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December 9, 2025
VIA E-FILE SYSTEM

Associated Docket No. A-2024-3050293
Utility No. A-6426699

Commonwealth of Pennsylvania
Pennsylvania Public Utility Commission
400 North Street
Harrisburg, PA 17120

RE: Application for Approval to Change Limited Liability Corporation Membership of Trinity Medical Transport LLC, 1118 Grove Road, Harrisburg, PA, Dauphin County, PA 17111

Dear Secretary Homsher:

Please accept this cover letter regarding our client, Trinity Medical Transport LLC, and the above-referenced Application, which were filed before the Public Utility Commission on December 9, 2025.

Enclosed with this cover letter is a completed Application to Change Limited Liability Corporation Membership for Common Carriers of Household Goods or Passengers which requests a change in the membership of Trinity Medical Transport LLC. Attached to this Application please find five attachments:

(1) a brief corporate history of the Certified Carrier;

(2) a filed Certificate of Amendment - Limited Liability Company dated July 10, 2024, from the Pennsylvania Department of State;

(3) a Certificate of Public Convenience from the Pennsylvania Public Utility Commission dated February 7, 2024;

(4) a Sales, Transfer and Partnership Agreement dated November 21, 2025, between Nabindra Acharya and multiple new members of Trinity Medical Transport LLC.

I, Seth A. Mendelsohn, hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief, and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

Thank you for your attention to this matter. As always, I am available to you for any further clarification.

Very truly yours,
SAXTON & STUMP

Seth A. Mendelsohn, Esquire
Senior Counsel

SAM/jm
Enclosures

INSTRUCTIONS TO BE FOLLOWED IN PREPARING APPLICATION

(No Application will be accepted from a Minor.)

1. An application must be filed for any public utility or an affiliated interest of a public utility prior to its selling or transferring membership to any person, partnership or corporation.

2. An affiliated interest of a public utility includes every corporation or person owning or holding directly or indirectly 5% or more of the of the public utility.

3. It is not required that the parties be represented by an attorney to file the application. However, a corporation must be represented by an attorney at a hearing.

4. The original application signed at the place designated and duly verified must be filed with the Pennsylvania Public Utility Commission, 400 North Street, 2nd Floor, Harrisburg, PA 17120. A filing fee of $350 is required and shall be paid by certified check or money order, made payable to the Commonwealth of Pennsylvania.

   ALL Parties to proceedings pending before the Commission must open and use an e-filing account through the Commission's website (www.puc.pa.gov), OR you may submit your filing by overnight delivery. If a filing contains confidential or proprietary material, the filing is required to be submitted by overnight delivery.

5. If the seller is not a member of record with the PUC, provide a full and complete explanation and attach appropriate agreements of sale for all transactions not previously approved by the PUC.

6. If space provided on the form is not sufficient, prepare response on a separate sheet, attach it to the application and give it the same number as the question or statement to which it refers. All questions **must** be answered – if one is not applicable, answer N/A.

7. The Sales Agreement must specify that the interest being purchased will be paid for within a reasonably short period of time (*i.e.,* less than one year) following PUC approval. If it is intended that payments be made over an extended period of time (*i.e.,* one year or more), the sales agreement must indicate that the parties will execute a separate demand judgment or promissory note. The Sales Agreement must be bilateral (*i.e.,* binding on all parties).

NOTE: INCOMPLETE APPLICATIONS ARE NOT ACCEPTABLE FOR FILING AND WILL BE RETURNED. IF YOU NEED ASSISTANCE IN COMPLETING THIS APPLICATION, PLEASE CALL 717.787.3834.

APPLICATION FOR APPROVAL TO CHANGE LIMITED LIABILITY CORPORATION MEMBERSHIP FOR COMMON CARRIERS OF HOUSEHOLD GOODS OR PASSENGERS (Except GP16+)

BEFORE THE PENNSYLVANIA PUBLIC UTILITY COMMISSION

SEE INSTRUCTIONS BEFORE COMPLETING APPLICATION

1. Full and correct name of Certificated Carrier:

   Trinity Medical Transport LLC (hereinafter "Trinity Medical")

2. Docket number of Certificated Carrier: A-2024-3050293

3. Attorney(s) for the Application:

Name: Seth A. Mendelsohn, Esq.
Address: Saxton & Stump, 4250 Crums Mill Rd, Ste 201
Harrisburg, PA 17112
Telephone: 717 - 941 - 1202
Email: smendelsohn@saxtonstump.com
REPRESENTING: Trinity Medical Transport LLC

Name: _____
Address: _____
_____
Telephone: _____ - _____ - _____
Email: _____
REPRESENTING: _____

Name: _____
Address: _____
_____
Telephone: _____ - _____ - _____
Email: _____
REPRESENTING: _____

1. Current Members of Limited Liability Corporation of Certificated Carrier:

a) Number of current members: 1

b) Member Names:

Nabindra Acharya

2. Requested Membership Changes of Limited Liability Corporation:

a) Exiting Members:

No exiting members

b) New Members:

Udaya Acharya

Anil Neupane

Kul Niroula

Bhagirath Khatiwada

Ghanashyan Khatiwada

Gyan Dahal

3. If existing, new, or departing members of the limited liability corporation are in control of, or affiliated with each other, or with any other carrier, state the name of carriers, their docket numbers, and nature of the control or affiliation.

