

JAN 27 2025

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)

N2G MEDICAL TRANSPORTATION 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)

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?**  **NO**

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

13926761

**If YES, provide your PA Corporation Bureau Entity ID Number** \_\_\_\_\_

(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).**

MISS NUYGUNDI FRECKLETON  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Mailing Address**

621 W CHELTEN AVENUE APARTMENT 1  
Street Address  
PHILADELPHIA PA 19144 PHILADELPHIA  
City, State and Zip Code County  
(347) 622-6800 FRECKLETON33@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.)

\_\_\_\_\_  
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 WHEELCHAIR AND OR AMBULATORY CLIENTS BETWEEN POINTS IN PHILADELPHIA COUNTY

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*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.

MISS NUYGUNDI FRECKLETON

\_\_\_\_\_  
(Print Name)

*N. Freckleton*  
\_\_\_\_\_  
(Signature)

*01/26/2025*  
\_\_\_\_\_  
(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

JAN 27 2025

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.

N2G MEDICAL TRANSPORTATION LLC

Legal Name of Applicant

Trade Name, if any

621 E CHELTEN AVENUE SUITE 1

PHILADELPHIA

PA

19144

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.

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

ATTACHED

3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. If practical experience is lacking, please provide an explanation and description of any education or training that you believe may be relevant.

ATTACHED

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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.

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

AT LEAST 2. POLICIES ARE 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.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY*</u>	<u>VEHICLE ID #</u>	<u>MILEAGE</u>

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

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).

ATTACHED

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

ATTACHED

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

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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.

N. Freckleton  
(Signature)  
NUYGUNDI FRECKLETON  
(Name and Title, printed or typed)

01/26/2025  
(Date)

**Statement of Financial Position (Balance Sheet)**

**As of (date) \_\_\_\_\_**

**(Must be less than 6 months old)**

ASSETS

Current Assets

Cash

Other Current Assets (specify) \_\_\_\_\_

Total Current Assets \_\_\_\_\_

Tangible Assets

Motor Vehicle Equipment \_\_\_\_\_

Property (buildings, land, etc.) \_\_\_\_\_

Office Equipment \_\_\_\_\_

**TOTAL ASSETS** \_\_\_\_\_

LIABILITIES

Current Liabilities (Due within one year of date)

Loans \_\_\_\_\_

Credit cards/revolving credit \_\_\_\_\_

Other Liabilities (Attach schedule) \_\_\_\_\_

Total Current Liabilities \_\_\_\_\_

Long Term Liabilities (Due after one year of date)

Mortgage \_\_\_\_\_

Long term commercial loan \_\_\_\_\_

Other Liabilities (Attach Schedule) \_\_\_\_\_

Total Long-Term Liabilities \_\_\_\_\_

**TOTAL LIABILITIES** \_\_\_\_\_

## N2G MEDICAL TRANSPORTATION LLC

### DRIVER QUALIFICATIONS AND HIRING PREREQUISITES

#### SUMMARY:

The Paratransit Driver is responsible for the transportation of wheel chair and ambulatory patient (s). The Paratransit Driver must comply with all state, local and company policies and procedures pursuant to his or her level of training. The Paratransit Driver must also comply with all state, local and Company policies and procedures regarding certifications.

- Project a professional image and attitude when dealing with patients, other agencies and fellow employees.
- Be familiar with company driving policies/standards and always drive in a safe and responsible manner.
- Adhere to Company dress code and personal appearance policies.
- Be familiar with safe lifting and moving techniques and be physically/mentally fit for the performance of job duties.
- Be familiar with all Company policies and procedures and any changes made to the same.
- Be familiar with Company management structure.
- Be familiar with all Company forms and their purposes.
- Demonstrate proper patient care documentation techniques and a working knowledge of all policies and forms as well as all required hardware and software programs.
- Assume responsibility for daily check of vehicle maintenance and mechanical Must inspect and report any vehicle damage or malfunction and check all fluid levels to insure they are replenished if necessary. Must refuel vehicle daily, noting vehicle number, mileage and driver assigned PIN on all transactions.
- Assume responsibility for cleanliness of vehicle cab and cleaning vehicle exterior in conjunction with partner on a daily basis.
- Have a working knowledge of the Company communications systems and communications policies and procedures.

