

## 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)

Community Connection Transportation L.L.C.

- 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 0013925618  
(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).

Elijah Mims Owner  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Mailing Address**

436 North Main Street #1067  
Street Address  
Doylertown, PA 18901 Bucks  
City, State and Zip Code County  
908-625-7868 emims@cctransportation.org  
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.)

2003 South Easton Road Suite 308 Office 3  
Street Address  
Doylertown, PA 18901 Bucks  
City, State and Zip Code County  
908-625-7868 emims@cctransportation.org  
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).

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*To transport, as a common carrier, by motor vehicle, persons in Paratransit Service, from points in Bucks County, to points in Pennsylvania, and return.*

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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.

Legal Name of Applicant  
Elijah Mims  
Trade Name, if any  
(Print Name)  
City or Municipality  
State  
Zip Code  
Principal place of business

Elijah Mims (Signature) 7/22/25 (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).

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

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.

# 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.

Elijah Mims  
Legal Name of Applicant

Community Connection Transportation L.L.C.  
Trade Name, if any

436 North Main Street # 1067      Doylestown      PA      18901  
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.
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.

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.

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.

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:
- 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).

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

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

YES  NO

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

### 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.

Elijah Mims

(Signature)

Elijah Mims, Owner

(Name and Title, printed or typed)

7/22/25

(Date)

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

As of (date) 7/22/25

(Must be less than 6 months old)

ASSETS

Current Assets		
Cash	<u>13,804.07</u>	
Other Current Assets (specify)	<u>N/A</u>	
Total Current Assets		<u>13,804.07</u>
Tangible Assets		
Motor Vehicle Equipment	<u>N/A</u>	
Property (buildings, land, etc.)	<u>N/A</u>	<u>N/A</u>
Office Equipment		
	<b>TOTAL ASSETS</b>	<u>13,804.07</u>

LIABILITIES

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

## **VERIFIED STATEMENT OF APPLICANT**

1. The person making the verified statement on behalf of the applicant is Elijah Mims. Elijah Mims is the owner of Community Connection Transportation which is located at 436 North Main Street #1067 Doylestown, PA. The phone number at which the business can be reached is 908-625-7868.
2. I am one of the owners of Ambucab LLC. a non-emergency medical transportation company. I was formerly the day-to-day operations manager with Ambucab LLC. I currently still own 33% of Ambucab LLC. However, I have stepped back from any of the day-to-day operations to focus entirely on Community Connection Transportation.
3. The business experience I possess comes in the form of running the day-to-day operations of Ambucab LLC. for four years. Ambucab LLC. is a non-emergency medical transportation company. I oversaw the safe and reliable transportation of individuals with medical needs. My role involved managing operations, ensuring compliance with regulations, coordinating with healthcare providers and delivering timely and compassionate service to clients.
4. Community Connection Transportation will operate from a leased space at 2003 South Easton Road Suite 308 office #3, Doylestown PA, 18901. The facility includes a dedicated area for vehicle storage and maintenance, and is equipped with 24-hour surveillance and fencing. We maintain records both digitally and physically. Digital records, including trip logs, maintenance reports, and employee data, are securely stored in a cloud-based system with encrypted backups conducted daily. Physical records are stored in locked file cabinets in a secure space. Access to records is restricted to authorized personnel only, in compliance with federal and state data security regulations. In terms of communication, we use a robust communication network that includes cell phones for real-time communication between drivers and dispatch. Our dispatch software allows for seamless scheduling and route optimization, ensuring that drivers receive updates promptly. Clients are notified of their upcoming trips via automated text messages or phone

calls. In case of service disruptions or emergencies, we use a priority communication system that instantly informs both clients and staff of any changes.

5. Community Connection Transportation intends to use two full-time drivers and a part time driver for the weekend hours. This shall be appropriate for the area we serve because the trips will be prescheduled. We'd have the choice to accept or decline any trips we're not capable of handling for whatever reason may arise such as a scheduling conflict. The drivers will be on prescheduled routes, and will only have one patient per vehicle.

A. The hiring standards for drivers are that all drivers are required to have a current, valid driver's license, and be 21 years of age or older.

B. Applicants are given a criminal history records check through the Pennsylvania State Police. In addition to that applicants are required to submit to a federal criminal history records check before they are hired through a service called Identgo. After the driver is hired there is a new criminal history record obtained from the Pennsylvania State Police every two years. Community Connection Transportation LLC does not permit any person to operate vehicles in its authorized service who have been convicted of a felony, or misdemeanor to the extent the conviction relates adversely to that person's suitability to provide service safely and legally. Copies of the criminal history are kept on file for at least 3 years.