No

4. Consideration for the transfer of membership (if nominal, explain):

Mr. Nabindra Acharya is selling a 65% interest in Trinity Medical equaling $65,000.
He will retain a 35% ownership interest and will be the majority owner of Trinity Medical.

5. The consideration will be paid as follows:

Buyer/Percentage/Purchase Price:

Udaya Acharya: 22.5%, $22,500	Bhagirath Khatiwada: 17.5%, $17,500
Anil Neupane: 10%, $10,000	Ghanashyan Khatiwada: 5%, $5,000
Kul Niroula: 5%, $5,000	Gyan Dahal: 5%, $5,000

6. The reasons for the proposed transfer are:

Mr. Nabindra Acharya is looking to add members and diversity in his business interests.

7. The following must be attached to the completed application

☑ A statement containing a brief corporate history of the Certificated Carrier, the purpose for which it was created, a description of the service it furnishes to the public and a description of the territory in which it operates.

☑ Statements of Financial Condition (Income Statements and Balance Sheets) for the Limited Liability Corporation and the proposed new members.

☐ Verified Statement(s) of new member(s)/owner(s) if a complete change of ownership

☐ If the new member/owner is a corporate entity provide a complete list of members, or officers and shareholders with shares.

☐ If the new member/owner is a corporate entity provide a copy of corporation papers from PA Dept. of State

WHEREFORE, the Limited Liability Corporation Memberships request that the Commission approve the Application.

Existing Members sign here:

x Nabindra A. 12/8/2025

Nabindra Acharya **(Each Member must sign)** **(Date)**

(Corporate Seal)

_____ **(Date)**

_____ **(Date)**

_____ **(Date)**

Exiting Members sign here:

N/A

_____ **(Date)**

(Corporate Seal)

_____ **(Date)**

_____ **(Date)**

_____ **(Date)**

THIS MUST BE COMPLETED BY A NOTARY PUBLIC
AFFIDAVIT OF BUYER (NATURAL PERSON)

COMMONWEALTH OF PENNSYLVANIA :

: ss:

Dauphin County :

Udaya Acharya, being duly sworn (affirmed) according to law, deposes and says that the facts above set forth are true and correct; or are true and correct to the best of his/her knowledge, information, and belief, and he/she expects to be able to prove the same at the hearing hereof.

Signature of Affiant

Sworn and subscribed before me on this 8th day of December 20 25 My Commission expires April 15, 2029

Signature of Official Administering Oath

Commonwealth of Pennsylvania - Notary Seal
Donita Jo Mundis, Notary Public
Cumberland County
My commission expires April 15, 2029
Commission number 1117487
Member, Pennsylvania Association of Notaries

AFFIDAVIT OF CERTIFICATED CARRIER (CORPORATION)

COMMONWEALTH OF PENNSYLVANIA :

: ss:

Dauphin County :

Nabindra Acharya, being duly sworn (affirmed) according to law, deposes and says that he/she is member (Office of Affiant) of Trinity Medical Transport LLC (Name of Corporation) that he/she is authorized to and does make this affidavit for it; and that the facts above set forth are true and correct; or are true and correct to the best of his/her knowledge, information, and belief, and he/she expects the said Trinity Medical Transport LLC (Name of Corporation) to be able to prove the same at the hearing hereof.

Signature of Affiant

Sworn and subscribed before me on this 8th day of December 20 25 My Commission expires April 15, 2029

Signature of Official Administering Oath

Commonwealth of Pennsylvania - Notary Seal
Donita Jo Mundis, Notary Public
Cumberland County
My commission expires April 15, 2029
Commission number 1117487
Member, Pennsylvania Association of Notaries

THIS MUST BE COMPLETED BY A NOTARY PUBLIC
AFFIDAVIT OF SELLER (NATURAL PERSON)

COMMONWEALTH OF PENNSYLVANIA :

: ss:

Dauphin County :

Nabindra Acharya, being duly sworn (affirmed) according to law, deposes and says that the facts above set forth are true and correct; or are true and correct to the best of his/her knowledge, information, and belief, and he/she expects to be able to prove the same at the hearing hereof.

Nabin A.
Signature of Affiant

Sworn and subscribed before me on this 8th day of December 20 25 My Commission expires April 15, 2029

Donita Jo Mundis
Signature of Official Administering Oath

Commonwealth of Pennsylvania - Notary Seal
Donita Jo Mundis, Notary Public
~~Cumberland~~ County
My commission expires April 15, 2029
Commission number 1117487
Member, Pennsylvania Association of Notaries

AFFIDAVIT OF BUYER/SELLER (CORPORATION)

COMMONWEALTH OF PENNSYLVANIA :

: ss:

_____ County :

_____, being duly sworn (affirmed) according to law, deposes and says that he/she is _____ of _____
(Office of Affiant) **(Name of Corporation)**
that he/she is authorized to and does make this affidavit for it; and that the facts above set forth are true and correct; or are true and correct to the best of his/her knowledge, information, and belief, and he/she expects the said _____ to be able to prove
(Name of Corporation)
the same at the hearing hereof.

_____
Signature of Affiant

Sworn and subscribed before me on this _____ day of _____ 20_____ My Commission expires _____

_____
Signature of Official Administering Oath

Statement of Certificate Holder's Financial Position (Balance Sheet)
as of (date) N/A
(Must be less than 6 months old)

ASSETS

Current Assets			
Cash	N/A		
Accounts Receivable	N/A		
Notes Receivable	N/A		
Other Current Assets (specify)	N/A		
Total Current Assets			N/A
Tangible Assets			
Land	N/A		
Motor Vehicle Equipment	N/A		
Less: Accumulated Depreciation		=	
-	N/A		N/A
Building and Structures	N/A		
Less: Accumulated Depreciation		=	
-	N/A		N/A
Office Equipment	N/A		N/A
Less: Accumulated Depreciation		=	
-	N/A		N/A
Investments and Funds (specify)			N/A
Intangible Assets			N/A
Other Assets (advances and idle equipment – specify)			N/A
TOTAL ASSETS			N/A

LIABILITIES

Current Liabilities (Due within one year of date)		
Accounts Payable	N/A	
Notes Payable	N/A	
Equipment Obligations	N/A	
Other Liabilities (Attach schedule)	N/A	
Total Current Liabilities		N/A
Long Term Liabilities (Due after one year of date)		
Accounts Payable	N/A	
Notes Payable	N/A	
Equipment Obligations	N/A	
Other Liabilities (Attach Schedule)	N/A	
Total Long-Term Liabilities		N/A
TOTAL LIABILITIES		N/A

NET WORTH (Partnerships and individuals, only) N/A

Respectfully, Trinity Medical suggests that these provisions are not-applicable to this transaction in that it is not a transfer pursuant to the Public Utility Code and the Commission's Regulations because Mr. Acharya is remaining as the majority member. Trinity Medical remains under the same ownership with the addition of minority members in the LLC. The company will continue operating the way it has since the Commission's approval of the transfer to Mr. Acharya in 2024 at docket number A-2024-3050293.

Statement of Certificate Holder's Income
Income Statement for the 12-month period ending N/A

REVENUE and GAINS

Operating Revenue	N/A
Net Revenue from non-carrier operations	N/A
Dividend and interest revenues	N/A
Other non-operating revenue	N/A
Gains	N/A
Total Revenue and Gains	N/A

EXPENSES

Equipment Maintenance and Garage Expense	N/A
Insurance Expense	N/A
Employee Salaries	N/A
Supervisory Salaries	N/A
Officer Salaries	N/A
Fuel Expense	N/A
Purchased Transportation (Lease Expense)	N/A
Materials and Supplies Expense	N/A
General Office Expense	N/A
Advertising Expense	N/A
Telephone Expense	N/A
Accounting Expense	N/A
Legal Expense	N/A
Uncollectible Revenue	N/A
Depreciation Expense	N/A
Amortization	N/A
Operating Taxes and Licenses	N/A
Rent Expense	N/A
Loss	N/A
Total Operating Expenses and Losses	N/A
Net Income Before Taxes	N/A
Provision for Income Taxes	N/A
Net Income (Loss)	N/A

Respectfully, Trinity Medical suggests that these provisions are not-applicable to this transaction in that it is not a transfer pursuant to the Public Utility Code and the Commission's Regulations because Mr. Acharya is remaining as the majority member. Trinity Medical remains under the same ownership with the addition of minority members in the LLC. The company will continue operating the way it has since the Commission's approval of the transfer to Mr. Acharya in 2024 at docket number A-2024-3050293.

Statement of New Member's Financial Position (Balance Sheet)
as of (date) N/A
(Must be less than 6 months old)

ASSETS

Current Assets			
Cash	N/A		
Accounts Receivable	N/A		
Notes Receivable	N/A		
Other Current Assets (specify)	N/A		
Total Current Assets			N/A
Tangible Assets			
Land	N/A		
Motor Vehicle Equipment	N/A		
Less: Accumulated Depreciation		=	
-	N/A		N/A
Building and Structures	N/A		
Less: Accumulated Depreciation		=	
-	N/A		N/A
Office Equipment	N/A		N/A
Less: Accumulated Depreciation		=	
-	N/A		N/A
Investments and Funds (specify)			N/A
Intangible Assets			N/A
Other Assets (advances and idle equipment – specify)			N/A
TOTAL ASSETS			N/A

LIABILITIES

Current Liabilities (Due within one year of date)			
Accounts Payable	N/A		
Notes Payable	N/A		
Equipment Obligations	N/A		
Other Liabilities (Attach schedule)	N/A		
Total Current Liabilities			N/A
Long Term Liabilities (Due after one year of date)			
Accounts Payable	N/A		
Notes Payable	N/A		
Equipment Obligations	N/A		
Other Liabilities (Attach Schedule)	N/A		
Total Long-Term Liabilities			N/A
TOTAL LIABILITIES			N/A
NET WORTH (Partnerships and individuals, only)			N/A

Respectfully, Trinity Medical suggests that these provisions are not-applicable to this transaction in that it is not a transfer pursuant to the Public Utility Code and the Commission's Regulations because Mr. Acharya is remaining as the majority member. Trinity Medical remains under the same ownership with the addition of minority members in the LLC. The company will continue operating the way it has since the Commission's approval of the transfer to Mr. Acharya in 2024 at docket number A-2024-3050293.

Statement of New Member's Projected Income and Expenses
Projected Income and Expense Statement for the 12-month period ending
N/A

REVENUE and GAINS

Operating Revenue	N/A
Net Revenue from non-carrier operations	N/A
Dividend and interest revenues	N/A
Other non-operating revenue	N/A
Gains	N/A
Total Revenue and Gains	N/A

EXPENSES

Equipment Maintenance and Garage Expense	N/A
Insurance Expense	N/A
Employee Salaries	N/A
Supervisory Salaries	N/A
Officer Salaries	N/A
Fuel Expense	N/A
Purchased Transportation (Lease Expense)	N/A
Materials and Supplies Expense	N/A
General Office Expense	N/A
Advertising Expense	N/A
Telephone Expense	N/A
Accounting Expense	N/A
Legal Expense	N/A
Uncollectible Revenue	N/A
Depreciation Expense	N/A
Amortization	N/A
Operating Taxes and Licenses	N/A
Rent Expense	N/A
Loss	N/A
Total Operating Expenses and Losses	N/A
Net Income Before Taxes	N/A
Provision for Income Taxes	N/A
Net Income (Loss)	N/A

Respectfully, Trinity Medical suggests that these provisions are not-applicable to this transaction in that it is not a transfer pursuant to the Public Utility Code and the Commission's Regulations because Mr. Acharya is remaining as the majority member. Trinity Medical remains under the same ownership with the addition of minority members in the LLC. The company will continue operating the way it has since the Commission's approval of the transfer to Mr. Acharya in 2024 at docket number A-2024-3050293.

VERIFIED STATEMENT OF NEW MEMBER

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE BUYER'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

Udaya Acharya and Minority Members

Purchaser's Name

3948 Secretarial Street, Harrisburg, PA 17112 (Dauphin County)

Street Address **City or Municipality** **State** **Zip Code**

The Verified Statement of the Buyer is more or less a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to become a member, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

At minimum, the Verified Statement of the Buyer should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

1. Identify the person making the Verified Statement on behalf of the buyer. If the buyer is an individual making the statement, this will be the same information as provided above. If the buyer is a corporate entity and an employee/officer of the buyer is making the statement, give name, title, business address and telephone number, and indicate that the buyer's directors/owners/partners/etc. have authorized the witness to speak for the business.

   Udaya Acharya
   3948 Secretarial Street
   Harrisburg, PA 17112
   Phone: (717) 963-4413
   New purchaser with largest interest (22.5%) with authority to speak for all purchasers

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

   None

Page 11 - Purchaser's Name

Udaya Acharya; Anil Neupane; Kul Niroula; Bhagirath Khatiwada; Ghanashyam Khatiwada; Gyan Dahal. Please note that the current sole member of the LLC, Nabindra Acharya, will continue to be the majority shareholder of Trinity Medical Transport LLC (Trinity Medical). Mr. Nabindra Acharya had purchased Trinity Medical in 2024, and the Commission approved his purchase on October 21, 2024, at docket number A-2024-3050293. He is remaining with Trinity Medical. In this application, Mr. Nabindra Acharya is seeking to expand the members of the LLC while remaining the majority stockholder of the LLC.

3. Describe your business experience, particularly any experience relating to the operation of a transportation service. You may also include an explanation of education or training that you believe may be relevant.

Please see attached for answer to question 3.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to include the office area, office machines that will be utilized, and the facility to house vehicles. Household goods in use carriers should include a description of their 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. Finally, please state your intended business hours.

Please see attached for answer to question 4.

5. Please state the number of employees you intend to use, along with a description of their duties. Please explain why that number of employees is appropriate to provide reasonable and efficient service to the geographical territory you will be serving. **(Do not address drivers in your explanation about this item; drivers are addressed separately in item # 6).**

Trinity Medical currently has four drivers and five vehicles. It believes that these numbers are appropriate for the service territory and has been successful to date. The company does not turn down services and has not missed any appointments. There have been no complaints filed with the Commission. The Company intends to grow but to continue to proceed cautiously.

Page 12 – Answer to question 3.

Mr. Nabindra Acharya has been the sole member of Trinity Medical that has been a been a paratransit company in good standing since the PUC's approval of the transfer to him in October 2024. As noted in his prior application, Mr. Acharya has worked in the human service business for approximately 10 years. In addition to his full-time work, he also does volunteer work for his community in the Harrisburg area. His experience includes working as a regional manager at Age In Place Home Care from January 2015 to November 2019 in Philadelphia where he would supervise managers, hire caregivers and train them. He would also arrange rides for clients for medical tests. In addition, Mr. Acharya would actively manage a system whereby clients would have rides for various social service needs including trips to human services, social security offices, and United States Citizenship and Immigration Services (USCIS) offices in the Philadelphia region and return them to their homes. Because of his work and management skills, Mr. Acharya was also hired by Age in Place Home Care from 2015 to 2019. Mr. Acharya managed multiple office locations, their seven (7) site managers and more than 500 caregivers, by traveling to locations including Erie, Pittsburgh, Scranton, Lancaster, York, and Reading. Mr. Acharya has been actively working as a co-owner and director at Creative Home Care LLC since January 2016 where he oversees the company's operations and has supervisory authority for more than 350 employees. Since 2019, he has also been on the board of Golden Home Care, and from 2021, Mr. Acharya has been on the board of Kings Home Health Care. Golden Home Care employs 475 employees and Kings Home Health Care employs over 700 employees.

Also attached is a letter of experience for Udaya Acharya.

To Whom It May Concern,

My name is **Udaya Acharya**, and I am writing this letter to outline my professional background and extensive business experience in the home care industry.