- Be familiar with and capable of navigating in all response areas of the Company.
- Be knowledgeable of major receiving hospital/facility locations and their capabilities.
- Know how to use "GPS" products to assist in navigating.
- Be willing and able to perform special duties as assigned.
- Including but not limited to the following examples:
  - Washing Vehicles (inside/outside)
  - Sweeping/Vacuuming (vehicle/building)
  - Removal of trash (vehicle/building)
  - Billing
  - Driving Shuttle Programs
- Must report all incidents, accidents and problems to his/her immediate supervisor
- Be willing to work overtime as required required

**KNOWLEDGE, SKILLS, AND QUALIFICATIONS:**

- The Paratransit Driver should have a high school education. Those with a GED equivalent will be considered.
- Must have a current, valid driver's license.
- Must be knowledgeable of safe moving and lifting techniques to insure safety of self and others.
- Must be knowledgeable in the correct use of hydraulic wheel chair lift.
- Must be knowledgeable in the correct use of safety straps used in securing patients while in the vehicle.
- Must successfully complete the Company's probationary program.

a) Common or contract carriers, except for call or demand and limousine drivers.

(1) A common or contract carrier may not permit a person to operate a vehicle in its authorized service until it has obtained and reviewed a driver history from the appropriate agency of every state

in which that person held a motor vehicle operator's license or permit during the preceding 3 years.

(2) Following receipt of the initial driver history report, a common or contract carrier shall, at least once every 12 months from the date of the last report, obtain a driver history for each driver operating under its authority from the appropriate agency of the state in which the driver held an operator's license during the time period. Compliance with this subsection does not relieve a common or contract carrier of the responsibility to ensure its drivers hold a current, valid driver's license.

(3) A copy of the driver history shall be maintained by the common or contract carrier for at least 2 years.

(b) Call or demand and limousine drivers.

(1) Prior to permitting a person to act as a call or demand or a limousine driver, a carrier shall obtain and review a driving history research report for the person from the Department of Transportation and other relevant sources. A person with more than three moving violations in the 3-year period prior to the check or a major violation in the 3-year period prior to the check may not be a call or demand or limousine driver.

(2) One year after engaging a driver and every second year thereafter, a carrier shall conduct the driving history check required under this subsection and verify that a driver continues to be eligible to be a driver.

(3) A copy of the driver history shall be maintained by the call or demand or limousine driver for at least 2 years.

Age restrictions.

(a) A common or contract carrier may permit a person to operate a vehicle in its authorized service if that person is at least 21 years of age.

(b) A common or contract carrier providing paratransit service may permit a person to operate a

paratransit vehicle in its authorized service if that person is at least 18 years of age but under 21 years of age if the following conditions are met:

(1) The person shall be registered as a certified emergency medical services vehicle operator (EMSVO) with the Department of Health (Department).

(2) The person shall carry the Department-issued registration of their EMSVO certification on board while operating a paratransit vehicle under 28 Pa. Code § 1023.21(h) (relating to general rights and responsibilities).

(3) The carrier shall verify that the paratransit driver is in good standing with the Department and maintain records for 4 years to prove each person's EMSVO certificate registration. The records must be available for inspection by Commission staff upon request.

(4) The carrier shall notify the Commission's Bureau of Technical Utility Services within 3 calendar days of the occurrence of the following events involving a paratransit driver who is under 21 years of age:

(i) an accident, regardless of the severity of the accident.

(ii) a driving-related violation such as a moving violation.

(iii) reckless driving.

(iv) driving under the influence of alcohol or drugs.

#### Criminal Background

PRIOR TO PROVISIONAL OFFER OF EMPLOYMENT, THE PROSPECTIVE EMPLOYEE, OF WHOM, IS OF 21 YEARS OR OLDER MUST GO THROUGH THE FOLLOWING PRE-SCREENING PROCESS:

- MEDICHECK EXCLUSION LIST

-NATIONAL BACKGROUND CHECK(IF HAVE NOT LIVED IN PA FOR REQUIRED TIME)

-CHILD ABUSE CLEARANCE

-DRIVING RECORD

After hire, employees will be screened on a monthly basis to ensure they do not appear on exclusion list for Medicare, Medicaid, or any other federal health plan program. If determined, they appear on this list, or do not pass background check and/or any other clearance, the person will be terminated from their position within thirty(30) days.

We will perform self-audits on a quarterly basis to ensure proper handling and to comply with regulations as per Policy.

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# Paratransit Vehicle Inspection Guide

Date: \_\_\_\_\_ Operator: \_\_\_\_\_ Unit #: \_\_\_\_\_

## Pre-Trip Inspection

### Interior:

#### *Wheelchair Securement System*

- Check to assure all necessary straps are present, including a spare set
- Check straps for damage, wear, dirt, debris, and contamination
- Check ratchet straps for proper operation (self-adjusting or manual)
- Check hooks and buckles for cracks, unusual bends, and rust
- Check vehicle securement tracks for debris, damage, or rust

#### *Equipment*

- Proper securement of loose/spare equipment (oxygen, spare wheelchair)
- Safety equipment (first aid kit, traffic vest, cones, flares, fire extinguisher, etc.)
- Passenger comfort items (umbrella, poncho, blankets, etc.)

