



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

April 16, 2026

Docket No. A-2026-3061672

**ANCHOR MEDICAL TRANSPORT LLC  
1534 MACHINERY RD  
WEST CHESTER PA 19380-1556**

**RE: Application of Anchor Medical Transport, LLC, 1534 Machinery Rd West Chester, Chester County, PA 19380-1556. 484-301-5780**

To Whom It May Concern:

On April 9, 2026, the application of ANCHOR MEDICAL TRANSPORT, LLC, was received 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.

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

I, Andrew Bartley, 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 via the Commission's e-file website (information available at <https://www.puc.pa.gov/filing-resources/>), or to the address cited in this letter's header. Faxes, emails, and other forms of filing are unacceptable.

Sincerely,

A handwritten signature in black ink that reads 'Matthew L. Hander'. The signature is written in a cursive, flowing style.

Enclosure

cc: Josh Kwiatkowski

Docket No. A-2026-3061672  
ANCHOR MEDICAL TRANSPORT, LLC  
Data Request

1. Before your application can be processed further, you are required to provide an acceptable description of the proposed service area. Your request should be limited to a scope which can be supported by your present resources and financial position. As your business grows, additional territories and rights may be applied for. Applicants who request service areas beyond the scope of their resources risk the outright denial of their application, or possible Commission dictated revisions to their original request.

Your proposed service area must be fully bound, and easily discernible. Terms such as, “surrounding communities” is not suitably specific. The use of municipal boundaries, roads, railroads, or natural boundaries such as rivers and streams, etc., are generally specific enough.

**YOU SHOULD ONLY SPECIFY AREAS FROM WHICH YOU WISH TO ORIGINATE SERVICE.**

Example:

- a. Between points in Pennsylvania
  - b. between points in the counties of X, Y, and Z.
  - c. from points in the counties of X, Y, and Z, to points in Pennsylvania, and return.
  - d. from points in the counties of X, Y, and Z, to points in the counties of A, B, and C, and return
2. In response to Question #5: **when asked to provide a plan you are expected to provide a PLAN which is fully responsive to each portion of the question** *and* to ensure that the plan satisfies the requirements of 52 Pa Code. You may hire a third

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party to execute the actual check, but you, as the applicant, are expected to establish a policy which complies with the governing laws and regulations. You are also expected to provide this Commission with written evidence of said plan/policies.

- a. In reference to Question #5
  - i. You are specifically advised to review the requirements of the following chapters of 52 Pa Code **and to submit EVIDENCE of compliant plan for drivers which completely addresses the following:**
    - § 29.503. Driver Age
    - § 29.504. Driver history (record retention)
    - § 29.505. Criminal history (schedule and record retention)
3. Your vehicle safety program is inadequate as described. Please provide a copy of your complete safety program and include copies of your vehicle maintenance plan.
  - a. Do you perform daily pre and post trip inspections?
  - b. If not, why not?
  - c. If so, please provide a copy of your daily vehicle inspection checklists.
4. Please provide information on your insurance quotes. Include the provider's name, policy limits, and annual costs. Do you intend to pay your premiums in monthly installments, or will you pay the entire premium in advance?
5. Please review the below criteria and submit a revised compliant Statement of Financial Position (if necessary) **and provide evidence to support the statement (required):**
  - a. The statement presented must be **DATED and comprised of information which is less than 6 months old.**
  - b. The submission **MUST be comprised of information which is accurate as of the date provided.**
  - c. **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; however, if the valuation is higher than typical Kelly Blue Book (or similar) valuations, you should provide an explanation as to why (e.g. vehicle with an installed wheelchair lift, etc).

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Bank accounts and loan balances should be exact amounts (rounded to the nearest dollar).

- d. **ALL relevant assets and debts** are to be included (**vehicle loan balances/vehicle asset value, lease expenses, etc.**).
- e. **The information provided is also to be strictly limited to assets and debts HELD BY THE APPLICANT (ANCHOR MEDICAL TRANSPORT LLC), 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 ANCHOR MEDICAL TRANSPORT LLC. Vehicles must be registered to ANCHOR MEDICAL TRANSPORT LLC. Property must be titled to ANCHOR MEDICAL TRANSPORT LLC. Relevant Vehicle and facility leases should also be properly shown and allocated. **If these items are not in the name of ANCHOR MEDICAL TRANSPORT LLC, 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 updates). Applicants lacking suitable finances, resources, and equipment will be denied authority.