Since **2018**, I have been serving as the **Chief Executive Officer (CEO) of Golden Home Care**, a rapidly growing home care agency headquartered in Pennsylvania. When I first joined the organization, the company had no established operational structure and no employees. Through strategic planning, strong leadership, and consistent dedication, I successfully built the agency from the ground up.

Over the years, I have expanded Golden Home Care to **more than 12 office locations across Pennsylvania**, creating a strong and dependable service network throughout the state. Under my leadership, the company has grown from **zero employees to over 600 employees**, including caregivers, administrative staff, and managerial personnel. I oversee all aspects of operations including staffing, compliance, financial planning, expansion strategy, quality assurance, and day-to-day organizational management.

My role requires coordinating multidisciplinary teams, implementing systems that support large-scale operations, and ensuring that all services meet state regulations and high professional standards. I have focused heavily on building strong office infrastructures, developing efficient administrative processes, and fostering a company culture rooted in integrity, respect, and client-centered care.

Through years of hands-on leadership, I have gained deep experience in scaling businesses, managing large workforces, improving operational efficiency, and navigating the challenges of the healthcare and home care sectors. I am committed not only to the growth of the organization but also to maintaining high-quality care for clients and stable, meaningful employment for staff.

Thank you for taking the time to review my background. If you require any additional information, please feel free to contact me.

Sincerely,
Udaya Acharya
CEO, Golden Home Care

Page 12 – Answer to question 4.

The company conducts business at 1118 Grove Road, Harrisburg, PA 17111. The company will continue to carry out the policies as Mr. Nabindra Archarya described in his application at docket number A-2024-3050293. All facilities, record maintenance, and communications networks are maintained by him in a dedicated and private office at this location. This location has appropriate garage for parking company vehicles, and all tangible assets are housed at this address. Business records are maintained and stored in an appropriate fire-resistant records container and contemporaneously electronically stored on local computer devices and on an off-site cloud-based database. The company retains professional accounting services to manage the company's accounting and tax filings. The company's equipment includes computers, printers, a fax machine, a scanner, cellular phones, and the required software to operate the same. The company's communication plan includes the company's primary phone line, which is monitored and managed by the company. The company receives customer requests for paratransit service via telephone and emails. Each company vehicle will be equipped with a cellular phone and GPS to ensure constant communication, accountability, and availability of drivers. The company requires each driver to read, understand, and sign the company's communications plan policy.

6. 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 geographical territory you will be serving. In addition, please explain:
   a) Your hiring standards for drivers;
   b) Your driver training program;
   c) Your system for ensuring that your drivers are properly licensed at all times;
   d) Your policies regarding alcohol and drug use by your drivers.

See attached page for answer to question 6.

7. 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 geographical territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below.

YEAR	MAKE	MODEL	VEHICLE ID #	MILEAGE	SEATING CAP.
2016	Dodge	SW	2C4RDGBG5GR114302	28,574	7
2016	Dodge	SW	2C4RDGCG4GR367271	25,879	7
2017	Ford	Bus	1FDEE3FS2HDC45996	89,456	13
2023	Ford	Transit Passenger Wagon	1FBAX2C80PKB37410	50,723	15
2023	Ford	Transit Passenger Wagon	1FBAX2YGXPKA53840	60,552	12

Page 13 – Answer to question 6.

a) At all times, Trinity Medical has the highest standards before hiring drivers. All drivers will be 21 years of age or older and this will be confirmed via driver's license and an additional form of photo identification. We will require a driver's application including a photocopy of the front and back of the driver's license. Prospective drivers must sign and return a Motor Vehicle Record Release Form DL-503. HIPAA Medical Release Authorization Forms must be signed for each driver's background check. We also will follow the criminal background check requirements.

   We will follow the provisions of Title 52 Pa. Code §29.505(a)(3) and will not hire an individual to operate a vehicle in the service of Trinity Medical who was convicted of a felony or a misdemeanor under the laws of the Commonwealth or under the laws of another jurisdiction, to the extent the conviction relates adversely to that person's suitability to provide service safely and legally. This individual would be disqualified from employment as a driver at Trinity Medical. We also will follow the Commission's Policy Statement, 52 Pa. Code §41.14(6), and will apply it and will not employ any driver convicted of a felony or crime of moral turpitude and remains subject to supervision by a court or correctional institution.

b) Drivers must complete driver's training prior to employment, including Defensive and Distracted Driving Course, Red Cross First Aid training, OSHA Bloodborne Pathogen training, and CPR training. We also will make sure that they know how to safely operate and securing in a wheelchair in the vehicle.

c) Drivers must sign and return Motor Vehicle Record Release Form DL-503. We will obtain and review drivers histories for each driver for the preceding three years and will obtain new driver histories at least once every 12 months from the date of the last report. Pa. Code § 29.504(a)(3), we maintain a copy of the driver license check for each driver for at least two years.

d) Periodic, unannounced drug testing will be conducted. Likewise, the company will do the same for alcohol use. We require a consent form for this urinalysis drug testing and have a zero-tolerance policy on the use of unlawful drugs by our drivers.

8. 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 Pennsylvania's equipment standards (67 Pa. Code & Chapter 175, requirements for vehicle inspections) that are applicable to the type of vehicles used in your business;
    c) Your system for ensuring your vehicles will maintain compliance with the PUC's requirements for passenger service at 52 Pa. Code, § 29.402 and 29.403. (A copy of these requirements is on a separate page.)

