



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
COMMONWEALTH KEYSTONE BUILDING
400 NORTH STREET
HARRISBURG, PENNSYLVANIA 17120
<http://www.puc.pa.gov>

February 10, 2026

A-6428615
A-2026-3060262

SAFE HANDS TRANSIT LLP
862 INDIAN SPRINGS DRIVE
LANCASTER PA 17601

RE: APPLICATION OF SAFE HANDS TRANSIT LLP

To Whom It May Concern:

On February 4, 2026, the application of *Safe Hands Transit LLP*, at A-2026-3060262, as a motor carrier was accepted for filing and docketed with the Public Utility Commission. For the Commission to proceed with the application, additional information is required.

Please forward the information to the Secretary of the Commission at the following address **within ten (10) working days** from the date of this letter.

Matthew L. Homsher, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, Pennsylvania 17120

ALL Parties to proceedings pending before the Commission are advised to open and use an e-filing account through the Commission's website, OR you may submit your filing by mail. If a filing contains confidential or proprietary material, the filing is required to be submitted by mail.

Your answers should be verified per 52 Pa Code § 1.36. Accordingly, you must provide the following statement with your responses:


I, _____, hereby state that the facts 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).

The blank should be filled in with the name of the appropriate company representative, and the signature of that representative should follow the statement.

Failure to comply with this request within 10 working days from the date of this letter will result in the denial of the application.

Please direct any questions to Compliance Specialist Kevin Morgan, Bureau of Technical Utility Services at (717)787-2687. Faxed or emailed filings are **not** accepted.

Sincerely,



Matthew L. Homsher
Secretary

Enclosure

Docket No. A-2026-3060262
Safe Hands Transit LLP

Request for Information

1.) Question # 10 of the Application.

A.) The proposed vehicles limit your service to wheelchair and stretcher vehicles only. Do you wish to broaden your service? Please make corrections or verify that the example below is what you now intend.

Example: *To transport persons, by motor vehicle, in Paratransit service, between points in Armstrong, Beaver, Butler, Crawford, Lawrence, Mercer, Venango, and Warren counties.*

- This example means that you are not limited to vehicle type and not limited to the type of activity regarding non-emergency medical transportation.

2.) Question #2 Verified Statement. A statement of ownership is not requested here. We need you to list the Company's relationship with other motor carrier companies here.

3.) Question #3 Verified Statement. The description of your transportation experience was vague; can you please provide details about transportation industry experience?

4.) Question # 5 Verified Statement. Provide compliant policies that satisfy the requirements of 52 Pa Code with revision to the specific chapters below. 52 Pa Code information can be reviewed online at www.pacode.com.

A.) § 29.503. Age restrictions. Will drivers have to be at least a certain minimum age?

B.) § 29.504. Driver History. How often will a driver license checks be done after the initial check?

C.) § 29.505. Criminal history. How often will record checks be done and what are disqualifications of employment?

D.) § 29.506. Controlled substance prohibition and § 29.507 Controlled substance Prohibition. What are your policies about alcohol and drug use by your drivers?

E.) Finally, explain your policy regarding your driving training program beyond saying that only will be offered and completed.

5.) Question # 7 Verified Statement. Please explain in detail your periodic vehicle maintenance plan, and your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175). You are responsible for learning and reviewing rules and regulations related to the proposed service.

A.) How often will you service your vehicles? When will oil changes and tune-ups be done? Will you have a pre-trip and/or post- trip inspections? If so, give a sample of the inspection checklists on a separate page.

B.) Who will be conducting PA vehicle inspections? Again, will you, on a set schedule, check brakes, lights, exhaust, etc. to ensure that all are functioning properly?

6.) Financial Position.

Include a copy of the vehicle registration and/or title for each vehicle currently in the possession of Safe Hands Transit LLP.

NOTE: Be advised that additional corrections may not always be requested; therefore, prior to submitting your responses, your consultation with an attorney and financial expert familiar with Commission regulated Motor Carrier related proceedings is highly encouraged.