

Docket No, A-2026-3060487

FEB 26 2026

C-Pride Taxi Co, t/a C-Pride Taxi Company

PA Public Utility Commission
Secretary's Bureau

Response to Request for Information

1) My last Compliance issue was Insurance notification. Which was a result of the new insurance company (Progressive) that I had secured Insurance for 2025. They assured me they would inform you (PUC) of that electronically, As My old Insurance companies have done so in the past 20 years that I been doing Business. To my Surprise they had not contacted you. And I didn't Learn about this until I received "the Cancellation of my Certificate of Public Convenience" I then sent you a declaration page from Progressive Showing that I had maintain Insurance coverage throughout the 2025 year. Which showed I was carrying the required insurance, and I regrettably trusted the new Company (Progressive) instead of Personally confirming that it was communicated to you.

2) Response to Question #4As of right now I have a 100 Foot Driveway that I House my 2 Vehicles at, next to my Home. If more vehicles are added I will seek bigger accommodation.

3) Response to Question #5.... My Hiring standards for potential Drivers are as follows;

A) Drivers Must be 26 Years old or older

B) Drivers must submit a PA State Crimanal Background Check

i, we have conducted criminal background checks once a Year

ii, Disqualification in a criminal background check would be as follows any of the following

under Title 52 Pa Code &29.505-Criminal History

iii, All records are maintained in Drivers Person Files which are store in filing cabinet in office.

C) Driver Training Program is as follows: New drivers ride with Our Supervisor (Derrick Bradley) for 2 Days. The driver is then put in drivers' seat with Supervisor riding with him/her for 2 days. After, they are graded by the Supervisor to determine if they are qualified to drive our customers around.

Continue page 3

D) Driver History is Conducted by the Insurance Company And through the PA Dept of Transportation.

4) Response to question # 7

- a) We have a pre-trip inspection sheet that drivers are required to fill out also post trip inspection during clean up after driver's shift is over.
- b) Vehicle are inspected every other month by Apex Auto Repair (w 9th st, Chester, PA.) They have been performing maintenance and repairs on my Taxi for over 15 yrs. Also, Excell Automotive (12th ave., Prospect Park, PA.)
- c) as we register our vehicle every year. We are aware of the rule of not operating a vehicle for over 10 yrs and the 350-k mile limit.

Statement of Financial Position(Balance Sheet)

AS of 26-FEB-2026

ASSETS

Current Assets

Cash	\$2,073.09
Other Current Assets	(2 CD'S)(1)\$20,397.46 & (2)\$19,009.68

Total Current Assets **\$41,480.23**

Tangible Assets

Motor Vehicle Equipment	(2 Cars) estimated Value	\$21,000.00
Property (buildings, land, etc.)	Home Base Business.....Home Est.	\$150,000.00
Office Equipment	(3) phone lines , Copier, Desk Top Computer, 2 Way Radio System	

Total Tangible Assets **\$171,000.00**

STATEMENT OF FINANCIAL POSITION(BALANCE SHEET)
AS OF 26-FEB-2026

LIABILITIES

Current Liabilities (Due within one year of Date)

Loans	\$350.00 a Month=\$4,200.00 a Year
Credit Cards/Revolving Credit	\$0
Other Liabilities(attach Schedule) Property Tax and City Tax	<u>\$2,100.00 a Year</u>
Total Current Liabilities	<u>\$6,300.00 a Year</u>

Long Term Liabilities (Due after one Year of Date)

Mortgage	\$0
___ Long Term Commercial Loan (see info above)	
Other Liabilities (Attach Schedule)(Taxi Insurance)	<u>\$17,800.00 A Year</u>
TOTAL LIABILITIES	<u>\$24,100.00</u>

COMMONWEALTH OF PENNSYLVANIA

CERTIFICATE OF TITLE FOR A VEHICLE

FUEL: GAS

241038184000100 001

1GNKHKJ216732 <small>VEHICLE IDENTIFICATION NUMBER</small>	2016 <small>YEAR</small>	CHEVROLET <small>MAKE OF VEHICLE</small>	118040 <small>TITLE NUMBER</small>
TAXI <small>BODY TYPE</small>	0 <small>DUP</small>	6 <small>SEAT CAP</small>	NJ <small>PRIOR TITLE STATE</small>
04/12/24 <small>DATE PA TITLED</small>	04/12/24 <small>DATE OF ISSUE</small>	 <small>UNLADEN WEIGHT</small>	07/12/24 <small>ODOM. PROCD. DATE</small>
			118040 <small>ODOM. MILES</small>
			0 <small>ODOM. STATUS</small>

- 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 ROO
 - T = RECOVERED THEFT VEHICLE
 - V = VEHICLE CONTAINS REISSUED VIN
 - W = FLOOD VEHICLE
 - X = IS/WAS A TAXI

REGISTERED OWNER(S)
C-PRIDE TAXI COMPANY
 L.L.C.
 107 W 23RD ST
 CHESTER PA 19013

FIRST LIEN FAVOR OF: _____ SECOND LIEN FAVOR OF: _____

FIRST LIEN RELEASED: _____ DATE _____

BY: _____ AUTHORIZED REPRESENTATIVE

MAILING ADDRESS: _____

000000
 C-PRIDE TAXI COMPANY
 L.L.C.
 107 W 23RD ST
 CHESTER PA 19013

SECOND LIEN RELEASED: _____ DATE _____

BY: _____ 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.



MICHAEL B. CARROLL
Secretary of Transportation

D. APPLICATION FOR TITLE AND LIEN INFORMATION

SUBSCRIBED AND SWORN TO BEFORE ME: _____

SIGNATURE OF PERSON APPLYING

SIGN IN PRESENCE OF A NOTARY

SIGNATURE OF APPLICANT OR AUTHORIZED SIGNER

SIGNATURE OF CO-APPLICANT/TITLE OF AUTHORIZED SIGNER

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

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: _____

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

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

90429965

WSFS bank

We Stand For Service®

500 Delaware Avenue
Wilmington, DE 19801

Electronic Service Requested

Account Number:

Statement Date:

Page:

XXXXXX

01/31/2026

1 of 3

C PRIDE TAXI CO
C/O DARRELL SHORT
107 W 23RD ST
CHESTER PA 19013-5019**Customer Service Information**

Call 1.888.WSFSBANK

Email customerservice@wsfsbank.comVisit wsfsbank.com**WSFS SMALL BUSINESS CHECKING**

Account Number:

XXXXXX

Balance Summary

Beginning Balance as of 01/01/26	\$2,131.18
+ Deposits and Credits (5)	\$1,602.20
- Checks Posted (10)	\$1,199.47
- Withdrawals and Debits (2)	\$460.82
Ending Balance as of 01/31/26	\$2,073.09
Number of Days in Statement Period	31
Low Balance	\$841.29
Average Balance	\$1,528.55
Average Collected Balance	\$1,528.00

Checks Posted

* Indicates a break in check sequence

Date	Check#	Amount	Date	Check#	Amount	Date	Check#	Amount
Jan 05	2774	\$75.00	Jan 05	2800*	\$200.00	Jan 13	2805	\$85.55
Jan 05	2789*	\$125.00	Jan 05	2801	\$200.00	Jan 20	2806	\$150.00
Jan 05	2792*	\$65.00	Jan 12	2804*	\$200.00	Jan 21	2809*	\$33.92
Jan 05	2797*	\$65.00						

Transaction Detail

Date	Description	Deposits	Withdrawals
Jan 06	DEPOSIT TLR33403 BR 334	\$130.40	
Jan 06	DEPOSIT TLR33403 BR 334	\$240.00	
Jan 09	ELECTRONIC DEBIT AT&T Services PAYMENTS 260109 02802		-\$260.82
Jan 16	ELECTRONIC DEBIT VERIZON FINANCIA PAYMENTS 260116 02808		-\$200.00
Jan 22	DEPOSIT TLR33402 BR 334	\$500.00	
Jan 22	DEPOSIT TLR33402 BR 334	\$241.50	
Jan 30	DEPOSIT TLR33402 BR 334	\$490.30	

WSFS bank*We Stand For Service®*500 Delaware Avenue
Wilmington, DE 19801

Electronic Service Requested

Account Number:

Statement Date:

Page:

XXXXXX

02/21/2026

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DARRELL ANTHONY SHORT
107 W 23RD ST
CHESTER PA 19013-5019**Customer Service Information**

Call 1.888.WSFSBANK

Email customerservice@wsfsbank.comVisit wsfsbank.com**WSFS CERTIFICATE**

Account Number:

XXXXXX

Balance Summary

Beginning Balance as of 01/22/26	\$20,397.46
+ Deposits and Credits (0)	\$0.00
+ Interest Credits (0)	\$0.00
- Withdrawals and Debits (0)	\$0.00
Ending Balance as of 02/21/26	\$20,397.46
Number of Days in Statement Period	31
Low Balance	\$20,397.46
Average Balance	\$0.00
Average Collected Balance	\$20,397

Earnings Summary

Number of Days for APY 31

*We Stand For Service®*500 Delaware Avenue
Wilmington, DE 19801

Electronic Service Requested

Account Number:

XXXXXX

Statement Date:

02/21/2026

Page:

1 of 1

DARRELL ANTHONY SHORT
107 W 23RD ST
CHESTER PA 19013-5019**Customer Service Information**

Call 1.888.WSFSBANK

Email customerservice@wsfsbank.comVisit wsfsbank.com**WSFS CERTIFICATE**

Account Number:

XXXXXX

Balance Summary

Beginning Balance as of 02/10/26	\$0.00
+ Deposits and Credits (1)	\$19,009.68
+ Interest Credits (0)	\$0.00
- Withdrawals and Debits (0)	\$0.00
Ending Balance as of 02/21/26	\$19,009.68
Number of Days in Statement Period	12
Low Balance	\$19,009.68
Average Balance	\$0.00
Average Collected Balance	\$19,009

Transaction Detail

Date	Description	Deposits	Withdrawals
Feb 10	ADDITIONAL DEPOSIT TLR33404 BR 334	\$19,009.68	

Earnings Summary

Number of Days for APY	12
------------------------	----

Balance By Date

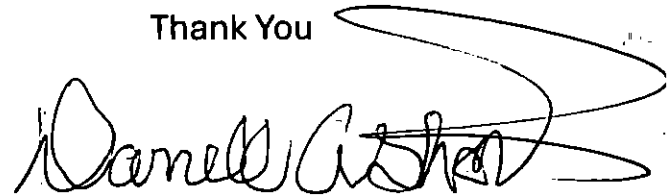
Date	Balance	Date	Balance
	\$0.00	Feb 10	\$19,009.68

To Whom it May Concern.

I have been running this Cab Company for over 20 Years. And if not for a new Insurance company misleading me. We would not be going through This.

- (1) Enclosed is My Insurance Declaration 2025. Showing That I still Maintained Insurance on the cabs even though they were not able to operate. Because I assumed that when I Emailed the Declaration to you in 2025. That you would rescind the Cancellation of my Certificate of Service.
- (2) Enclosed are the 2 Titles for the Taxi Cars that I own.
- (3) Enclosed is My Financial Statements you requested
- (4) I will also be more vigilant about the communication between the insurance company the PUC and myself.

Thank You

A handwritten signature in black ink, appearing to read "Darrell A Short". The signature is stylized with a large, sweeping flourish that loops back over the name.

Darrell A Short

Named insured

C-Pride Taxi Company
107 W 23RD ST
CHESTER, PA 19013

Policy number: 994690294

Underwritten by:
United Financial Casualty Company
July 29, 2025
Policy Period: Mar 17, 2025 - Mar 17, 2026
Page 1 of 2

progressivecommercial.com

Online Service

Make payments, check billing activity, print policy documents, update your policy or check the status of a claim.

1-800-895-2886

For customer service and claims service,
24 hours a day, 7 days a week.

Commercial Auto Insurance Coverage Summary

This is your Declarations Page Your coverage has changed

This form is nonparticipating with regard to paying dividends to policyholders.

Your coverage began the later of March 17, 2025 at 12:01 a.m. or the effective time shown on your application. This policy period ends on March 17, 2026 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852PA (10/20), 1652PA (02/19), Z313 (04/21), 4881PA (02/19), 4852PA (02/19) and Z228 (01/11).

