

Letter of Reference

Date: 04/17/2026

To Whom It May Concern:

As requested by the customer indicated below, this letter confirms the following account information at Citizens:

Account Title: PRIME PASSENGER TRANSPORT		
Account Open Date: 04/17/2026	Account Type: CLEARLY BUSINESS CHECKING	Customer Available Balance: \$15,000.00

Account Title:		
Account Open Date:	Account Type:	Customer Available Balance:

Account Title:		
Account Open Date:	Account Type:	Customer Available Balance:

Account Title:		
Account Open Date:	Account Type:	Customer Available Balance:

Customer's Signature: *REGINALD JONES*

This letter is intended merely to describe current account information and does not constitute a Citizens guarantee.

Sincerely,

Melissa L. Lamy

 Colleague Name
Branch Manager

 Colleague Title
 248 Market Street Philadelphia, Pa 19106

 Branch Location

Signature Guaranteed
 CITIZENS BANK, N.A.
Melissa L. Lamy
 Authorized Signature

I, **REGINALD JONES**, _____ 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).

Reginald Jones



04/24/2026

(All boxes are to be checked for response, Click to initiate check mark If N/A or discrepancies leave blank and fill in comments)

Employee/Driver: _____ Department Name: _____	Vehicle #: _____ Serial # _____	Date: ___/___/___ Time: ___:___ am <input type="checkbox"/> pm <input type="checkbox"/>
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Inspection reports to be performed daily. Keep reports in the vehicle, and turn in at end of month with your Monthly Vehicle Log, unless there is a new issue and/or one that requires immediate attention.

Mark **every** Box below. Leave blank If it requires Attention or is less than Ideal. Mark If it meets county standards!

<p><u>Walk Around Visual Inspection I:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Check for body damage (see column on right) <input type="checkbox"/> Check tire tread (4/32") <input type="checkbox"/> Check windows <input type="checkbox"/> Check mirrors <input type="checkbox"/> Check under vehicles for fluid leaks/irregularities <p><u>Under the Hood Inspection :</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Check oil (full, clean) <input type="checkbox"/> Air filter <input type="checkbox"/> Check transmission fluid <input type="checkbox"/> Leaks <input type="checkbox"/> Check coolant <input type="checkbox"/> Windshield wipers <input type="checkbox"/> Check belts <input type="checkbox"/> Washer Fluid <input type="checkbox"/> Check battery & cables <p><u>Interior Inspection:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Check seating (cleanliness, tears, stains) <input type="checkbox"/> