

A-2025-3058076

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

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

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6. Mailing Address

05 Farm View Dr.
Street Address

Allensville Pa. 17002
City, State and Zip Code County

717-250-8584 rudysharp13@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 from Mailing Address)

_____ 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. _____



Rudy Sharp
5 Farm View Drive
Allensville PA 17002

HARRISBURG PA 171

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Pa. Public Utility Commission
Commonwealth Keystone Building
400 North St.
Harrisburg PA. 17120

Attn. Sec. Homsher

17120-007999