**Finally, in order to fully assist the Commission in verifying 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/or notarized/official statements of account balances/ownership provided by bank officers (with current contact information). Also include any and all claimed vehicles or land/buildings must also include proof of ownership/registration - vehicle registrations, property titles, purchase agreements, leases, 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, as is failure to provide the requested supporting documentation.**

6.

Reply 1.

The applicant proposes to provide non-emergency medical transportation service from points within Chester County, Pennsylvania, to points within Pennsylvania, and return. This service area is appropriate based on the applicant's current operational resources and will allow for reliable and efficient service.

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Reply 2.

Driver Qualification and Safety Policy

Anchor Medical Transport LLC has established the following policies to ensure compliance with 52 Pa. Code Chapter 29 and to maintain safe and qualified drivers.

a. Driver Age (§ 29.503)

All drivers must be at least 18 years of age and possess a valid driver's license issued by the Commonwealth of Pennsylvania or another state. Drivers must be legally authorized to operate a motor vehicle and meet all applicable state requirements prior to employment.

b. Driver History (§ 29.504)

The applicant will review each driver's motor vehicle record (MVR) prior to hiring and periodically thereafter. Drivers must maintain a safe driving record with no disqualifying violations. Copies of driver licenses and motor vehicle records will be maintained in a driver qualification file. These records will be retained in accordance with applicable regulations and made available for inspection upon request.

c. Criminal History (§ 29.505)

Criminal background checks will be conducted on all drivers prior to employment using a reputable third-party screening provider. Background checks will be reviewed to ensure the safety of passengers and compliance with applicable regulations. Records of criminal background checks will be maintained in each driver's file and retained in accordance with applicable recordkeeping requirements.

Anchor Medical Transport LLC will maintain all driver qualification records in an organized and secure manner and will ensure ongoing compliance with Pennsylvania Public Utility Commission regulations.

Reply 3.

Vehicle Safety and Maintenance Program

Anchor Medical Transport LLC is committed to maintaining all vehicles in safe operating condition and in full compliance with Pennsylvania Public Utility Commission regulations.

All vehicles will be maintained in accordance with manufacturer recommendations and applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175). Vehicles will undergo required state inspections and any deficiencies will be promptly corrected.

A preventative maintenance schedule will be followed, including regular oil changes, brake inspections, tire checks, and routine servicing. Maintenance records will be documented and retained for each vehicle.

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a. Daily Vehicle Inspections

Yes, the applicant will perform daily pre-trip and post-trip vehicle inspections. Drivers are required to inspect each vehicle prior to operation and after completing service to ensure all safety components are functioning properly.

b. Inspection Procedures

Drivers will complete a standardized inspection checklist that includes brakes, lights, tires, mirrors, seatbelts, fluid levels, and general vehicle condition. Any safety concerns will be reported immediately and the vehicle will be removed from service until corrected.

c. Recordkeeping

Completed inspection checklists and maintenance records will be maintained in an organized manner and retained for review in accordance with applicable regulations.

Anchor Medical Transport LLC is committed to ensuring all vehicles are safe, reliable, and properly maintained to protect passengers, drivers, and the public.

Daily Vehicle Inspection Checklist

Driver Name: \_\_\_\_\_

Date: \_\_\_\_\_

Vehicle: \_\_\_\_\_

Pre-Trip Inspection

- Brakes functioning properly
- Headlights, brake lights, and turn signals operational
- Tires properly inflated and in good condition
- Mirrors clean and properly adjusted
- Seatbelts functioning
- Windshield and wipers in good condition
- Fluid levels checked (oil, coolant, etc.)
- No visible leaks or damage
- Vehicle clean and safe for passengers

Post-Trip Inspection

- Vehicle checked for damage
- Interior cleaned and free of hazards
- No new mechanical issues observed

Notes / Issues: \_\_\_\_\_

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Driver Signature: \_\_\_\_\_

Reply 4.

#### Insurance Information

The applicant has obtained a commercial auto insurance quote through Pathway Insurance Services, Inc., with coverage provided by Berkshire Hathaway Homestate Insurance Company.

Coverage: Commercial Auto Liability Insurance  
Policy Limits: \$1,000,000 Combined Single Limit  
Estimated Annual Premium: \$19,493

The quoted premium includes an initial down payment of \$3,899, followed by monthly installments of approximately \$1,560.

The applicant intends to pay the premium through monthly installments to manage cash flow during the initial startup phase. The applicant has reviewed these costs and determined that the required insurance coverage is financially feasible.

