



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

February 9, 2026

A-6428625  
A-2026-3060310

D M DRUMM ENTERPRISES INC  
1046 BOYER HILL ROAD  
SUNBURY PA 17801

**RE: Application of D M Drumm Enterprises Inc**

To Whom It May Concern:

On February 6, 2026, 2026, the application of D M Drumm Enterprises Inc, at A-2026-3060310, as a motor carrier was accepted for filing and docketed with the Public Utility Commission. In order 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 overnight delivery.**

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

I, Ty Drumm, 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).

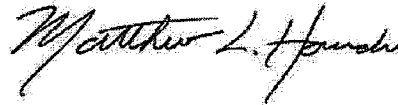
The blank should be filled in with the name of the appropriate company representative, and the signature of that representative should follow the statement.

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 David Canzoneri, Bureau of Technical Utility Services at (717) 346-9738. Faxed or emailed filings are **not** accepted.

Ty Drumm  
PRESIDENT

Sincerely,



Matthew L. Homsher  
Secretary

Enclosure

Docket No. A-2026-3060310  
D M Drumm Enterprises Inc

Request for Information

- 1.) You failed to adequately answer all aspects of question #5 of the Verified Statement of Applicant. You may wish to operate as an owner operator, but the Commission needs to know that you have compliant policies/plans for the hiring/employment of drivers, should ever you choose to expand once you have gained a Certificate of Public Convenience, or not. **Please review Title 52 Pa Code §29.501-509 Driver Regulations to see what is required of motor carriers.**
  - a. Please explain your hiring standards for drivers; **(Title 52 Pa Code §29.503 – Age Restrictions)**
    - i. Are there any age restrictions?
  - b. Your system for conducting criminal background checks; **(Title 52 Pa Code §29.505 – Criminal History)**
    - i. How will background checks be conducted?
    - ii. How often will you conduct criminal background checks?
    - iii. What type of things in their criminal background check would disqualify them from employment?
    - iv. How will you maintain records (record retention) of the criminal background checks performed?
  - c. Please provide your driver training program.
  - d. Your system for conducting driver license/history checks; **(Title 52 Pa Code §29.504 – Driver History)**
    - i. How will driver license/history checks be performed?
    - ii. How often will you conduct driver license/history checks?
    - iii. How will you maintain records (record retention) of such checks?
  - e. Please provide your policies regarding alcohol and drug use by your drivers.
  
- 2.) Your response to question #6 of the applicant’s verified statements is inadequate. The vehicle identification number, “VIN” – is not the company vehicle number. Please provide the “VIN” for the two vehicles listed in the application.

- 3.) Please provide your vehicle safety program.
- a. In your application you stated that quarterly checks will be performed.
    - i. What type of maintenance will be conducted on your vehicles during these quarterly checks. Please explain in detail the maintenance that will be performed on your vehicles, and on what schedule that maintenance will be performed.
    - ii. Will there be any pre/post trip inspections by your drivers?
- 4.) Please review the below criteria and submit a revised compliant Statement of Financial Position:
- a. The information is to be exact and should not include estimates or approximations when accurate numbers are available. Property and vehicle valuations may be approximations, but bank accounts and loan balances should be exact amounts (rounded to the nearest dollar).
  - b. All relevant assets and debts are to be included (for example: vehicle loan balances/vehicle asset value, lease expenses, etc.).
  - c. The information provided is also to be strictly limited to assets and debts held by the applicant (D M Drumm Enterprises Inc), and not the individual member(s). Any property and accounts listed must be registered or titled to the corporation. Bank accounts must be in the name of D M Drumm Enterprises Inc. Vehicles must be registered to D M Drumm Enterprises Inc. Property must be titled to D M Drumm Enterprises Inc. If these items are not in the name of D M Drumm Enterprises Inc, then they should not be included on the balance sheet.

If you have not fully funded and equipped the business, now is the time to do so (before re-submitting your corrections). Applicants lacking suitable finances, resources, and equipment will be denied authority.

