE TRANSPORTATION OF HOUSEHOLD GOODS IN USE BETWEEN POINTS IN PENNSYLVANIA.

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

ShipMyRoom LLC

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- 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

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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?** \_\_\_\_\_

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

4. **Are you a business entity registered with the PA Dept. of State?** Yes

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

If YES, provide your PA Corporation Bureau Entity ID Number 7062012  
(see checklist and indicate type of business entity registered)

5. **Mailing Address**

100 Commons Blvd.

Street Address

Reading, PA 19605

City, State and Zip Code

Berks

County

484-575-4159

Telephone Number

steelermags@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.*

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

Street Address

City, State and Zip Code

Telephone Number

County

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**

7. **Attorney** (if applicable)

Colin J. Macfarlane, Esquire

Attorney's Name & Telephone Number for this Filing

Kozloff Stoudt, P.C., 2640 Westview Drive, Wyomissing, PA 19610 cmacfarlane@kozloffstoudt.com

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.

8. **Does applicant hold interstate operating authority?**

No

Yes, at No. MC-1124867-B

U.S. DOT No. 3453269

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

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To arrange for the transportation of household goods in use between points in Pennsylvania

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*Examples:*

- *To arrange for the transportation of household goods in use between points in Pennsylvania.*
- *To arrange for the transportation of household goods in use between points in Clarion County.*

10.. **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 Brokers 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. § 4904 relating to unsworn falsification to authorities.

**Ernie Magalotti**

(Print Name)



(Signature)

12/3/24

(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).

**Note: Before you can provide service as a Pennsylvania licensed broker of household goods, you must submit evidence of financial responsibility to the Commission. Your evidence will be in the form of a Surety Bond in the amount of \$10,000.**

See Addendum & Enclosures

## 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.

PUC Application Docket No.			
ShipMyRoom LLC			
Legal Name of Applicant			
N/A			
Trade Name, if any			
1011 Tuckerton Ct., Reading, PA 19605			
Street Address (principal place of business)	City or Municipality	State	Zip Code

The Verified Statement of the Applicant is more or less a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

At minimum, the Verified Statement of the Applicant should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person making the Verified Statement on behalf of the applicant. If the applicant is a sole proprietor making the statement, this will be the same information as provided above. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number, and indicate that the applicant's directors/owners/partners/etc. have authorized the witness to speak for the business.

See Addendum & Enclosures

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

See Addendum & Enclosures

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

See Addendum & Enclosures

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. 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. Finally, please state your intended business hours.

See Addendum & Enclosures

5. Please state the number of employees you intend to use, along with a description of their duties. Please explain why that number of employees is appropriate to provide reasonable and efficient service to the geographical territory you will be serving.

See Addendum & Enclosures

6. Licensed brokers are required to maintain a surety bond with a value of no less than \$10,000. While it is not necessary to obtain a surety bond at this time, please give the names of bonding companies you have contacted in preparation for obtaining a surety bond.

See Addendum & Enclosures

7. Please describe your customer service standards. Within your description, please explain:
- a. Your plan to inform customers of the procedures for filing complaints with the PUC;
  - b. Your intended customer complaint resolution procedure.

See Addendum & Enclosures

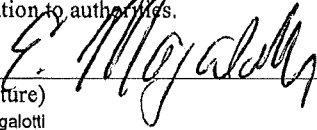
8. Criminal Record. Have you been convicted of a misdemeanor or felony for which you remain subject to supervision by a court or correctional institution?

\_\_\_\_\_ YES       NO

9. Financial Data. In addition to demonstrating your technical fitness, you must also demonstrate that you possess the financial fitness to provide the proposed transportation service. Therefore, you must complete both parts of the "Statement of Financial Position", which follows this page. The first part is the Balance Sheet. You need only provide the applicable information. The second part of the Statement of Financial Position is the Projected Income Statement. The projection is your estimation of expected revenues and specific expenses for one year. You should use the projected information, along with the financial data reported on your balance sheet to help you determine if proposed business can be feasible. Please feel free to also provide clarification information with your "Statement of Financial Position", which explains 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)  
Ernie Magalotti  
\_\_\_\_\_  
(Name and Title, printed or typed)

12/3/2024  
\_\_\_\_\_  
(Date)

## ADDENDUM & ENCLOSURES

1. The person making the verified statement on behalf of ShipMyRoom LLC ("SMR") is Mr. Ernie Magalotti ("Mr. Magalotti"). Mr. Magalotti is the sole member, owner, president, and manager of SMR, and can be contacted via mail at Attn: President, ShipMyRoom LLC, 100 Commons Blvd., Reading, PA 19605, email at [steelermags@gmail.com](mailto:steelermags@gmail.com), and telephone at (484) 575-4159.

2. SMR is solely affiliated with Reliance Logistics Inc. ("Reliance"), a Pennsylvania corporation having a registered office at 3070 Bristol Pike, Bldg. 1, Ste. 114, Bensalem, PA 19020, as its only bona fide agent via agreement. SMR desires to obtain this Broker's License from the Pennsylvania Utility Commission to potentially act as a broker for additional carriers. Generally, SMR connects Reliance to college students (or their parents) who need some or all of the contents of their dormitories or apartments transported before and after summer, winter and spring breaks.

3. Mr. Magalotti has been working in the supply chain management, shipping, and logistics industry for his entire professional career spanning approximately three decades since graduating from Juniata College with a business degree. Mr. Magalotti formed and has owned Legacy Logistics Limited Liability Company ("Legacy"), a Pennsylvania limited liability company having a registered address of 201 E. Locust St., Fleetwood, PA 19522 and d/b/a LEGACY LOGISTICS, for the past twenty-three years. Legacy is a business-to-business service provider that specializes in transporting vendors' goods to and from trade shows nationwide.