    See attached page for answer to question 8.

9. Please explain what steps you have taken to determine if you can obtain and pay the premiums to maintain insurance coverage for the proposed number of vehicles for your business.

    Currently, the company is fully insured and in excess of the state's limits. Given our financial position, we remain confident that we will continue to be able to meet and exceed these requirements.

Page 14 – Answer to question 8.

a-b) Each vehicle will be subjected to preventative maintenance, checks, and services each day prior to operation to ensure all lights, windshield wipers, tires, and windows are in good working order. Every two weeks, each vehicle will be inspected at the company garage and necessary maintenance and repair will be performed. All vehicles will have current and valid Pennsylvania inspections, emissions, and registrations. All vehicles will undergo recommended periodic services in accordance with the vehicle maintenance schedules set forth in the owner's manual, including oil changes and major services.

c) We will continue to follow the requirements of this provision closely. The Company will have a checklist to make sure we are compliant with all provisions. We will post these provisions in our office and have these provisions available for our customers.

10. Please describe your customer service standards. Within your description, please explain your intended customer complaint resolution procedure.

As mentioned in the response to question 5, our company has no complaints that have been filed with the Commission. The Company values customer service and intends to keep customers happy. We want every customer to report that they have had a positive experience with us. Part of this involves hiring the right drivers. We are always timely and professional. In the unlikely event that a customer has a complaint, we will have displayed in every vehicle contact information and how to report concerns. I will work to resolve those complaints within two business days. In addition, contact information for the PUC will be displayed on how to contact the Bureau of Consumer Services and pledge to work with that office to resolve those complaints informally. The company will track the inquiries it receives and how the inquiries were handled.

11. Criminal Record. Have you been convicted of a misdemeanor or felony for which you remain subject to supervision by a court or correctional institution?

YES____ NO ✓

*If the new member is a corporate entity, this question applies to all shareholders and corporate officers. In the event that the answer is yes for one of those individuals, a separate page identifying the individual and stating relevant information should be attached.

VERIFICATION OF STATEMENT

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and 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 the penalties of 18 Pa. C. S. § 4904 relating to unsworn falsification to authorities.

(Signature) 12/08/2021 (Date)

Udaya Acharya
(Name, printed or typed)

CORPORATE HISTORY

Trinity Medical Transport LLC

A BRIEF CORPORATE HISTORY

Trinity Medical Transport LLC (Trinity Medical) was granted a certificate of public convenience effective February 7, 2024, at docket number A-2023-304460, to serve as a common carrier, by motor vehicle, persons in Paratransit service, from points in the Counties of Cumberland, Dauphin, Lancaster, and York to points in Pennsylvania and return. It was assigned utility code number A-6426699. Trinity Medical initially had been started by Ms. Sara Khatiwada. Thereafter, Mr. Nabindra Acharya purchased Trinity Medical from Ms. Khatiwada and sought approval for the change. The transfer application was assigned docket number A-2024-3050293. The Commission approved the transfer to Mr. Acharya on October 21, 2024. Trinity Medical, under Mr. Acharya's ownership and management, has operated in good standing as a paratransit operator since the transfer. Trinity Medical now comes before this Honorable Commission seeking to expand the members of the LLC while keeping Nabindra Acharya has the majority stockholder of the LLC.

CERTIFICATE OF AMENDMENT – LIMITED LIABILITY COMPANY

Trinity Medical Transport LLC

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717.787.1057
dos.pa.gov/BusinessCharities

July 12, 2024

Trinity Medical Transport LLC
NABINDRA ACHARYA
1118 GROVE ROAD
HARRISBURG, PA 17111

Entity Name:	Trinity Medical Transport LLC
Amendment Date:	July 10, 2024
Amendment Number:	0013897991
Amendment Type:	Certificate of Amendment

The Bureau of Corporations and Charitable Organizations is happy to send your filed document. The Bureau is here to serve you and we would like to thank you for doing business in Pennsylvania.

Beginning in 2025, annual reports are required for all domestic filing entities, limited liability general partnerships and registered foreign associations. More information will be forthcoming from the Bureau. However, to ensure that you receive notice of how and when to make annual reports, keep all information on file with the Bureau up-to-date, particularly registered office address.

0013897991

B0711-8951 07/10/2024 11:41 AM Received by Pennsylvania Department of State

COMMONWEALTH OF PENNSYLVANIA
Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722
Harrisburg, Pennsylvania 17105-8722

CERTIFICATE OF AMENDMENT - DOMESTIC LIMITED PARTNERSHIP / LIMITED LIABILITY COMPANY

Fee: $70

Pennsylvania Department of State

-FILED-

Amendment #: 0013897991
Date Filed: 7/10/2024

DSCB:15-8622/8822 (rev. 2/2017)

In compliance with the requirements of 15 Pa.C.S. § 8622 or 15 Pa.C.S. § 8822 (relating to amendment or restatement of certificate), the undersigned, desiring to amend or restate its Certificate of Limited Partnership/ Certificate of Organization, hereby states that:

File number	0013641227
Current filing name	Trinity Medical Transport LLC
Filing type	Domestic Limited Liability Company
Current limited liability company subtype	Limited Liability Company
Initial File Date	11/07/2023

Effective Date

The filing shall be effective when filed with the Department of State

Current Registered Office or Commercial Registered Office Provider

Address

6305 ASTON COURT
HARRISBURG, PA 17111

DAUPHIN

New Registered Office

The address of this association's proposed registered office in this Commonwealth is

NABINDRA ACHARYA
1118 GROVE ROAD
HARRISBURG, PA 17111

DAUPHIN

Additional Details

The amendment adopted by the association includes these additional changes (1000 characters or less):

Add Nabindra Acharya as the Sole Member.