- d. In order to fully assist the Commission in determining your financial fitness, please provide supporting documentation for the statement of financial position (balance sheet). Acceptable means of support include current copies of bank statements (account numbers may be redacted), and notarized/official statements of account balances/ownership provided by bank officers (with current contact information). Any and all claimed vehicles or land/buildings must also include proof of ownership/registration vehicle titles, vehicle registrations, property titles, purchase agreements, etc.

You are encouraged to enlist professional financial assistance if you experience difficulty in constructing your statement of financial position. Be advised that failing to provide an acceptable financial statement is sufficient grounds for the denial of your application.

**PLEASE PROVIDED A THOROUGH TYPED RESPONSE TO  
THESE QUESTIONS ON A SEPARATE SHEET OF PAPER**

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# D.M. DRUMM ENTERPRISES INC.

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1.A- Applicants will be required to give 3 references on the application. I will contact the references and do a driving history and background check. The minimum age to drive for me will be 21 years or older.

B.- Background will be checked through the PA Docket sheets on the PA Judicial web site. Applicants will disqualify with any violent offense or major felony charges. The background checks will be performed at pre-employment and then annually. These records will be kept in the employee file in the company filing cabinet.

C.- The company has approx. a 4hr (3-5) Taxi driver training program that will be mandatory for all new hires to complete. The program is a classroom discussion with practical scenarios. Employees will also be required to take an annual review of this program.

D.- Driver license/history checks will be done through PENNDOT with a signed consent form from the applicant. This check will be done annually. Records will be maintained in the employee file.

E- We have a zero-tolerance policy for drugs and alcohol. A pre-employment drug screen will be required. Any accident or incident involving damage to a person, vehicle or property will require a drug test to continue employment.

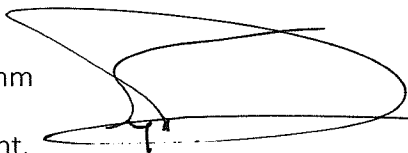
2.- I only have one vehicle listed on the application,

2024 KIA Carnival. VIN# KNDNC5H3XR6449429

3.- A quarterly inspection will be done by a local garage with state inspection license to have it checked and repaired if necessary. It will be the same as an annual PA state inspection to ensure the vehicle is safe to transport people. At this time the oil will be changed, and all fluids will be checked and grease any components that require it. Drivers will be required to do a pre-trip inspection of the vehicle daily.

Ty Drumm

President.



02/16/2024

**Statement of Financial Position (Balance Sheet)**

As of (date) 02/16/2026  
 (Must be less than 6 months old)

ASSETS

Current Assets		
Cash	<u>\$1,200.00</u>	
Other Current Assets (specify)	<u>                    </u>	
Total Current Assets		<u>\$1,200.00</u>
Tangible Assets		
Motor Vehicle Equipment	<u>\$25,000.00</u>	
Property (buildings, land, etc.)	<u>N/A</u>	
Office Equipment	<u>\$2,000.00</u>	
	<b>TOTAL ASSETS</b>	<u><u>\$27,000.00</u></u>

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	<u>N/A</u>	
Credit cards/revolving credit	<u>\$996.00</u>	
Other Liabilities (Attach schedule)	<u>N/A</u>	
Total Current Liabilities		<u><u>\$996.00</u></u>
Long Term Liabilities (Due after one year of date)		
Mortgage	<u>N/A</u>	
Long term commercial loan	<u>N/A</u>	
Other Liabilities (Attach Schedule)	<u>N/A</u>	
Total Long-Term Liabilities		
	<b>TOTAL LIABILITIES</b>	<u><u>\$996.00</u></u>



90 - 92 Main Street PO Box 58  
Wellsboro, PA 16901

**Address Service Requested**

Account Number XXXXXX7953  
Statement Start Date 01/01/2026  
Statement End Date 01/31/2026  
Page 1 of 4