The applicant is prepared to secure the required insurance coverage and ensure that all necessary filings, including Form E, are submitted to the Pennsylvania Public Utility Commission prior to commencing operations.

Proposed Policy Period: 03/20/2026 - 03/20/2027 Submission ID 17832783 Insured Information Agent Information Business Name DBA City, St Zip DOT Anchor Medical Transport LLC West Chester, PA 19380 N/A Agency Name Agent Email Pathway Insurance Services, Inc. Molly Keating molly@pathwayinsurance.net Coverage and Premium Information Annual Premium\* Liability \$1,000,000 Combined Single Limit \$15,575 Uninsured Motorists \$1,000,000 Combined Single Limit \$785 Underinsured Motorists \$1,000,000 Combined Single Limit \$785 Basic First Party Benefits \$1,169 Physical Damage \$1,179 \*Note: Your actual premium may vary due to driver quality, loss history, account risk characteristics, or other factors. Total Annual Premium\* \$19,493.00 Payment Plan Options Initial Due\* Est. Installment ‡ Pay in Full \$19,493 N/A 2 Payments \$10,137 \$9,356 4 Payments \$5,283 \$4,737 6 Payments \$3,899 \$3,119 11 Payments \$3,899 \$1,560 ‡ Rounded to next dollar. An additional \$8.00 fee per installment will apply unless enrolled in automatic electronic payments. Accepted payment types include bank account, credit or debit card. Anchor Medical Transport LLC #17832783 Page 1 of 2 Submission ID 17832783 Proposed Policy Period: Vehicle Information 1 03/20/2026 - 03/20/2027 2021 CHRYSLER PACIFICA Body Type: Wheelchair Equipped Van Liability Physical Damage Radius: Up to 50 miles Stated limit: \$22,000 Uninsured Underinsured Basic First Party Benefits Deductible: \$1,000/\$1,000 \$15,575 \$1,179 \$785 \$785 \$1,169 Vehicle Total: \$19,493 Driver Information # 1 First Name Andrew Anchor Medical Transport LLC #17832783 Last Name Bartley Date of Birth 06/17/1987 Page 2 of 2 Schedule of Forms & Endorsements Anchor

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Medical Transport LLC Quote #: 17832783 CA 0001 (10/2013) CA 0180 (09/1997) CA 2018 (10/2013) CA 2192 (06/2012) CA 2193 (06/2012) CA 2402 (10/2013) IL 0017 (11/1998) IL 0021 IL 0120 IL 0910 M 3795 (09/2008) (05/2011) (12/2003) (03/1987) M 3912b (08/2001) M 4095b (10/2008) M 4572 (12/1994) M 4803 (02/1998) M 4959a (03/2002) M 5178b (09/2009) M 5479 (04/2010) M 5603 M 5605 M 5623 M 5749 M 5872 (03/2017) (02/2011) (04/2011) (01/2013) (04/2016) R 1413e (08/1998) Business Auto Coverage Form Pennsylvania Changes Professional Services Not Covered Pennsylvania Uninsured Motorists Coverage - Nonstacked Pennsylvania Underinsured Motorists Coverage - Nonstacked Public Transportation Autos Common Policy Conditions Nuclear Energy Liability Exclusion Endorsement (Broad Form) Pennsylvania Changes - Defense Costs Pennsylvania Notice Punitive Damage Exclusion Duty to Defend Amendment Stated Amount Insurance Pennsylvania Fraud Notice Schedule of Forms and Endorsements at Policy Inception Abuse or Molestation Exclusion Schedule of Covered Autos Pennsylvania Changes - Cancellation and Nonrenewal Towing and Storing Costs Policy Jacket Business Auto Coverage Declarations Application of Policy - Financial Responsibility Underinsured Motorists Coverage Amendatory Endorsement Changes to Common Policy Conditions - Cancellation Pennsylvania Financial Responsibility Identification Car

Reply 5.

Anchor Medical Transport LLC is currently in the process of finalizing its financial structure and ensuring that all required assets, accounts, and documentation are fully compliant with Commission requirements.

At this time, the company is completing the capitalization of its business account and coordinating the acquisition of an ADA-compliant vehicle, both of which will be properly titled and documented under the LLC.

In order to ensure that the submitted Statement of Financial Position is accurate, complete, and fully supported by the required documentation, we respectfully request an extension to finalize these items.

Our goal is to provide a complete and compliant submission that clearly demonstrates the company's financial fitness and operational readiness.

We appreciate your consideration and will provide the requested materials promptly upon completion.

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