Remove Sara Khatiwada as the Sole Member.

Restated Certificate of Limited Partnership/Certificate of Organization

☐ The restated Certificate of Limited Partnership/ Certificate of Organization supersedes the original Certificate of Limited Partnership/Certificate of Organization and all amendments thereto.

Electronic Signature

☒ I verify that I have electronically signed and submitted this document on behalf of the association.

IN TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate of Amendment to be executed by a duly authorized person.

Full Name	Title	Date
Sara Khatiwada	Sole Member	07/10/2024

CERTIFICATE OF PUBLIC CONVENIENCE

Trinity Medical Transport LLC

PENNSYLVANIA
PUBLIC UTILITY COMMISSION

IN THE MATTER OF: A-6426699

Application of Trinity Medical Transport LLC for Paratransit Authority, 6305 Aston Court, Harrisburg, Dauphin County, PA 17111. To transport, as a common carrier, by motor vehicle, persons in Paratransit Service, from points in the Counties of Cumberland, Dauphin, Lancaster and York, to points in Pennsylvania, and return. A-2023-3044260.

EFFECTIVE DATE: February 7, 2024

The Pennsylvania Public Utility Commission hereby certifies that after an investigation and/or hearing, it has, by its report and order made and entered, found and determined that the granting of the application is necessary or proper for the service, accommodation, convenience and safety of the public and hereby issues to the applicant this CERTIFICATE OF PUBLIC CONVENIENCE **evidencing the Commission's approval to operate.**

In Witness Whereof, The PENNSYLVANIA PUBLIC UTILITY COMMISSION has caused these presents to be signed and sealed, and duly attested by its Secretary at its office in the city of Harrisburg this 7th day of February, 2024.

Secretary

PURCHASE AGREEMENT

Docusign Envelope ID: ABC4F42F-2EE5-4CAC-95B6-539C7210FF87

SALES, TRANSFER & PARTNERSHIP AGREEMENT

Trinity Medical Transportation LLC
1118 Grove Rd, Harrisburg, PA 17111
Effective Date: November 21, 2025

THIS SALES, TRANSFER & PARTNERSHIP AGREEMENT ("Agreement")

is made and entered into on **November 21, 2025**, by and between:

SELLER / CURRENT OWNER:

Nabindra P. Acharya
1118 Grove Rd, Harrisburg, PA 17111
(Hereinafter "Seller" or "Existing Member")

and

NEW PARTNERS / PURCHASERS:

1. **Udaya Acharya**
   3948 Secretariat St, Harrisburg, PA 17112
   Purchasing **22.5% membership interest**
2. **Anil Neupane**
   4035 Riva Ridge Rd, Harrisburg, PA 17112
   Purchasing **10% membership interest**
3. **Kul Niroula**
   6563 New Providence Dr, Harrisburg, PA 17111
   Purchasing **5% membership interest**
4. **Bhagirath Khatiwada**
   114 Coppers Hawk Dr, Mechanicsburg, PA 17050
   Purchasing **17.5% membership interest**
5. **Ghanashyan Khatiwada**
   104 Coppers Hawk Dr, Mechanicsburg, PA 17050
   Purchasing **5% membership interest**
6. **Gyan Dahal**
   376 Fencepost Ln, Palmyra, PA 17078
   Purchasing **5% membership interest**

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Collectively referred to as the "New Partners" or "Purchasers," and together with the Seller, referred to as the "Parties."

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1. BUSINESS DESCRIPTION

1.1 Trinity Medical Transportation LLC ("Company") is a legally registered paratransit transportation provider in the Commonwealth of Pennsylvania.
1.2 Its principal place of business is located at **1118 Grove Rd, Harrisburg, PA 17111**.
1.3 The Company provides non-emergency medical transportation, paratransit, wheelchair transport, and related mobility services.

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2. PURPOSE OF THIS AGREEMENT

2.1 The Seller is the lawful owner of **100% of the membership interests** in the Company.
2.2 The Seller desires to sell a total of **65% of his ownership interest** in the Company to the New Partners.
2.3 The purpose of this Agreement is to:

- Formally record the sale of membership interests
- Outline the rights and obligations of all Partners
- Establish the governance framework for all future Company operations
- Protect the Company and its Members through clearly defined rules

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3. COMPANY VALUATION

3.1 The Parties mutually agree that the full valuation of the Company is **$100,000 (One Hundred Thousand Dollars)**.
3.2 All membership interests sold under this Agreement are calculated based on this valuation.
3.3 The valuation is accepted "as-is," and all Partners acknowledge understanding the basis for valuation.

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4. MEMBERSHIP INTERESTS BEING SOLD

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The Seller agrees to sell the following percentages:

Buyer	Percentage	Purchase Price
Udaya Acharya	22.5%	$22,500
Anil Neupane	10%	$10,000
Kul Niroula	5%	$5,000
Bhagirath Khatiwada	17.5%	$17,500
Ghanashyan Khatiwada	5%	$5,000
Gyan Dahal	5%	$5,000

After the transfer:

- **Total Interest Sold: 65%**
- **Seller Retains: 35% Ownership**

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5. PAYMENT TERMS (FULLY EXPANDED)

5.1 **Full Payment Due Today**
All New Partners shall pay the full purchase price **on November 21, 2025**, the date of this Agreement. No installments, extensions, or future payments are allowed.