00016914 M0299101302623224200 01 000000000 0016914 004



D M DRUMM ENTERPRISES INC  
1046 BOYER HILL RD  
SUNBURY PA 17801-5863

**Customer Service Information**

**Customer Service:** 1-877-838-2517  
**24/7 Telephone Banking:** 1-877-622-5526

**Written Inquiries:**  
P.O. Box 58, Wellsboro, PA 16901

**Visit Us Online:** [www.cnbankpa.com](http://www.cnbankpa.com)

**Email Inquiries:** [contactcn@cnbankpa.com](mailto:contactcn@cnbankpa.com)

**Join us on Facebook!**

**IMPORTANT MESSAGE**

**SUMMARY OF ACCOUNTS**

<b>Account Type</b>	<b>Account Number</b>	<b>Balance</b>
Business Interest Checking	XXXXXX7953	4,781.21

**Business Interest Checking** **Account Number: XXXXXX7953**

**Balance Summary**

<b>Beginning Balance as of 01/01/2026</b>	10,458.91
+ Deposits & Credits (3)	1,705.00
+ Interest Paid	0.51
- Withdrawals & Debits (8)	7,383.21
- Service Charges For Period	0.00
<b>Ending Balance as of 01/31/2026</b>	<b>4,781.21</b>

**Earnings Summary**

Interest for Period Ending 01/31/2026	0.51
Interest Paid Year to Date	0.51
Annual Percentage Yield Earned (APYE)	0.11%

**Account Activity - Business Interest Checking**

Date	Description	Debits	Credits	Balance
01/01	BEGINNING BALANCE			<b>\$10,458.91</b>
01/02	Check 2661	1,000.00		9,458.91
01/05	Deposit		875.00	10,333.91
01/05	External Withdrawal CAPITAL ONE - ONLINE PMT CA05CC50BF8F3B4	882.58		9,451.33
01/05	Check 2662	3,957.87		5,493.46
01/06	External Withdrawal CAT COMMERCIAL A - PAYMENT 274-1771-26	141.63		5,351.83
01/06	External Withdrawal WEB - COMMWLTHOFPAPATH BUSINESS TAX - PAEMPLOYTX TXP*17950453 *WTH *251231*T*0000015350*4* * *20260106*25	153.50		5,198.33





**Account Activity - Business Interest Checking (Continued)**

Date	Description	Debits	Credits	Balance
01/07	External Withdrawal IRS - USATAXPYMT 270640750722876	1,195.13		4,003.20
01/12	Deposit		730.00	4,733.20
01/29	Deposit		100.00	4,833.20
01/30	External Withdrawal UNEMP COMP EFT UNEMP COMP EFT - PADLIUCCON TXP*453712508 *UC000*260331*T*0000001050\69910305 7580953	10.50		4,822.70
01/30	External Withdrawal IRS - USATAXPYMT 270643045549208	42.00		4,780.70
01/30	Eff. 01-31 Credit Interest		0.51	4,781.21
<b>01/31</b>	<b>ENDING BALANCE</b>			<b>\$4,781.21</b>

**Checks Posted** \* Indicates a Skip in Check Number(s) (E) Indicates an Electronic Check

Date	Check #	Amount	Date	Check #	Amount
01/02	2661	1,000.00	01/05	2662	3,957.87

**Other Withdrawals**

Date	Description	Amount
01/05	External Withdrawal CAPITAL ONE - ONLINE PMT CA05CC50BF8F3B4	882.58
01/06	External Withdrawal CAT COMMERCIAL A - PAYMENT 274-1771-26	141.63
01/06	External Withdrawal WEB - COMMWLTHOFPAPATH BUSINESS TAX - PAEMPLOYTX TXP*17950453 *WTH *251231*T*0000015350*4* * *20260106*25	153.50
01/07	External Withdrawal IRS - USATAXPYMT 270640750722876	1,195.13
01/30	External Withdrawal UNEMP COMP EFT UNEMP COMP EFT - PADLIUCCON TXP*453712508 *UC000*260331*T*0000001050\69910305 7580953	10.50
01/30	External Withdrawal IRS - USATAXPYMT 270643045549208	42.00

**Deposits And Other Credits**

Date	Description	Amount
01/05	Deposit	875.00
01/12	Deposit	730.00
01/29	Deposit	100.00





## Checking Account Balance Worksheet

1.) Your current balance on this statement \$ \_\_\_\_\_

2.) List the deposits that do not appear on this statement:

Date	Amount	Date	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3.) Total deposits from line 2 + \$ \_\_\_\_\_

4.) Add lines 1 and 3 = \$ \_\_\_\_\_

5.) List any outstanding checks, transfers, debits, POS purchases or withdrawals that do not appear on this statement

Date/Ck#	Amount	Date/Ck#	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6.) Total deductions listed in step 5 + \$ \_\_\_\_\_

7.) Subtract line 6 from line 4 = \$ \_\_\_\_\_

This should be your present checkbook balance.

