

Application for Motor Common Carrier of Persons in Paratransit Service

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE WHEN PROVIDING TRANSPORTATION ON A NONEXCLUSIVE, ADVANCE RESERVATION BASIS.

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

Zylo Medical Transportation, LLC

- If you are an individual who has not formed any type of corporate entity, you should enter your name **as it will appear on your insurance documents**.
- If you are filing for a partnership, but **not a limited liability partnership**, the names of all partners must be entered on this line. Those names should be entered **as they will appear on your insurance documents**. This includes husbands and wives filing jointly.
- If you are filing for a corporate entity (corporation, limited liability company, or limited liability partnership), **even if you are the sole shareholder member**, you must enter the name **exactly as it appears on the registration papers from the Corporation Bureau of the Pennsylvania Department of State**.

2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

N/A

This is any name which you will be operating under which differs from the **LEGAL NAME OF APPLICANT**. A **TRADE NAME** is considered a **FICTITIOUS NAME** if the identity of the applicant cannot be readily determined. *EXAMPLE: John Doe is the applicant and wants to use the name "Johnboy Vans" as his trade name. People cannot readily determine that John Doe is the actual operator; therefore, the name is fictitious and must be registered as such. Trade names such as "John Doe Vans" or "J. Doe Vans" are not considered fictitious and would not have to be registered.*

3. **Do you currently hold PUC Authority?** ___NO **Previous Authority?** ___NO

If YES, at PUC No. A- _____

4. **Are you a business entity registered with the PA Dept. of State?** ___NO

If NO, you must register (see checklist on how to register)

If YES, provide your PA Corporation Bureau Entity ID Number 0015168383

(See checklist and indicate type of business entity registered)

5. **If either a corporation or limited liability company, please list members (LLC) or shareholders and officers (corporation).**

<u>Aleem Mims</u>	<u>4321 Anthony Drive, Bethlehem, PA 18020</u>
<u>Caleb Mims</u>	<u>4321 Anthony Drive, Bethlehem, PA 18020</u>
<u>Malek Mims</u>	<u>4321 Anthony Drive, Bethlehem, PA 18020</u>
<u>Jai Kandola</u>	<u>3767 Carrington Circle, Easton, PA 18045</u>

6. **Mailing Address**

4321 Anthony Drive
Street Address

Bethlehem, PA 18020 Northampton
City, State and Zip Code County

835-274-1245 amims@zylomedicaltransport.com
Telephone Number E-mail Address

This is the e-mail address to which the Commission will send all official documents issued by the Commission until further notice.

7. **Physical Address** (If different than mailing address. Do not use a post office box.)

Street Address

City, State and Zip Code County

Telephone Number E-mail Address

The address entered here should reflect the actual location of the business. This is the address the Commission needs in order to dispatch Enforcement Officers to inspect equipment. If left blank, it will be assumed that the **PHYSICAL ADDRESS** is the same as the **MAILING ADDRESS**

8. **Attorney** (if applicable)

Attorney's Name & Telephone Number for this Filing

Attorney's Address E-mail Address

An attorney's name should only be entered if an attorney is filing the application for a client and the application is being sent under the attorney's cover letter.

9. **Does applicant have a USDOT Number?**

No Yes, at No. _____

10. **Describe the service area proposed by this application.**
(Use the space below or attach additional sheet if space provided is not sufficient).
-

To transport persons in wheelchair and stretcher vans between points in the counties of Monroe, Lehigh, and Northampton.

Examples:

- *To transport people whose personal convictions prevent them from owning or operating motor vehicles from points in Lancaster County to points in PA, and return.*
- *To transport people from the city and county of Philadelphia to correctional facilities in PA, and return.*
- *To transport people in wheelchair and stretcher vans from points in the city of Pittsburgh to points in Allegheny County, and return.*
- *To transport people between points in Northumberland County.*

11. **Certification:**

Applicant certifies that it is not now engaged in unauthorized intrastate transportation for compensation between points in Pennsylvania and will not engage in said transportation unless and until authorization is received from the Pennsylvania Public Utility Commission.