4. SMR operates Monday through Friday during normal business hours, 8:00 a.m. to 5:00 p.m., but also offers 24/7 - 365 client service support. SMR has a primary office located at 100 Commons Blvd., Reading, PA 19605, and a secondary office located at 1011 Tuckerton Blvd., Ste. 300, Reading, PA 19605. The employees of SMR, as hereinafter described, also have the capacity to and do work remotely. The primary office is approximately four hundred square feet, and has desks, a printer, copier, and shared bathroom and kitchen facilities. SMR maintains and backs-up its client files electronically through Hubspot, a third-party logistics management platform containing the names, phone numbers, email addresses, and physical addresses of all clients. SMR maintains and backs-up its invoicing and accounting files electronically through QuickBooks with payment by clients accepted online through Braintree and Stripe. The employees and clients of SMR communicate with each other directly via email and phone call. SMR typically attracts clients by word-of-mouth. Clients can register for the service, schedule a move-in or move-out, read and review the terms of service, and pay online. Upon registration, the employees of SMR communicate and coordinate directly with the client, Reliance, and the university or college.

5. Not including Mr. Magalotti, SMR has two employees, Denise L. Magalotti ("Mrs. Magalotti") and Cameron R. Magalotti ("Cameron Magalotti"). Mrs. Magalotti is SMR's scheduling coordinator with Reliance, and client service representative. Cameron Magalotti is SMR's sales representative. Mr. Magalotti and the aforementioned employees are available Monday through Friday during normal business hours, 8:00 a.m. to 5:00 p.m., but also offer 24/7 - 365 client service support. SMR's employees are currently capable of managing its clients, and coordinating with Reliance, the universities and colleges given Reliance's relatively small geographic service area. Nearly all of Reliance's transportation services go from one point in the Commonwealth to another, but Reliance does occasionally transport to and from the State of Maryland and the State of Delaware. Mr. Magalotti expects to hire additional employees and lease additional office space should demand and an expansion of geographic reach necessitate it.

6. SMR has a surety bond in the amount of ten thousand dollars, proof of which is enclosed herein.

7. As referenced above, SMR communicates with clients, Reliance, universities and colleges directly, and has 24/7 - 365 client service support in the event of having to coordinate a scheduling issue, cancellation, etc. SMR's terms of service advise clients that SMR is regulated by the Public Utility Commission, and that they can visit the following link to contact the Public Utility Commission or submit a complaint with it: <https://www.puc.pa.gov/about-the-puc/contact-us/>. However, unsatisfied clients are encouraged to contact SMR directly, which works with Reliance to offer refunds or reimbursements if a client is unhappy with the services provided.

8. Neither Mr. Magalotti nor any of SMR's employees have ever been convicted of a misdemeanor or felony.

9. Please see the enclosures.

STATEMENT OF FINANCIAL POSITION (BALANCE SHEET)  
AS OF (DATE) 7/23/24  
(Must be less than 6 months old)

**ASSETS**

Current Assets

Cash	139,926.08	
Other Current Assets (specify)	403.50 (website)	
<b>Total Current Assets</b>		<b>140,329.58</b>

Tangible Assets

Motor Vehicle Equipment	0	
Property (Buildings, land, etc.)	N/A - rented	
Office Equipment		
<b>Total Tangible Assets</b>		<b>_____</b>

**TOTAL ASSETS**

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**LIABILITIES**

Current Liabilities (Due within one year of date)

Loans	0	
Credit Cards/revolving credit	6,776.50	
Other Liabilities (attach schedule)	0	
<b>Total Current Liabilities</b>		<b>6,776.50</b>

Long Term Liabilities (Due after one year of date)

Mortgage	0	
Long Term commercial loan	110,451.58	
Other Liabilities (Attach Schedule)	0	
<b>Total Long-Term Liabilities</b>		<b>110,451.58</b>

**TOTAL LIABILITIES**

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**STATEMENT OF FINANCIAL POSITION**  
**One Year Projected Income Statement**

REVENUE and GAINS

Operating Revenue	107,500.00
Net Revenue from non-carrier operations	_____
Dividend and interest revenues	_____
Other non-operating revenue	_____
Gains	_____
Total Revenue and Gains	107,500.00

EXPENSES

Equipment Maintenance and Garage Expense	4,750.00
Insurance Expense	10,703.50
Employee Salaries	_____
Supervisory Salaries	_____
Officer Salaries	20,000.00
Fuel Expense	1,000.00
Purchased Transportation (Lease Expense)	_____
Materials and Supplies Expense	2,500.00
General Office Expense	2,500.00
Advertising Expense	8,500.00
Telephone Expense	1,050.00
Accounting Expense	3,500.00
Legal Expense	3,500.00
Uncollectible Revenue	1,000.00
Depreciation Expense	1,000.00
Amortization	_____
Operating Taxes and Licenses	6,250.00
Rent Expense	4,000.00
Loss	_____
Total Operating Expenses and Losses	66,053.00

Net Income Before Taxes

Provision for Income Taxes	_____
<u>Net Income (Loss)</u>	41,447.00



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.  
Washington, DC 20590

**SERVICE DATE**  
August 06, 2020

**LICENSE**  
**MC-1124867-B**  
U.S. DOT No. 3453269  
SHIPMYROOM LLC  
READING, PA

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a **broker, arranging for transportation of household goods** by motor vehicle.

This authority will be effective as long as the broker maintains insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

A handwritten signature in black ink, appearing to read "Jeffrey L. Secrist".

Jeffrey L. Secrist, Chief  
Information Technology Operations Division

BHO