### **Exterior:**

- Check for proper tire inflation or tire damage
- Check for body damage
- Check exterior lighting for proper function. Check lenses for cracks/clarity (All lighting to include high/low beam, turn signals, four way flashers, reverse, and brake lights)
- Check window glass for cracks/chips or obscured visibility

### **Lift System:**

#### ***Follow the manufacturer's recommended procedures***

- Check for damage, misaligned, or worn parts and hydraulic leaks
- Check door securement devices
- Check controller buttons and cables
- Operate lift (one complete cycle minimum) checking for smooth operation and speed
- Check lift lighting
- Traffic cones present to mark outside corners of lift deployment
- Check the roll stop plate for proper platform angle to ground
- Check for manual hand pump handle
- Check hand pump valve to assure it is properly closed

**Manual Ramp:**

- Check ramp for damage and proper stowage
- Traffic cones present to mark outside corners of ramp deployment
- Check for ease of operation
- Check proper angle to ground
- Check ramp surface (free from dirt and debris)
- Return ramp to stowed position (note excess noise or grinding)

**Please note any deficiencies:**

VERIFIED STATEMENT OF APPLICANT

DATE OF DEPOSIT

JAN 27 2025

1. MISS NUYGUNDI FRECKLETON

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

2. OWNER OF "N2G MEDICAL TRANSPORTATION LLC"

3. Owner is a nationally registered EMT with a background in non emergency transportation. She has worked in both Philadelphia as well as New York and has experience on all aspects of the industry. Her experienc, knowledge, dedication and eagerness to continue to learn makes her an excellent owner/operator.

3. FACILITIES INCLUDE A WELL ORGANIZED OFFICE SPACE WITH PROPER MAINTENANCE AND RECORD KEEPING AS PER PENNSYLVANIA STANDARDS.

THE FOLLOWING IS VEHICLE MAINTENANCE PROTOCOL:

THE VEHICLES OPERATED FOR THIRTY(30) CONSECUTIVE DAYS OR MORE, EXCEPT FOR A NON-BUSINESS PRIVATE MOTOR CARRIER OF PASSENGERS(PMCP), THE MOTOR CARRIER SHALL MAINTAIN, OR CAUSE TO BE MAINTAINED, THE FOLLOWING RECORD FOR EACH VEHICLE:

ALL IDENTIFICATION OF THE VEHICLE INCLUDING COMPANY NUMBER (IF MARKED), MAKE, SERIAL NUMBER, YEAR, AND VIN NUMBER. IF THE MOTOR VEHICLE IS NOT OWNED BY HELPING OTHERS TO LIVE, INC, THE RECORD MUST IDENTIFY THE PARTY PROVIDING, OR LEASING THE VEHICLE.

A MEANS TO SHOW THE NATURE AND DUE DATE OF THE VARIOUS INSPECTION AND MAINTENANCE OPERATIONS TO BE PERFORMED.

**A RECORD OF INSPECTION, REPAIRS, AND MAINTENANCE SHOWING THEIR DATE AND TYPE.**

**A RECORD OF TESTS CONDUCTED ON PUSHOUT WINDOWS, EMERGENCY DOORS, AND MARKINGS(IF APPLICATION).**

**UNSAFE OPERATIONS**

**COMMERCIAL MOTOR VEHICLES(CMV's) may not be operated in such a manner as to likely cause accident or a breakdown to vehicle.**

**ROADSIDE INSPECTION REPORTS**

**ANY DRIVER WHO RECEIVES A ROADSIDE INSPECTION REPORT, MUST DELIVER IT TO HIS/HER MANAGER OR EMPLOYER.**

## N2G TRANSPORTATION LLC POLICY

Currently our office is in a secured location with two computers, a phone, fax line and scanner. We plan to keep our trip sheets in a locked secure cabinet as well as have electronic capabilities and records through MediRoutes which is an online dispatch that can provide each transport with information including but not limited to: date, time, location, and signatures. We will download these trip sheets on a usb drive as well pdf so we may be able to provide all information in a timely manner whenever an on-spot inspection could occur.

I could receive communication thru telephone or electronic requests(website). I can communicate with all drivers thru telephone communication via phone or text and have capabilities to send information via MediRoutes.