Applicant further certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance and that it may be subject to civil penalties, suspension or cancellation of the Certificate for failure to comply with Commission requirements.

Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Persons in Paratransit Service; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the certificate.

Verification of Application

I/We hereby state that the statement(s) made in this application is/are true and correct to the best of my/our knowledge and belief.

The undersigned understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Aleem Mims

(Print Name)

Aleem Mims

(Signature)

03/10/2026

(Date)

The verification of the application must be completed by the applicant appearing on Line 1 of the application by the named individual, all partners if a partnership, a member (if a limited liability company), or by the President or Secretary (if a corporation).

VERIFIED STATEMENT OF APPLICANT

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

Zylo Medical Transportation, LLC

Legal Name of Applicant

Trade Name, if any

4321 Anthony Drive

Bethlehem

PA

18020

Street Address (principal place of business)

City or Municipality

State

Zip Code

The Verified Statement of the Applicant factual details about your proposed transportation service. Your Verified Statement must answer all of the items listed below and on the following pages. Provide as much information as possible to prevent delay in processing your application. If you need more space to provide your answer, please attach additional pages identifying the appropriate item number.

1. Identify the person making the Verified Statement on behalf of the applicant. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number.

Aleem Mims, President, 4321 Anthony Drive, Bethlehem, PA 18020, (835)274-1245

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

Applicant's President is currently listed as a member of Ambucab LLC; however, the applicant company is a separate legal entity with independent ownership, management, insurance, vehicles, and operations.

3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. If practical experience is lacking, please provide an explanation and description of any education or training that you believe may be relevant.

The applicant's President has prior experience in the non-emergency medical transportation industry, including operational oversight, fleet coordination, regulatory compliance, and vendor relations.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to including office machines that will be utilized, and the facility to house vehicles. As a carrier of household goods in use, applicant should include a description of storage facilities, if applicable. Please include an explanation of your plan to maintain records required by the PUC, as well as normal business records. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and how you will maintain continuous communication with your drivers.

Operations will be conducted from a home-based administrative office equipped with a dedicated business telephone line, computer systems, and printing capabilities. Company vehicles will be housed in a secured parking lot at a local senior living facility with the owner's permission. PUC required records and standard business records will be maintained in both electronic and paper formats. Advanced dispatch software will be utilized to manage scheduling, vehicle tracking, and driver communication.

5. Please state the number of drivers you intend to use or hire in your business and explain why that number of drivers is appropriate for the size of the territory you will be serving. In addition, please explain:
 - a. Your hiring standards for drivers;
 - b. Your system for conducting criminal background checks;
 - c. Your driver training program;
 - d. Your system for conducting driver license checks;
 - e. Your policies regarding alcohol and drug use by your drivers.

Number of Drivers: Zyllo Medical Transportation, LLC intends to begin operations with three (3) drivers. This number is appropriate for the proposed service territory of Monroe, Lehigh, and Northampton Counties. Three drivers will allow the company to adequately cover scheduled trips across the three-county area while maintaining reliable service.

a. Hiring Standards: All driver candidates must possess a valid Pennsylvania driver's license, maintain a clean driving record, pass a criminal background check, pass a pre-employment drug screening, and demonstrate the physical ability to safely assist passengers with mobility limitations.

b. Criminal Background Checks (§ 29.505): Criminal history checks will be conducted on all drivers prior to hire through a qualified third-party screening service. No individual with a disqualifying criminal conviction will be permitted to drive. Background check records will be retained in each driver's personnel file for the duration of employment and for three (3) years following separation. Checks will be renewed annually thereafter.

c. Driver Training Program: All drivers will complete an orientation program prior to operating any vehicle. Training will cover passenger assistance techniques, wheelchair securement, defensive driving, emergency procedures, and PUC compliance requirements.

d. Driver License Checks (§ 29.504): Driving history records will be obtained directly through PennDOT prior to hire and reviewed annually thereafter. Records will be retained in each driver's personnel file for a minimum of three (3) years.

e. Driver Age (§ 29.503): All drivers must be a minimum of eighteen (18) years of age in compliance with 52 Pa. Code § 29.503.

f. Alcohol and Drug Policy: Zyllo Medical Transportation, LLC maintains a strict zero-tolerance policy for alcohol and drug use. All drivers are subject to pre-employment, random, post-accident, and reasonable suspicion drug and alcohol testing. Any driver found in violation of this policy will be immediately removed from service.

6. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below.

Number of Vehicles: Zyllo Medical Transportation, LLC intends to begin operations with two (2) vehicles, a 2011 Ford E-250 and a 2016 Dodge Grand Caravan, both of which are fully wheelchair and stretcher accessible. Two vehicles is appropriate for the company's initial operations given that the company is launching with three (3) drivers to serve Monroe, Lehigh, and Northampton Counties. The Lehigh Valley region has a significant and growing demand for non-emergency medical transportation, and two accessible vehicles will allow the company to reliably service scheduled trips while building its client base. As client volume increases, Zyllo Medical Transportation, LLC intends to expand its fleet accordingly to maintain reliable and efficient service to the territory.

YEAR	MAKE	MODEL	<u>SEATING CAPACITY*</u>	VEHICLE ID #	MILEAGE
2011	Ford	E-250	6	1FTNS2EW9BDB04524	104,000
2016	Dodge	Grand Caravan	5	2C4RDGCG0GR154253	110,000

*Vehicles with seating capacity of more than 15 passengers, including driver, can't be used in paratransit service.

7. 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 applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

Vehicle Safety Program

a. Periodic Vehicle Maintenance Plan: Zylo Medical Transportation, LLC will conduct preventative maintenance on all vehicles every 3,000 miles or as otherwise indicated by the manufacturer's recommended service schedule, whichever comes first. Scheduled maintenance will be performed by a qualified local mechanic and will include, but is not limited to: oil and filter changes, tire inspection and rotation, brake inspection, fluid level checks, battery inspection, belts and hoses inspection, and wheelchair lift and securement equipment inspection. All maintenance performed will be logged and retained in each vehicle's maintenance file in both digital and hard copy format.

b. Compliance with Pennsylvania Vehicle Equipment Standards (67 Pa. Code, Chapter 175): All vehicles operated by Zylo Medical Transportation, LLC will be maintained in continuous compliance with applicable Pennsylvania vehicle equipment standards as set forth in 67 Pa. Code, Chapter 175. Drivers will complete a formal pre-trip and post-trip inspection before and after every shift using the inspection feature within the company's dispatch software application. Inspection reports are automatically recorded and stored digitally, accessible to management in real time. Any defect or safety concern identified during an inspection will be reported immediately to management and the vehicle will be removed from service until the defect is corrected by a qualified mechanic. Corrective maintenance records will be retained alongside routine maintenance records in each vehicle's file.

Daily Vehicle Inspection Checklist items include:

- Brakes and brake lights
- Headlights, taillights, and turn signals
- Horn
- Mirrors
- Tires and tire pressure
- Windshield wipers and fluid
- Fuel level
- Seatbelts
- Wheelchair lift operation and securement equipment
- Interior cleanliness and passenger safety equipment
- Engine oil and fluid levels
- Emergency equipment (first aid kit, fire extinguisher)

8. Please explain what steps you have taken to determine if you can obtain insurance and pay the required insurance premiums.

Insurance Information:

Zylo Medical Transportation, LLC has obtained a commercial insurance quote through National Liability & Fire Insurance Company (National Indemnity group), arranged through Great Lakes General Agency, Inc. Quote number 17769123 was issued on March 4, 2026. The company intends to finalize and bind the policy imminently.