### IF BALANCES DO NOT AGREE, FOLLOW THE STEPS BELOW:

- \* Make certain all automatic charges (including service charges) noted on this statement have been subtracted from your checkbook balance.
- \* Make certain all automatic deposits noted on this statement have been added to your checking.
- \* Compare once again checks and deposit amounts in your check book with those shown on this statement.
- \* Double check all additions and subtractions in your checkbook.

To determine if a preauthorized electronic transfer has occurred on your account, you may telephone us at 1-877-838-2517.

## IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER (APPLIES TO CONSUMER ACCOUNTS ONLY)

Telephone us at 1-877-838-2517 OR

Write to us at P.O. Box 58, Wellsboro, PA 16901

Contact us as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

In your letter, give us the following information:

- (1) Account Information: Your name and account number.
- (2) Dollar amount: The dollar amount of the suspected error.
- (3) Description of Problem: Describe the error or transfer you are unsure about and explain as clearly as you can why you believe there is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation. In any event, we will investigate and correct any error no later than 45 days after you contact us.

## WHAT TO DO IF YOU THINK YOU FIND A MISTAKE ON YOUR LOAN STATEMENT

We figure the finance charge on your account by applying the periodic rate to the "average daily balance" of your account (including current transactions). To get the "average daily balance," we take the beginning balance of your account each day, add any new advances, and subtract any payments or credits and unpaid finance charges. This gives us the daily balance. Then, we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance."

If you think there is an error on your statement, write to us at:

C&N  
P.O. Box 58  
Wellsboro, PA 16901

You may also contact us on the web: [www.cnbankpa.com](http://www.cnbankpa.com)  
or via email: [contactcn@cnbankpa.com](mailto:contactcn@cnbankpa.com)

In your letter, give us the following information:

- (1) Account Information: Your name and account number.
- (2) Dollar amount: The dollar amount of the suspected error.
- (3) Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within sixty (60) days after the error appeared on your statement. You must notify us of any potential errors in writing (or electronically). You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.



Check Images

DM DRUMM ENTERPRISES, INC.  
 1046 BOYER HILL RD  
 SUNBURY, PA 17801

Date Dec 26 2025 2661

Pay to the Order of Klacik + Assoc P.C. \$1,000.00  
One thousand and 00/100 Dollars

For IN \$ 4354 Remo Basso

⑆03⑆⑆1554⑆⑆ 2661

01/02/26 2661 \$1,000.00

DM DRUMM ENTERPRISES, INC.  
 1046 BOYER HILL RD  
 SUNBURY, PA 17801

Date Dec 30 2025 2662

Pay to the Order of Ty Drumm \$3,957.87  
Thirty nine hundred fifty seven and 87/100 Dollars

For Dec Payroll

⑆03⑆⑆1554⑆⑆ 2662

01/05/26 2662 \$3,957.87



# COMMONWEALTH OF PENNSYLVANIA

## CERTIFICATE OF TITLE FOR A VEHICLE

15595

FUEL TYPE: DIESEL

170889999002229-001

LXPX149X9HD391100  
VEHICLE IDENTIFICATION NUMBER

2017  
YEAR

PETERBILT  
MAKE OF VEHICLE

76730304401 D  
TITLE NUMBER

TT  
BODY TYPE

0  
DUP

SEAT CAP

PRIOR TITLE STATE

10/17/16  
ODOM. PROCD. DATE

000000  
ODOM. MILES

0  
ODOM. STATUS

10/17/16  
DATE PA TITLED

10/17/16  
DATE OF ISSUE

18-376  
UNLADEN WEIGHT

GVWR

80,000  
GVWR

TITLE BRANDS

- ODOMETER STATUS
- 0 = ACTUAL MILEAGE
  - 1 = MILEAGE EXCEEDS THE MECHANICAL LIMITS
  - 2 = NOT THE ACTUAL MILEAGE
  - 3 = NOT THE ACTUAL MILEAGE-ODOMETER TAMPERING VERIFIED
  - 4 = EXEMPT FROM ODOMETER DISCLOSURE