5.2 **Accepted Payment Methods**

- Cashier's check
- Certified bank check
- Bank wire transfer
- Same-day bank transfer, Zelle, or verified ACH
- Cash (with written receipt)

5.3 **Verification of Funds**
Ownership shall not transfer until funds are verified as cleared and accessible by the Seller.

5.4 **Failure to Pay**
If any Partner fails to pay by midnight on November 21, 2025:

- The Seller may cancel the sale for that Partner
- The Seller may sell that interest to another individual
- The non-paying Partner will have **no rights** in the Company

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5.5 **Non-Refundability**
All payments are non-refundable unless mutually agreed in writing.

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6. REPRESENTATIONS AND WARRANTIES

The Seller warrants that:

6.1 He is the sole lawful owner of the Company.
6.2 The Company is in good standing with the State of Pennsylvania.
6.3 There are no undisclosed liabilities, lawsuits, fines, or liens.
6.4 All provided financial statements are true and accurate.

Each New Partner warrants that:

6.5 They are entering this Agreement voluntarily.
6.6 They have reviewed the valuation and understand the risks of business ownership.
6.7 They have the financial ability to purchase their membership interest.

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7. TRANSFER OF OWNERSHIP

7.1 Upon receipt of payment, the Seller shall issue:

- Membership Interest Transfer Certificates
- Updated Company ledger
- Access to Company records

7.2 All Partners shall sign an **Updated Operating Agreement** immediately following this transfer.

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8. PROFITS, LOSSES & DISTRIBUTIONS

8.1 Profits and losses will be allocated proportionate to ownership percentage.
8.2 Distributions shall be issued quarterly unless otherwise agreed.
8.3 Partners acknowledge that profits are not guaranteed.

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9. MANAGEMENT & VOTING RIGHTS

9.1 The Seller, as the retaining 35% owner, shall remain **Managing Member** unless changed by majority vote.
9.2 Major decisions require **51% ownership vote**, including:

- Taking loans
- Selling Company vehicles or assets over $10,000
- Entering major contracts
- Hiring or firing key personnel
- Changing tax status
- Dissolving the Company

9.3 Day-to-day operations may be delegated by the Managing Member.

10. CAPITAL CONTRIBUTIONS

10.1 No Partner is required to contribute additional capital unless unanimously agreed.
10.2 If additional funding is required, Partners may:

- Contribute proportionately
- Allow one Partner to contribute more in exchange for additional membership interest
- Allow the Company to borrow funds

11. NON-COMPETE AGREEMENT

11.1 All Partners agree not to engage in, operate, or assist a competing paratransit or NEMT business within a **50-mile radius** for **2 years** after leaving the Company.

11.2 Breach of non-compete shall entitle the Company to injunctive relief and damages.

12. CONFIDENTIALITY

Partners agree to keep all company information confidential, including:

Docusign Envelope ID: ABC4F42F-2EE5-4CAC-95B6-539C7210FF87

- Financial records
- Client lists
- Contracts
- Pricing structures
- Business strategies

This clause survives termination of membership.

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13. EXIT, BUYOUT & TRANSFER RESTRICTIONS

13.1 No Partner may sell or transfer interest without offering it first to existing Partners.
13.2 The Company may repurchase the interest at fair market value or mutually agreed price.
13.3 Unauthorized transfers are void.

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14. DISPUTE RESOLUTION

Disputes shall be resolved in this order:

1. Internal meeting of Members
2. Mediation
3. Binding arbitration in **Dauphin County, PA**

Court litigation is only allowed to enforce an arbitration award.

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15. GOVERNING LAW

This Agreement is governed by the **laws of the Commonwealth of Pennsylvania**.

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16. ENTIRE AGREEMENT

This Agreement:

Docusign Envelope ID: ABC4F42F-2EE5-4CAC-95B6-539C7210FF87

- Supersedes all prior discussions
- Contains the full understanding of the Parties
- Cannot be amended except in writing signed by all Members

17. SIGNATURES

SELLER / EXISTING MEMBER:

Nabindra P. Acharya DocuSigned by: Nabindra Acharya E2E94AA3D3EB411...
Date: 11/21/2025

NEW PARTNERS / PURCHASERS:

Udaya Acharya Signed by: UDAYA ACHARYA 2C60D7B6CA1F4F7...
Date: 11/21/2025

Anil Neupane Signed by: Anil Neupane 3B892A3C492E4E4...
Date: 11/21/2025

Kul Niroula DocuSigned by: 96D3969AF5554FD...
Date: 11/21/2025

Bhagirath Khatiwada DocuSigned by: C8D4A7289AD145E...
Date: 11/21/2025

Ghanashyan Khatiwada Signed by: Ghanashyam Khatiwada 7F9964D11D27431...
Date: 11/21/2025

Docusign Envelope ID: ABC4F42F-2EE5-4CAC-95B6-539C7210FF87

DocuSigned by:
Gyan Dahal
09C0A5588A1B472...

Gyan Dahal
Date: 11/21/2025