The policy covers both company vehicles with the following limits:

Coverage	Limit
Liability	\$1,000,000 CSL
Uninsured Motorist (UM)	\$1,000,000 CSL
Underinsured Motorist (UIM)	\$1,000,000 CSL
First Party Benefits (Basic & Additional)	Per PUC requirements

Statement of Financial Position (Balance Sheet)

Zylo Medical Transportation, LLC

As of: March 10, 2026

ASSETS

Current Assets

Cash — Zylo Medical Transportation LLC Business Checking	\$10,983.15
Other Current Assets	\$0

Total Current Assets	\$10,983.15
-----------------------------	--------------------

Tangible Assets

Motor Vehicle Equipment

2016 Dodge Grand Caravan (VIN: 2C4RDGCG0GR154253)	\$21,000.00
2011 Ford E-250 (VIN: 1FTNS2EW9BDB04524)	\$9,000.00
Property (buildings, land, etc.)	\$0
Office Equipment	\$3,169.36

Total Tangible Assets	\$33,169.36
------------------------------	--------------------

TOTAL ASSETS	\$44,152.51
---------------------	--------------------

LIABILITIES

Current Liabilities (Due within one year of date)

Loans	\$0
Credit cards/revolving credit	\$0
Other Liabilities	\$0

Total Current Liabilities	\$0
----------------------------------	------------

Long Term Liabilities (Due after one year of date)

Mortgage	\$0
Long term commercial loan	\$0
Other Liabilities	\$0

Total Long-Term Liabilities	\$0
------------------------------------	------------

TOTAL LIABILITIES	\$0
--------------------------	------------

NET EQUITY (Total Assets – Total Liabilities)	\$44,152.51
--	--------------------

Supporting Documentation Enclosed:

- LLC business bank statement confirming balance of \$10,983.15 (account number redacted)
- Vehicle registrations for both vehicles confirming title in name of Zylo Medical Transportation LLC
- Proof of office equipment ownership

ZYLO MEDICAL TRANSPORTATION LLC X9636 – XXX9636 ▼

Account Information

Balance

Previous day transactions (-\$236.49 / +\$5,200.00)	\$4,963.51
Current balance	\$6,203.15
Total float	\$0.00
Holds	\$0.00
Pending transactions (-\$0.32 / +\$4,780.32)	\$4,780.00
Other transfers	\$0.00
Today's float	\$0.00
Available balance	\$10,983.15
Line of credit	\$0.00
Total funds available	\$10,983.15

Activity

Last deposit (Mar 09, 2026)	\$5,000.00
Last check (Mar 09, 2026)	\$104.10

Interest



Last interest payment	\$0.00
-----------------------	--------

ZYLO MEDICAL TRANSPORTATION LLC X9636 – XXX9636

Search Transactions

Activity: All transactions Type: All

Transactions

 Pending  Posted Total debits: -24,215.07 (86) Total credits: +35,198.22 (15)

Date 	Description 	Debit 	Credit 	Balance
 Mar 10, 2026	Deposit BY 24 224 35		4,780.00	10,983.15
 Mar 10, 2026	JPMorgan Chase ACCTVERIFY 28367057453	0.32		6,203.15
 Mar 10, 2026	JPMorgan Chase ACCTVERIFY 28367057451		0.24	6,203.47
 Mar 10, 2026	JPMorgan Chase ACCTVERIFY 28367057452		0.08	6,203.23
 Mar 10, 2026	804797 PREAUTH-SIG AMAZONPRIME MEMB 888-280-4331 WA 99999999 804797		1.94	6,203.15
 Mar 09, 2026	804797 PREAUTH-SIG B2B Prime Amzn.com/bill WA 99999999 804797	1.94		6,201.21
 Mar 09, 2026	FEE FOR ATM INQUIRY 03/09 07:36 111 PAPERMILL RD BLOOMSBURG PA 7E150079 005748	1.00		6,203.15
 Mar 09, 2026	FEE FOR ATM INQUIRY 03/09 07:36 111 PAPERMILL RD BLOOMSBURG PA 7E150079 005747	1.00		6,204.15
 Mar 09, 2026	XX0418 PURCHASE-SIG 03/08 20:47 SP WHEELCHAISTR WHEELCHAISTR TX NTIRMREP 09671	104.10		6,205.15
 Mar 09, 2026	XX0392 PURCHASE-SIG 03/09 07:12 AMAZON MKTPL BE1 Am n.com/bill WA 00000000 05289	81.60		6,309.25
 Mar 09, 2026	XX0392 PURCHASE-PIN 03/08 22:28 AMAZON.COM SEATTLE WA 00000000 RHBK26	37.30		6,390.85
 Mar 09, 2026	XX0392 PURCHASE-SIG 03/09 08:12 AMAZON MKTPL BE4 Am n.com/bill WA 00000000 07973	10.49		6,428.15
 Mar 09, 2026	XX0392 PURCHASE-SIG 03/08 09:38 Bumper New York NY 00000000 13NQU6PJDPGL	1.00		6,438.64
 Mar 09, 2026	DEPOSIT		5,000.00	6,438.64

Date ▼	Description ↕	Debit ↕	Credit ↕	Balance
● Mar 09, 2026	<u>DEPOSIT</u>		200.00	1,439.64
● Mar 06, 2026	XX0392 PURCHASE-RECUR 03/03 15:43 WIX.COM 12279384 WWW.WIX.COM CA XT3X9ZFX 02852	184.44		1,239.64
● Mar 05, 2026	XX0392 PURCHASE-SIG 03/01 17:46 COMM OF PA OB/OC 717-425-6646 PA 00000000 001663	350.00		1,424.08
● Mar 05, 2026	XX0418 PURCHASE-SIG 03/04 14:28 Walmart.com Bentonville AR 02003144 030402008178	7.39		1,774.08
● Mar 05, 2026	XX0392 POS RETURN 03/05 06:31 PDFFILLER.COM 855-7501663 MA 76892678 070758		1.50	1,781.47
● Mar 04, 2026	XX0392 PURCHASE-SIG 03/03 19:30 QUEENSBORO INDUS 910-2511251 NC 75679867 038755	117.80		1,779.97
● Mar 04, 2026	XX0392 PURCHASE-SIG 03/03 08:56 VENTURE X BETHLE 610-9056218 PA 75679867 098048	103.00		1,897.77
● Mar 04, 2026	XX0418 PURCHASE-SIG 03/04 12:48 WAWA 8181 BETHLEHEM TOW PA 48699104 028507	26.10		2,000.77
● Mar 04, 2026	XX0392 PURCHASE-SIG 03/03 22:50 RACEWAY BETHLEHE BETHLEHEM PA 001 070286	25.00		2,026.87
● Mar 02, 2026	XX0392 PURCHASE-SIG 03/01 14:02 GOOGLE WORKSPACE SUPPORT.GOOGLE CA WPGTID01 05423	61.56		2,051.87
● Mar 02, 2026	XX0392 PURCHASE-RECUR 03/01 19:25 GOOGLE SVCS ylo g.co/HelpPay# CA 00000000 037	54.82		2,113.43
● Mar 02, 2026	XX0392 PURCHASE-SIG 03/01 21:35 VISTAPRINT 866-207-4955 MA 00000000 020297	52.98		2,168.25
● Mar 02, 2026	XX0392 PURCHASE-SIG 02/27 17:51 DD DOORDASH ANN DOORDASH.COM CA APGEHDCX 061392	36.20		2,221.23
● Mar 02, 2026	XX0418 PURCHASE-SIG 02/28 19:17 WALMART.COM 8009 BENTONVILLE AR 00009920 044518	17.84		2,257.43

PENNSYLVANIA VEHICLE REGISTRATION

PLEASE SIGN YOUR CREDENTIAL - To validate your credential, you need to sign your name in ink as indicated below. The registration must be available when the vehicle is used.

PENNSYLVANIA'S LITTERING LAW - As a reminder, Pennsylvania has laws against littering on our roadways and on public and private property. Under law, PennDOT is required to include this statement on vehicle credentials to remind motorists of littering laws. By signing your registration credential, you acknowledge that you have received notice of this provision.

Section 3709 of the Pennsylvania Vehicle Code provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or upon any other public or private property without the consent of the owner thereof or into or on the waters of this Commonwealth from a vehicle, any waste paper, sweepings, ashes, household waste, glass, metal, refuse or rubbish or any dangerous or detrimental substance, or permitting any of the preceding without immediately removing such items or causing their removal.