- TITLE BRANDS
- A = ANTIQUE VEHICLE
  - C = CLASSIC VEHICLE
  - D = COLLECTIBLE VEHICLE
  - F = OUT OF COUNTRY
  - G = ORIGINALLY MFGD. FOR NON-U.S. DISTRIBUTION
  - H = AGRICULTURAL VEHICLE
  - L = LOGGING VEHICLE
  - P = IS/WAS A POLICE VEHICLE
  - R = RECONSTRUCTED
  - S = STREET ROD
  - T = RECOVERED THEFT VEHICLE
  - V = VEHICLE CONTAINS REISSUED VIN
  - W = FLOOD VEHICLE
  - X = IS/WAS A TAXI

REGISTERED OWNER(S)

D M DRIMM ENTERPRISES  
INC  
1046 BOYER HILL RD  
SUNBURY PA 17801

FIRST LIEN FAVOR OF:

ELEMENT FINANCIAL CORP

SECOND LIEN FAVOR OF:

FIRST LIEN RELEASED

7/21/2022  
BY: *[Signature]*  
AUTHORIZED REPRESENTATIVE

If a second lienholder is listed upon satisfaction of the first lien, the first lienholder must forward this Certificate of Title to the Bureau of Motor Vehicles with the appropriate form and fee.

SECOND LIEN RELEASED

DATE

MAILING ADDRESS

ELEMENT FINANCIAL CORP  
655 BUSINESS CENTER DR  
SUITE 250  
HORSHAM PA 19044

BY

AUTHORIZED REPRESENTATIVE



pennsylvania  
DEPARTMENT OF TRANSPORTATION

I certify as of the date of issue, the official records of the Pennsylvania Department of Transportation reflect that the person(s) or company named herein is the lawful owner of this said vehicle.

LESLIE S. RICHARDS

Secretary of Transportation

### D. APPLICATION FOR TITLE AND LIEN INFORMATION

TO BE COMPLETED BY PURCHASER WHEN VEHICLE IS SOLD AND THE APPROPRIATE SECTIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE COMPLETED.

SUBSCRIBED AND SWORN TO BEFORE ME:

MO. DAY YEAR

If a co-purchaser other than your spouse is listed and you want the title to be listed as "Joint Tenants With Right of Survivorship" (on death of one owner, title goes to surviving owner) CHECK HERE . Otherwise, the title will be issued as "Tenants in Common" (on death of one owner, interest of deceased owner goes to his/her heirs or estate).

IF NO LIEN, CHECK  IS THIS AN ELT? (IF YES, FIN REQUIRED) YES  NO

1ST LIENHOLDER FINANCIAL INSTITUTION NUMBER:

1ST LIENHOLDER NAME

STREET

CITY

STATE

ZIP

IF NO 2ND LIEN, CHECK  IS THIS AN ELT? (IF YES, FIN REQUIRED) YES  NO

2ND LIENHOLDER FINANCIAL INSTITUTION NUMBER:

2ND LIENHOLDER NAME

STREET

CITY

STATE

ZIP

SIGNATURE OF PERSON ADMINISTERING OATH

SIGN IN PRESENCE OF A NOTARY

STAMP OR SEAL

The undersigned hereby makes application for Certificate of Title to the vehicle described above, subject to the encumbrances and other legal claims set forth here.

SIGNATURE OF APPLICANT OR AUTHORIZED SIGNER

SIGNATURE OF CO-APPLICANT/TITLE OF AUTHORIZED SIGNER

STORE IN A SAFE PLACE - IF LOST APPLY FOR A DUPLICATE - ANY ALTERATION OR ERASURE VOIDS THIS TITLE

66925256

DO NOT ACCEPT DOCUMENT WITHOUT VERIFYING THE PRESENCE OF THE LIBERTY BELL WATERMARK