

**APPLICATION FOR APPROVAL OF ABANDONMENT OR  
DISCONTINUANCE OF SERVICE, IN WHOLE OR IN PART**

BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

(See Instructions Before Preparing Application)

Utility # A - 6425322  
Docket # \_\_\_\_\_

For approval of the abandonment or discontinuance of common carrier service.

TO PENNSYLVANIA PUBLIC UTILITY COMMISSION:

1. William Spinapont A-6425322  
(Name of applicant, and trade name, as it appears on the Certificate  
of Public Convenience.)  
3 Locust Lane  
(Business Street Address)  
Airville Pa 17302 York  
(City) (State) (Zip) (County)

2. If applicable, applicant's attorney (for this application) is:

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

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Telephone/ Email)

3. Any notice, process or order of the PUC should be served to:  
(Please mark one)

▪ Mail to the address listed above.

Email to: SuzanneSpinapont@yahoo.com

Mail to my new address as follows. (Note, the Commission will not serve documents to consultants or insurance agents.)

467 Martic Heights Dr  
Holtwood, Pa. 17352

4. This application is for the discontinuance of Amish Para transport  46  
the service now authorized. (All or Part, service type)

5. Approval of the application is necessary or proper for the following reasons:

- Health related conditions prevent from sitting for long periods of time  
- Extreme arthritis and pain  
- Surgery(s) scheduled/therapy

Wherefore, Applicant requests the Commission to cancel, or amend the certificate of public convenience, as now held, in conformance with the application.

Applicant sign here:



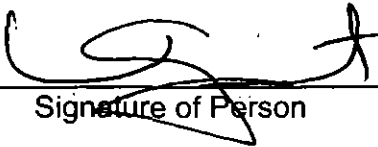
William Spinapont

(If a partnership, each partner must sign; if a corporation, at least one officer must sign.)

**VERIFICATION**

William Spinapont hereby states that the statements made in the  
(Name of Person)

foregoing are true and correct to the best of his/her knowledge, information and belief. The undersigned understands that the estimates therein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

  
Signature of Person

Date: Oct. 20, 2025

William Spinapont  
467 Martic Heights Dr  
Holtwood, Pa. 17532

HARRISBURG PA 171  
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Pennsylvania Public Utility Commission  
400 North Street  
Harrisburg, PA.  
17120

17120-007999