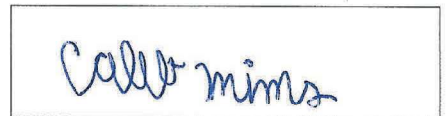
For any violation of section 3709, you may be subject to a fine of up to \$300 upon conviction, including any violation resulting from the conduct of any other persons operating, in possession of or present within the vehicle with your permission, if you do not with reasonable certainty identify the driver of the vehicle at the time the violation occurred.

PLEASE DRIVE SAFELY AND REMEMBER TO BUCKLE UP

COMMONWEALTH OF PENNSYLVANIA REGISTRATION CREDENTIAL

EXPIRY: FEB 28, 2027 VALID: 3/12/2026

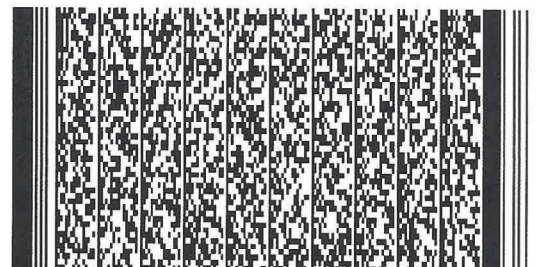
PLATE: NCY5030
TITLE: 89664796901 ZY
VIN: 2C4RDGCG0GR154253
YR/MAKE: 2016 DODGE
TYPE: SW
WID: 26071 3427 033463



SIGNATURE

I hereby acknowledge this day that I have received notice of the provisions of Section 3709 of the Vehicle Code.

077033
ZYLO MEDICAL TRANSPORTATION LLC
4321 ANTHONY DR
BETHLEHEM PA 180209323



PENNSYLVANIA VEHICLE REGISTRATION

PLEASE SIGN YOUR CREDENTIAL - To validate your credential, you need to sign your name in ink as indicated below. The registration must be available when the vehicle is used.

PENNSYLVANIA'S LITTERING LAW - As a reminder, Pennsylvania has laws against littering on our roadways and on public and private property. Under law, PennDOT is required to include this statement on vehicle credentials to remind motorists of littering laws. By signing your registration credential, you acknowledge that you have received notice of this provision.


Section 3709 of the Pennsylvania Vehicle Code provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or upon any other public or private property without the consent of the owner thereof or into or on the waters of this Commonwealth from a vehicle, any waste paper, sweepings, ashes, household waste, glass, metal, refuse or rubbish or any dangerous or detrimental substance, or permitting any of the preceding without immediately removing such items or causing their removal.

For any violation of section 3709, you may be subject to a fine of up to \$300 upon conviction, including any violation resulting from the conduct of any other persons operating, in possession of or present within the vehicle with your permission, if you do not with reasonable certainty identify the driver of the vehicle at the time the violation occurred.

PLEASE DRIVE SAFELY AND REMEMBER TO BUCKLE UP

COMMONWEALTH OF PENNSYLVANIA REGISTRATION CREDENTIAL

EXPIRY:	FEB 28, 2027	VALID:	3/12/2026
PLATE:	VBN3875	REG. GROSS WT:	7000
TITLE:	89243529702 ZY	UNLADEN WEIGHT:	3700
VIN:	1FTNS2EW9BDB04524	CLASS:	02
YR/MAKE:	2011 FORD		
TYPE:	TK		
WID:	26071 3427 034460		



SIGNATURE

I hereby acknowledge this day that I have received notice of the provisions of Section 3709 of the Vehicle Code.