**N2G MEDICAL TRANSPORTATION LLC NEW HIRE PROTOCOL**

**BACKGROUND CHECKS:**

- 1. State criminal history**
- 2. FBI criminal history (this shows the criminal history across the US, not just the current state)**
- 3. Department of Motor Vehicles (DMV) history**
- 4. Child abuse history**

## N2G MEDICAL TRANSPORTATION LLC

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- Project a professional image and attitude when dealing with patients, other agencies and fellow employees.
- Be familiar with company driving policies/standards and always drive in a safe and responsible manner.
- Adhere to Company dress code and personal appearance policies.
- Be familiar with safe lifting and moving techniques and be physically/mentally fit for the performance of job duties.
- Be familiar with all Company policies and procedures and any changes made to the same.
- Be familiar with Company management structure.
- Be familiar with all Company forms and their purposes.
- Demonstrate proper patient care documentation techniques and a working knowledge of all policies and forms as well as all required hardware and software programs.
- Assume responsibility for daily check of vehicle maintenance and mechanical Must inspect and report any vehicle damage or malfunction and check all fluid levels to insure they are replenished if necessary. Must refuel vehicle daily, noting vehicle number, mileage and driver-assigned PIN on all transactions.
- Assume responsibility for cleanliness of vehicle cab and cleaning vehicle exterior in conjunction with partner on a daily basis.

- Have a working knowledge of the Company communications systems and communications policies and procedures.
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  - Billing
- Driving Shuttle Programs
- Must report all incidents, accidents and problems to his/her immediate supervisor
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(b) A common or contract carrier providing paratransit service may permit a person to operate a paratransit vehicle in its authorized service if that person is at least 18 years of age but under 21 years of age if the following conditions are met:

(1) The person shall be registered as a certified emergency medical services vehicle operator (EMSVO) with the Department of Health (Department).

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(ii) a driving-related violation such as a moving violation.

(iii) reckless driving.

(iv) driving under the influence of alcohol or drugs.

#### **Criminal Background**

**PRIOR TO PROVISIONAL OFFER OF EMPLOYMENT, THE PROSPECTIVE EMPLOYEE, OF WHOM, IS OF 21 YEARS OR OLDER MUST GO THROUGH THE FOLLOWING PRE-SCREENING PROCESS:**

**- MEDICHECK EXCLUSION LIST**

**-NATIONAL BACKGROUND CHECK(IF HAVE NOT LIVED IN PA FOR REQUIRED TIME)**

**-CHILD ABUSE CLEARANCE**

**-DRIVING RECORD**

**After hire, employees will be screened on a monthly basis to ensure they do not appear on exclusion list for Medicare, Medicaid, or any other federal health plan program. If determined, they appear on this list, or do not pass background check and/or any other clearance, the person will be terminated from their position within thirty(30) days.**

**We will perform self-audits on a quarterly basis to ensure proper handling and to comply with regulations as per Policy.**

## STEPS TO OBTAINING COMMERCIAL AUTO INSURANCE

1. Commercial auto insurance is a contract between an insurance company and a business where the insurer agrees to protect the business financially should its vehicles get stolen, or involved in an accident.

2. Commercial auto insurance quotes are only as good as the info you provide. Make sure you supply the following details with accuracy:

The basic details of all company vehicles, including make, model and year of manufacture

Expected annual mileage of each vehicle

How the vehicles are used (e.g. if they are driven on weird terrain or transport crazy stuff like hazardous materials)

Who will be transported by each vehicle (i.e. will it be just your employees or will there be other, non-employee passengers)

The ages of all drivers who will be using the vehicle(s)

A record of any existing/past company insurance

Your business address and where the vehicle(s) will be stored when not in use

The type of insurance coverage you need, including additional coverage you might want (i.e. towing or roadside assistance)

Credit scores for all drivers of the vehicle

Accident records for all drivers of the vehicle

3. Comparing quotes by yourself can be pretty complicated. You've gotta keep things like an insurer's claims process, customer service and reputation in mind when choosing which is right for you.

An independent agent can make your life a lot easier—at least through this process. They're not tied down to one insurance company, so they're free to shop around, compare and

assemble all the pieces of the puzzle even if they end up coming from multiple carriers.

4. You Must Tell your agent all pertinent information. The amount of coverage you'll want in each aspect of the policy (e.g. collision, comprehensive, liability and uninsured/underinsured motorists)

The limit of what you're willing to pay out of pocket towards a deductible, should an accident occur

Any factors that could up the risk factor of your policy (like an employee who always blasts speed metal while driving with a lead foot)

Ask for and discuss any deals or incentive payment plans (i.e. discounts for paying annually vs. monthly)

Pick the best coverage for your business

**ONCE COVERAGE WAS OBTAINED, IT IS IMPORTANT TO N2G MEDICAL TRANSPORTATION LLC TO HAVE THIS PUC AUTHORITY, AND TRANSPORT INDIVIDUALS. THE POLICY WILL BE KEPT CURRENT IN PAYMENTS.**

## SAFE TRANSPORTATION POLICY

### Policy:

To protect participant health and safety when "N2G MEDICAL TRANSPORTATION LLC" is responsible for providing transportation the agency promote safe driving practices, with provisions for handling emergency situations.

Driving/transporting participants is an essential job function at N2G MEDICAL TRANSPORTATION LLC.