The named insured organization type is a corporation.

COLLISION COVERAGE FOR RENTAL VEHICLES

IF THIS POLICY PROVIDES COLLISION COVERAGE ON A PRIVATE PASSENGER VEHICLE, IT WILL APPLY TO A PRIVATE PASSENGER VEHICLE YOU RENT IF THE RENTAL IS COVERED AS A "TEMPORARY SUBSTITUTE AUTO" AS PROVIDED FOR IN PART II OF THIS POLICY.

Policy changes effective July 28, 2025

Changes processed on:	July 28, 2025 11:52 a.m.
Premium change:	-\$1,262.00
Changes:	Wydeen A Brown has been added to the policy.

The changes shown above will not be effective prior to the time the changes were requested.

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$19,422
Bodily Injury and Property Damage Liability	\$35,000 combined single limit		
Uninsured Motorist - Nonstacked	\$15,000 each person/\$30,000 each accident		278
Underinsured Motorist - Nonstacked	\$15,000 each person/\$30,000 each accident		544
Basic First Party Benefit - Full Tort			382
Medical Expense Benefit Without Workers Comp	up to \$10,000		
Roadside Assistance			59
See Auto Coverage Schedule	Limit of liability less deductible		
Total 12 month policy premium			\$20,685

Rated drivers

1. Darrell Short
2. Derrick Bradley
3. Carl Kirksey
4. William Short
5. Wydeen A Brown

Auto coverage schedule

1. **2016 CHEVROLET TRAVERSE**

VIN: **1GNKVHKD7GJ214732** Garaging Zip Code: 19013 Radius: 50 miles

Personal use: N Body type: Sport Utility Vehicle

Liability Premium	UM Premium	UIM Premium	PIP Premium
\$9711	\$139	\$272	\$191

Other Coverages Premium	Roadside Deductible	Roadside Premium	Auto Total
	\$0	\$31	\$10,344

2. **2017 CHEVROLET TRAVERSE**

VIN: **1GNKVFKD0HJ146912** Garaging Zip Code: 19013 Radius: 50 miles

Personal use: N Body type: Sport Utility Vehicle

Liability Premium	UM Premium	UIM Premium	PIP Premium
\$9711	\$139	\$272	\$191

Other Coverages Premium	Roadside Deductible	Roadside Premium	Auto Total
	\$0	\$28	\$10,341

Penalty for Insurance Fraud

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Information Regarding Your Premium

A surcharge of \$7,588.00 due to moving violations or accidents is included in the total policy premium.

Company officers

Cory W. Fincher

President

Patricia M. Brown

Secretary

C-Pride Taxi Company

107 West 23rd streets

Chester, PA. 19013-5019

26-FEB-2026

I, DARRELL A. SHORT, 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 penalties of 18 Pa.C.S. & 4904 (relating to unsworn falsification to authorities)



Darrell A. Short

DATE OF DEPOSIT

FEB 26 2026

PA Public Utility Commission
Secretary's Bureau

PRESS FIRMLY TO SEAL



PRESS FIRMLY TO SEAL

PRIORITY MAIL EXPRESS
FLAT RATE ENVELOPE
POSTAGE REQUIRED



Retail

PRIORITY MAIL EXPRESS® RECEIVED

MAR 2 2026

FLAT RATE ENVELOPE



PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

CMPC
717-705-1952

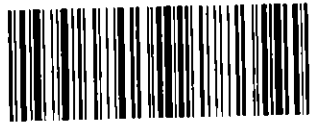
To: PUC MASTER

Agency: PUC

Floor:

External Carrier: US POSTAL

3/2/2026 7:46:09 AM



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PS10001000006

EP13F October 2023
OD: 12 1/2 x 9 1/2



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C PRIDE TAXI
107 W 23RD ST
CHESTER PA 19013-5019
(610) 447-0870

0 Lb 1.80 Oz
RDC 07

SIGNATURE REQUIRED

SCHEDULED DELIVERY DAY: 02/27/26 08:00 PM

C000

SHIP TO:



(610) 447-0670
MATTHEW L HOMSHER SECRETARY
PUC COMM KEYSTONE BLDG
400 NORTH ST
HARRISBURG PA 17120-0211

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