EMISSIONS INSPECTION REQUIRED/DIESEL VEHICLES EXEMPT COUNTY:NORTHAMPTON

077033
ZYLO MEDICAL TRANSPORTATION LLC
4321 ANTHONY DR
BETHLEHEM PA 180209323



Wireless number
484-326-1998
Order Date
02/12/2026
Product / Solutions
Wireless
Order Status
Completed
Order Type
New Service and Equipment
Created By
PROSPECT-AUTOMATION
Order Date
02/12/2026
Ship Date
02/12/2026

Equipment Payment
EQUIPMENT WILL BE BILLED
TO CREDIT CARD VISA XXXX-
XXXX-XXXX-0392 XX/XXXX
Ace/Loc Order number
Order #: 1141180 Loc: Q652701

Ship To
Aleem Mims Zylo Medical
Transportation 4321 ANTHONY
DR BETHLEHEM, PA 18020 484-
222-0141
amims@zylomedicaltransport.com
Courier
FEDEX
Tracking Number
[496875733649](#)
[512440082778](#)
[Print Return Label](#)

[Cancel Order](#)

[Download order receipt](#)

This order can no longer be canceled. Please click on reprint label to return the device.

[Worry Free Guarantee](#)

Item	Qty	Product	One Time	Monthly															
Account Level																			
Shared Service	1	CDMA-LESS ROAM TIER OVERRIDE		\$0.00															
Shared Service	1	INCLUDE CANADA/MEXICO		\$0.00															
Shared Service	1	5G DYNAMIC SPECTRUM SHARING		\$0.00															
Shared Service	1	UNLIMITED PLAN INDICATOR		\$0.00															
Shared Service	1	C-BAND PROVISIONING		\$0.00															
Shared Service	1	5GB MOBILE HOTSPOT		\$0.00															
Shared Service	1	ECONOMIC ADJUSTMENT CHARGE		\$2.98															
Shared Service	1	4G HSS ENTITLEMENT		\$0.00															
Shared Service	1	ECONOMIC ADJUSTMENT CHARGE		\$0.98															
Subtotal			\$2,151.97	\$2.98															
<table border="1"> <thead> <tr> <th>Package Details</th> <th>Line Information</th> <th>Agreements</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Device</td> <td>1</td> <td>iPhone 17</td> <td>\$0.00</td> <td></td> </tr> <tr> <td>Plan</td> <td>1</td> <td>My Biz Plan</td> <td></td> <td>\$34.25</td> </tr> </tbody> </table>					Package Details	Line Information	Agreements			Device	1	iPhone 17	\$0.00		Plan	1	My Biz Plan		\$34.25
Package Details	Line Information	Agreements																	
Device	1	iPhone 17	\$0.00																
Plan	1	My Biz Plan		\$34.25															

Review Broadband Facts

Get key information about your plan and other broadband plans in your service area including prices, speeds, data allowances and ore with our Broadband Facts Labels.

Sim	1	UNIVESIM5G-SAB-A	\$0.00	
Features	Chargeable or Selected Features			\$0.00
	Included Features			\$0.00
Shipping	FREE OVERNIGHT SHIPPING		\$0.00	
All packages(4) Subtotal			\$2,989.96	\$141.61
Taxes and Fees	PA State Sales Tax		\$179.40	
Taxes			\$179.40	
One Time Credit			\$2,151.97	
Total Charges			\$3,169.36	\$144.59



COMMONWEALTH OF PENNSYLVANIA

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

March 10, 2026

Docket No. A-2026-3060853

ZYLO MEDICAL TRANSPORTATION LLC
4321 ANTHONY DR
BETHLEHEM PA 18020

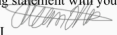
RE: Application of Zylo Medical Transportation, LLC, 4321 Anthony Dr., Bethlehem, Northampton County, PA 18020. 835-274-1245

To Whom It May Concern:

On March 4, 2026, the application of ZYLO MEDICAL TRANSPORTATION LLC, was accepted by the Commission; however, multiple issues must be addressed before publication to the Pennsylvania Bulletin may proceed. Please review page three of this correspondence for additional information and respond appropriately.

Please forward the information to the Secretary of the Commission **within ten (10) working days** from the date of this letter. **Currently, the only acceptable means of filing your response is through the Commission's e-file system. Information is available at the following link to efile:** <https://www.puc.state.pa.us/>

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 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.

Please submit your response to the address cited in this letter's header. Faxes, emails, and other forms of filing are unacceptable.

Sincerely,



Matthew L. Homsher, Secretary

Enclosure

cc: Josh Kwiatkowski