Employees must be mindful that they are a representative of "N2G MEDICAL TRANSPORTATION LLC" while transporting participants in agency vehicles. If there are accurate complaints of employees committing driving infractions, they may be subject to disciplinary actions, including termination from employment.

### Vehicles - Personal Support

#### General Transportation Procedures:

The Program Director or Coordinator will ensure that all employees who transport participants have a current, valid driver's license and are properly insured.

Employees must report any driving violations, lapse in personal insurance, revocation of driver's license, DUI's or accidents immediately to immediate supervisor.

All employees will follow procedures to ensure safe transportation, handling, and transfers of participants and any equipment used by participants when assisting with transportation, whether or not we are providing the transportation. When we responsible for transportation of the participant or their equipment, employees will utilize the following assistive techniques:

All employees must wear their Employee ID in a visible manner while transporting participants to and from school, home, and/or residence.

Employees will provide assistance with seatbelts, as needed to ensure they are correctly fastened;

Employees will assist with the use of any ramp or step stools to ensure safe entry and exit from the vehicle;

When the vehicle is in motion, seatbelts are to be worn at all times by all passengers, including the driver;

Employees will comply with all seat belt and child passenger restraint system requirements under PA statues when transporting a child;

Employees will ensure all supplies or equipment, including wheelchairs and walkers or other mobility aids or specialized equipment used by the participant is properly secured before the vehicle is in motion;

Employees must be prepared to intervene in order to maintain safety if a participant being transported engages in behavior that puts the participant, the driver, or other passengers at risk of immediate danger of physical harm.

Employees will assure the following information is with them whenever transporting participants:

Participant Information Form or One Page Profile, including name and phone number of person(s) to call in case of emergency, must be kept according to data privacy policies;

Proof of insurance card and vehicle registration.

All employees are required to follow all traffic safety laws while operating vehicles. Employees will be responsible for paying for any fines or tickets issued by law enforcement.

All employees are prohibited from smoking, eating, drinking, or using cellular phones or other mobile devices while operating vehicles.

Procedures in Case of Accident:

If employees are involved in an accident they will follow these instructions in the order given:

Do not leave the scene of the accident or move the vehicle unless you and the participants are in immediate danger;

Evaluate the condition of yourself and the participants. Administer First Aid as necessary;

Call the non-emergency police number for your community or call 911 to alert police if immediate medical attention is needed; if you are driving a busette, you must call the State Patrol as they need to complete an on-site investigation.

Solicit aid from passing motorists, if necessary;

Supply authorities and/or other drivers with accurate and complete information leading up to and involving the accident;

Report back to the Program Director as soon as possible;

Follow "N2G MEDICAL TRANSPORTATION LLC" policy & procedures for reporting incidents.

#### Vehicles Owned or Leased

##### Procedures for Verification of Insurance and Driving Record Checks:

Human Resources staff will request verification of proof of insurance bi-annually for all employees whose job function requires them to drive.

Human Resources staff will request verification of a valid driver's license for all Forever Care employees annually.

Human Resources staff will complete a motor vehicle driving record check on all employees whose job function requires them to drive.

Employees must report any driving violations, lapse in personal insurance, revocation of driver's license, DUI's or accidents immediately to immediate supervisor.

Human resources staff will provide Program Directors with a list of all employees who have current, valid driver's licenses and are properly insured. Employees cannot drive an agency vehicle or transport participants if they do not have a valid driver's license or are uninsurable.

##### Procedures for Defensive Driving Training:

Program Director or Coordinator will assure all employees who drive vehicles during the course of their employment, whether agency vehicles or personal vehicles, complete defensive driving training upon hire, yearly, and as needed.

The Program Director or Coordinator may require individual employees to take a driving safety course as a result of a driving violation.

##### General Procedures:

When we responsible for transportation of the participant or their equipment, employees will assure the following:

All employees must wear their Employee ID in a visible manner while transporting

participants to and from school, home, and/or residence.

When the vehicle is in motion, seatbelts are to be worn at all times by all passengers, including the driver;

Employees will comply with all seat belt and child passenger restraint system requirements under PA Statutes, when transporting a child;

Employees must be prepared to intervene in order to maintain safety if a participant being transported engages in behavior that puts the participant, the driver, or other passengers at risk of immediate danger of physical harm.