C. At Community Connect Transportation, drivers are required to complete a comprehensive set of training courses to ensure they meet the company's standards for safety, professionalism, and customer service. Each driver must first take a defensive driving course, which focuses on techniques to prevent accidents, handle road hazards, and drive proactively to ensure the safety of passengers. This course covers safe following distances, proper signaling, and handling adverse weather conditions. Next, drivers must complete a passenger assistance and mobility device training. This course teaches the proper procedures for helping passengers enter and exit the vehicle, especially those with mobility challenges. Drivers will learn how to secure wheelchairs, use ramps and lifts, and ensure that all passengers are comfortably and safely seated before the

vehicle moves. Drivers also take an emergency response training course that equips them with the skills to handle medical emergencies, vehicle breakdowns, and accidents. This course includes basic first aid, CPR, and protocols for contacting emergency services when necessary. It also covers how to manage incidents, from immediate safety measures to proper reporting and documentation. Lastly, drivers must take a drug and alcohol awareness training, which reinforces the company's zero-tolerance policy and educates drivers on the importance of maintaining a drug and alcohol-free work environment. This course includes information on random testing procedures and the consequences of non-compliance. Once these courses are successfully completed, drivers will undergo a written exam and a road test to ensure they can apply the knowledge learned.

D. Driver's license checks are conducted through obtaining the driver history from the appropriate agency of every state in which that person has held a driver's license or permit during the preceding 3 years. If the driver is hired there will be a driver history report obtained once every 12 months from the date of the last report. A copy of the driver history is maintained for at least 2 years.

E. The policies regarding alcohol and drug use are as stated. A driver may not use alcohol, be under the influence of alcohol, or have any measured alcohol concentration or detected presence of alcohol, while operating a vehicle in passenger service. A driver may not use a controlled substance or have any measured concentration or detected presence of a controlled substance, while operating a vehicle in passenger service

6. We intend to start off with one vehicle, the vehicle will be an ADA compliant vehicle I intend to finance. The vehicle will be a brand new 2024 Chrysler Pacifica Touring Rear Entry wheelchair van by BraunAbility. This vehicle has a capacity for up to 7 passengers and can fit two wheelchair positions as well. This will adequately service the desired area because we can only accept as many passengers as our vehicles can handle. So, there won't be any sort of issues servicing the

passengers we're given because the hospitals will only allow you to accept the number of patients that your vehicles can provide for.

7. Our Vehicle Safety Program is designed to ensure the highest standards of safety and compliance for our fleet, aligned with Pennsylvania's regulations (67 Pa Code, Chapter 175). The program includes a comprehensive periodic vehicle maintenance plan and a compliance assurance system.

A. Periodic Vehicle Maintenance Plan:

- Regular Inspections: All vehicles undergo routine inspections on a monthly basis to check critical components such as brakes, tires, lights, steering, and exhaust systems.
- Preventive Maintenance: In addition to inspections, we follow a preventive maintenance schedule based on manufacturer recommendations, ensuring key systems like the engine, transmission, and electrical components are serviced regularly.
- Record Keeping: Detailed maintenance logs are maintained for every vehicle, tracking inspections, repairs, and service dates to ensure timely upkeep.

B. Compliance Assurance with Pennsylvania Vehicle Standards (67 Pa Code, Chapter 175):

- Adherence to State Regulations: Our vehicles are consistently maintained to meet or exceed the requirements outlined in Pennsylvania's vehicle safety and emissions standards (67 Pa Code, Chapter 175).
- Annual State Inspections: All vehicles undergo mandatory annual Pennsylvania state inspections by certified mechanics to verify compliance with safety and emissions standards.

- Ongoing Monitoring: We utilize fleet management software to continuously monitor vehicle performance, alerting us to potential issues before they result in non-compliance or safety hazards.

- Driver Reporting System: Drivers are required to conduct daily vehicle checks and immediately report any issues, ensuring prompt attention to any safety concerns.

Through regular maintenance, monitoring, and adherence to state regulations, our vehicle safety program ensures a safe and reliable fleet that is fully compliant with Pennsylvania standards.

8. The steps I have taken to determine if I can obtain insurance and pay the premiums include reaching out to and receiving multiples quotes for commercial insurance through a broker. I provided her with the details on an ADA compliant vehicle I intend to finance. The vehicle is a brand new 2024 Chrysler Pacifica Touring commercial wheelchair van with a capacity for up to 7 passengers. By doing this I found out how much I could expect to pay. The amount given would work with the current budget available.