

Secretary
Pennsylvania Public Utility
Commission 400 North Street,
Second Floor Harrisburg, PA
17120
717.787.3834
www.puc.pa.gov

Application for Motor Common Carrier or Motor Contract Carrier of Household Goods in Use.

THIS APPLICATION IS REQUIRED TO REQUEST A CERTIFICATE OF PUBLIC CONVENIENCE (FOR COMMON CARRIERS) OR PERMIT (FOR CONTRACT CARRIERS) TO OPERATE AS A COMMERCIAL CARRIER OF HOUSEHOLD GOODS IN USE.

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

T7 Moving and Transportation Ltd.

- 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)

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?** ___NO

If YES, at PUC No. A- 8925932

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)

If YES, provide your PA Corporation Bureau Entity ID Number _ 7621803

(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).**

Sean M. Keehn (100% ownership) _____

6. **Mailing Address**

1388 South Keim Street
Street Address
Pottstown PA 19465 Chester
City, State and Zip Code County
484-300-0203 SeanMKeehn@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. Do not use a PO 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 **X** Yes, at No. 4002501

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 household goods, in use, between points in Pennsylvania

Examples:

- *To transport household goods in use between points in Pennsylvania.*
- *To transport household goods in use from points in Centre County to points in Pennsylvania, and vice versa.*

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 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. Section 4904 relating to unsworn falsification to authorities.

Sean M. Keehn

(Print Name)



10/21/2025

(Signature)

(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).

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.

Sean Michael Keehn – T7 Moving and Transportation Ltd.

Legal Name of Applicant

Trade Name, if any

1388 South Keim Street Street Address (principal place of business)	Pottstown City or Municipality	PA State	19465 Zip Code
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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.

Sean Michael Keehn, Owner – 1388 South Keim Street, Pottstown PA 19465 – 484.300.0203

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

no other affiliation

3. Please provide evidence of minimum of two-years' experience with a licensed household goods carrier or the equivalent as required by 52 Pa. Code §3.381(c)(1)(iii)(A)(II)(-I-).

Sean Michael Keehn has been operating T7 Moving and Transportation Ltd. as a licensed household goods moving company since October 10th, 2023

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.

Facilities: 1000+ square feet of storage area (for company's moving supplies – not paid storage) with parking space for 3+ trucks and working electric and battery-powered cameras.

Maintenance Plan: Maintain diligence to regular truck inspections. Inspect trucks 2 times per week. Ensure that drivers know the proper pre-trip & post-trip inspection steps. Budget 10% of revenue for truck repairs.

Communication Network: Cell Phones, GPS, Text, Email for team. Office Computer (Email) and Cell Phone (Call, Text) for DOT, PUC, Customer, and all other necessary communications.

We will maintain necessary records and files through organizational files addressed to individual government agencies, businesses, customers, etc..

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

- A) Drug Testing, MVR's, Character Evaluations, Background Checks, Leadership Capability Evaluations, Previous Experience, Perceived Open-mindedness and Willingness to Learn and Grow, Etiquette Checks.
- B) We will do PA State Police background checks as required by the PUC and also use Checkr to conduct criminal background checks. MVR's will also expand on recent driving history, and Drug Testing will expand on recent activity --- whether or not it is shown in a background check.
- C) We will consistently work to expand opportunities for help that proves to be open-minded into more challenging positions --- through pre-trip and post-trip inspection testing, road knowledge testing, character evaluations, and documented claim / damage reports for individual drivers. Drivers will be motivated to grow with the company with monetary incentives --- to reward safe driving and safe handling practices with higher pay. Our GM will walk through the dangers of ignorant, intoxicated, fatigued, lackadaisical etc. driving of commercial vehicles with all drivers, and will set expectations as well as consequences within the company --- as well as advise and teach of the many legal complications that could occur for the driver and company should drivers not follow regulations. New drivers will begin driving with others who have a proven, safe driving record.
- D) E-Verify.gov
- E) No Use of Schedule 1 Drugs. No use of any drugs while on duty that will affect driving ability, and which have not been approved for safe driving by a doctor. No alcohol consumption 6 hours before shift begins. Surprise, random drug and alcohol tests. No drinking on the job, of course (for anyone in fact). Supervisors must take the DOT's Reasonable Suspicion Course and pass with knowledge they can demonstrate.

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.

YEAR	MAKE	MODEL	SEATING CAPACITY*	VEHICLE ID #	MILEAGE
2004	Chevrolet	G3500 Express	2	1GBJG31UX41244472	259,277
2010	Kenworth	T270	3	2NKHHM6X0AM272431	223,848

Statement of Financial Position (Balance Sheet)

As of (date) _____
 (Must be less than 6 months old)

ASSETS

Current Assets			
Cash		55,000	
Other Current Assets (specify)		_____	
Total Current Assets		Total: \$55,000	_____
Tangible Assets			
Motor Vehicle Equipment		\$35,000	
Property (buildings, land, etc.)		\$15,000	
Office Equipment		Total: \$50,000	
	TOTAL ASSETS		\$105,000

LIABILITIES

Current Liabilities (Due within one year of date)			
Loans		\$0	
Credit cards/revolving credit		\$0	
Other Liabilities (Attach schedule)		\$10,000 (Insurance)	
Total Current Liabilities		Total: \$10,000	_____
Long Term Liabilities (Due after one year of date)			
Mortgage		\$0	
Long term commercial loan		\$0	
Other Liabilities (Attach Schedule)		\$0	
Total Long-Term Liabilities		Total: \$0	
	TOTAL LIABILITIES		\$10,000