Keys should not be left in the vehicle at any time unless in operation. Keys must be in the driver's possession at all times;

Vehicles should not be left running unattended with or without participants in the vehicle;

Lock all doors on vehicles when not in use;

In the event employees need to leave participants inside the vehicle during transfers or drop offs, the vehicle must be turned off and keys must be removed from the ignition;

Vehicles that are marked 'STOPS AT RR CROSSINGS' are required to stop at all railroad crossings. When approaching railroad tracks, move into the right hand lane, put your hazards on a block ahead of time and come to a slow and complete stop. After looking both ways, proceed on your way, turn off your hazards;

Radio volume must be kept low enough so as not to distract the driver at any time. The driver should have the ability to hear participants in the back seats talking in a normal voice, emergency vehicles, or warnings from other drivers, etc;

Seats and wheelchairs should not be in a reclined position when the vehicle is in operation. Wheelchairs must face forward at all times;

Cell phones cannot be used during the active operation of a vehicle or wheelchair lift or while loading and unloading participants. Ear buds cannot be used. Calls should be returned later or limited to times when the vehicle is properly parked and inactive. Pull over immediately to a safe place if a call must be made;

If behaviors occur while on a route, the driver should pull over to a safe location and call the appropriate Program Director for assistance.

Employees must supervise all participants at all times around all vehicles;

Always be aware of the width and height of your vehicle. Some vehicles are wider or taller than average;

Employees will assure the following information is with them whenever transporting participants:

Participant Information Form or One Page Profile

Name and phone number of person(s) to call in case of emergency;

First aid kit;

Proof of insurance card and vehicle registration.

All employees are required to follow all traffic safety laws while operating vehicles. Employees will be responsible for paying for any fines or tickets issued by law enforcement.

All employees are prohibited from smoking, eating, drinking, or using cellular phones or other mobile devices while operating vehicles.

Procedures for Medication Transport and Administration:

Drivers cannot give medication to participants except in emergency situations and if the driver is certified to do so.

Procedures for Fueling Vehicles:

When the tank reaches half full employees must refuel the vehicle.

Fuel is the only purchase that can be made unless approval has been given by a supervisor prior to purchase.

After filling agency vehicles, employees will collect the receipt, print their name, initial the receipt, and write the name/number of the vehicle on the front side of the receipt.

Employees will turn the receipts into their Program Director daily.

Procedures Prior to Operating Vehicles:

All employees must follow the Vehicle Safety Checklist prior to operating vehicles.

Employees must adjust mirrors prior to operating vehicle.

Employees must assure lights are turned on whenever driving vehicles.

Before operating any vehicle, employees must identify the location of the first aid kit and fire extinguisher.

**Procedures for Loading and Unloading Participants:**

Load participants in a safe and orderly fashion.

Review seating arrangements. Think about pick up and drop off order when determining where individuals sit.

Before loading a vehicle, if a participant is exhibiting behaviors that are unsafe or pose a threat to others, the driver can refuse to provide transportation. All participants should be calm when entering a vehicle.

Employees will provide assistance with seatbelts, as needed to ensure they are correctly fastened.

Employees will assist with the use of any ramp or step stools to ensure safe entry and exit from the vehicle.

Employees will ensure all supplies or equipment, including wheelchairs and walkers or other mobility aids or specialized equipment used by the participant is properly secured before the vehicle is in motion.

Ambulatory participants cannot use wheelchairs as seating.

Participants' personal items will be taken care of by the driver as needed. If possible, all items should be stored under the seat.

Cell phones cannot be used while the wheelchair lift is being operated or while participants are being loaded or unloaded.

As a safety measure, employees should open and close all doors. Employees must supervise and know where all of the participants are at all times before closing the doors. Do not slam doors;

Employees should assist at doors to ensure participants are clear of the door.

All wheelchair securements should be retracted and turned out or removed from pathways.

It is imperative that employees monitor the safe entry and exit of each participant in vehicles. This means not only watching and observing, but actually placing yourself right at the entrance/exit point so you can offer physical assistance to all those who need it and are prepared to support people so they do not fall.

**Procedures for Loading Wheelchairs into Vehicles:**

Park the vehicle where there is enough room to extend the lift to the ground.

Vehicle may or may not need to be running in order for the lift to work. If the vehicle must be running be sure the vehicle is in park and the emergency brake is engaged.

Use the deploy button to lay the ramp flat. If necessary, pull on the ramp to get it started. If the ramp seems stuck, report the problem to the Program Director as soon as possible.

Use the down button to lower the ramp to the ground.

**ALWAYS** explain to participants what you are doing while assisting them.

Roll the wheelchair onto the ramp with the participant facing out, away from the van. If the wheelchair cannot be turned around inside the van, the wheelchair may be loaded with the participant facing into the van.

Set the brakes or turn off the power to the wheelchair.

Secure the safety belt on the ramp if present. The belt should not be tight across the participant but must be short enough to keep the participant from rolling off the ramp. Lifts will not operate if the belt is not secured.

Use the up button to raise the ramp.

After the ramp is raised to the entry point, unlock the brake or turn on the wheelchair.

Maneuver the wheelchair into the van so the wheelchair is facing forward. If necessary, the wheelchair may face sideways but only if unable to face the wheelchair forward. **NEVER** face a wheelchair backwards in a vehicle.

Set the brakes or turn off power to the wheelchair.

Place securements on designated areas on wheelchairs or on the wheelchair frame.

Do not put the securement tie downs on any removable part of the wheelchair (e.g. arm rests, leg rests, wheels, etc.)

After securements are attached to the wheelchair, place the seatbelt around the wheelchair, as close to the hips as possible. The seatbelt should go under any tray on the wheelchair and may be strung through armrests if necessary.

Use the stow button to raise the lift for storage.

Procedures for Unloading Wheelchairs from Vehicles:

Use the deploy button to lay the ramp flat.

ALWAYS explain to participants what you are doing while assisting them.

Unlock the seatbelt from the participant.

Unlatch the securements from the wheelchair. Be sure securements are retracted.

Unlock the brake or turn on the power to the wheelchair.

Turn the wheelchair to face out of the van if possible.

Push the wheelchair onto the lift.

Set the wheelchair brakes or turn off power to the wheelchair.

Place the belt under any trays and as close to the hips as possible. The belt should not be tight across the participant but must be short enough to keep the participant from rolling off the ramp.

Use the down button to lower the ramp to the ground.

Remove the safety belt.

Unlock the wheelchair brakes or turn on the power to the wheelchair.

Move the wheelchair off the ramp.

Secure the safety belt. The lift will not work if the belt is not secured.

Use the up button to raise the lift.

Use the stow button to raise the lift for storage.

Procedures for Backing Up Vehicles:

Backing up vehicles is not preferred unless it is absolutely necessary. When stopping, park in

such a way as to avoid backing up whenever possible.

If it can be avoided do not pull into neighborhood driveways.

Participants cannot be loaded or unloaded into a line of traffic. If it is safest for the participant, vehicles may be pulled into driveways.

If a vehicle must be backed up, employees must first walk around the vehicle to ensure there are no obstructions.

#### Procedures for Parking Vehicles

If possible, when there is more than one employee, a staff member and participant(s) should be dropped off at the entrance. The other employee will then park the vehicle. The same should occur upon departure.

Regular and handicap parking spots will accommodate mini-vans and larger vans. Busettes should only be parked in handicap spots that are vertical to the entrance. However, it is preferred that employees park in a spot where a larger vehicle can pull in and pull out rather than backing up; this may mean parking towards the back of the lot. It is acceptable to use both the front and rear spot if the vehicle is longer than the space assigned.

Participants cannot be loaded or unloaded into line of traffic so consider this when parking a vehicle.

If you must back out of a parking spot, be aware of the surroundings and note the vehicles behind you and on each side. If two employees are present, one employee should watch for pedestrians or oncoming vehicles and warn the driver.

Take extra precaution when backing out, paying extra attention to side mirrors both on agency vehicles and the vehicles adjacent.

#### Procedures for Picking Up Participants:

In the mornings, pick up times may be scheduled around the times homes are staffed.

Employees will follow the route guides that indicate the driving route and times participants are to be picked up.

It is important to be prompt and on time. If a vehicle is late, this may result in a missed

connection for transportation to worksites or other vehicles. If you are running late call the appropriate Program Director so others can be informed of the delay.

Drivers are not to go into residences to assist participants in getting ready for transportation.

Residential staff members should assist participants from the home to the vehicle. If they are unable to assist participants from the home to the vehicle, drivers should help.

Drivers are responsible for helping participants into the vehicle.

The wait time begins at the regularly scheduled pick up time, even if the driver arrives early.

If a participant is not outside waiting or does not exit the house upon the driver's arrival, the driver will wait 3 minutes beyond the scheduled pick up time. The driver will then ring the doorbell or knock. After an additional 2 minutes, if the participant has not exited the house, the driver will leave. The driver should inform the Managers that member the vehicle will be leaving. It is then the responsibility of the residential provider to provide transportation for the participant.

If the participant does not get on the van in the allotted time, the driver should contact their Program Director or Coordinator.

**Procedures for Dropping Off Participants:**

Participant eligibility for unsupervised drop offs will be identified on an individual basis. Eligibility will be communicated in writing to the agency providing transportation services. The IAPP or participant information will state if the participant can be dropped off without supervision.

If a participant requires a supervised drop off employees will wait until there is physical communication with someone at the home before departing.

Employees will follow the route guides that indicate the driving route and times participants are to be dropped off.

It is important to be prompt and on time. If a vehicle is late, this may result in a missed connection for transportation to worksites or other vehicles. If you are running late call the appropriate Program Director or Coordinator so others can be informed of the delay.

When participants are dropped off at home, the employee is responsible for assisting participants out of the vehicle. Someone at the participant's home is responsible for assisting participants

from the vehicle to the home. If someone at the home is unable to assist, the employee should help participants into the home.

If someone at the home is not waiting outside or does not exit the house upon the vehicles arrival, employees will call the home using the agency vehicle cell phone. If there is no answer employees will wait 2 minutes before going to the door and knocking. If there is no answer, employees will call the residential main office or parent/legal representative to inform them of the situation. The employee and the contact will agree on an alternative location where the participant can be taken. A transfer of responsibility will occur at the alternative location and not interrupt the other participants drop off times.

#### Procedures for Using Handicapped Parking:

It is important to follow all guidelines of Commercial Disability (handicap parking) certificates.

Misuse may result in revocation of any certificates now or in the future by the State Driver and Vehicle Service Department:

Handicap certificates are only kept in certain vehicles. If there is not one in a vehicle contact the Program Director.

If a Commercial Disability certificate is missing from a vehicle, inform the Program Director as soon as possible.

Commercial Disability certificates are to be used for individuals with physical limitations only.

If parking in a handicap parking space, it is required to hang a handicap parking certificate from the rearview mirror so it is visible from the front and the rear of the vehicle. This applies to any handicap parking spaces including at worksites.

When displaying a handicap certificate, parking is allowed in handicap designated parking spaces and metered parking spaces without obligation to pay the meter fee.

Employees should place the certificate in the glove compartment or binder when done using it. It is illegal to have the certificate on the mirror while driving.

Commercial Disability certificates do not permit parking in "NO PARKING" spaces or in spaces

designated for specific purposes or vehicles (e.g. emergency vehicles only, truck unloading areas).

#### Procedures in Case of Accident:

If employees are involved in an accident they will follow these instructions in the order given:

Do not leave the scene of the accident or move the vehicle unless you and the participants are in immediate danger;

Evaluate the condition of yourself and the participants. Administer First Aid as necessary;

Call the non-emergency police number for your community or call 911 to alert police if immediate medical attention is needed;

Solicit aid from passing motorists, if necessary;

Supply authorities and/or other drivers with accurate and complete information leading up to and involving the accident;

An insurance information card and a vehicle accident procedure card are in every agency vehicle. These are located in the binder;

Report back to the Program Director as soon as possible;

Follow Bethel Inc policy & procedures for reporting incidents.

#### Procedures for Winter Driving:

Safety first. There is no place that you have to be that warrants taking risks and placing yourself, your participants, or others in jeopardy.

Slow down. Allow yourself extra time to get to your destination.

Allow increased distance between vehicles.

Do not pump anti-lock brakes.

Do not use cruise control on wet or icy roads.

Do not turn, brake, or accelerate too fast.

Do not follow snow plows too closely.

Remove all snow and ice from all windows, vehicle hoods, and vehicle roofs.

**Procedures for Inclement Weather:**

In the event of bad weather, every precaution should be taken to ensure the safety of employees and participants being transported.

**Procedures for Weather Emergencies:**

Evacuate the vehicle and move everyone to the nearest building or substantial structure at least 200 feet away from the vehicle if possible.

Take the First Aid Kit when evacuating the vehicle.

In the shelter, instruct all ambulatory participants to lie face down with their hands clasped behind their heads. Ensure participants who use a wheelchair are in a location where they will be safe from falling or flying debris.

If an adequate shelter cannot be reached without further endangerment, a ditch or depression in the immediate vicinity will have to be used.

Instruct everyone to lie face down in the ditch or depression with their hands clasped behind their heads. Assist wheelchair participants out of their chairs and help them to lie face down in the ditch or depression.

Once the danger has passed, assess the need for medical attention. Administer First Aid as necessary.

Call for assistance if needed.

**Procedures if Vehicle Breaks Down:**

Pull over to the side of the road as safely as possible.

Turn on emergency flashers and use the emergency triangles if available.

If a cell phone is available, call a Program Director, give details of where you are located and what happened.

If there is not a cell phone available, try to flag someone down and ask them to call Forever Care main office.

Do not leave participants alone or send a client for help.

Depending on where you are, the participants you have with you, and weather conditions, you can consider taking participants with you and walking to the nearest phone.

On evenings or weekends, call a call Program Director or Coordinator for assistance.

**Procedures for Evacuating Vehicle (engine fire, submerged vehicle):**

**Stay calm.**

**Assess the situation.**

**Assess and utilize all available exits.**

**Assess your participants' abilities and any equipment which may also need to be evacuated (e.g. oxygen tanks).**

**Assist participants with unlatching seatbelts and exiting the vehicle.**

**If unable to unlatch belts, use the seatbelt cutter supplied in the vehicle to cut seatbelt straps.**

**Move all participants away from the vehicle to a safe location.**



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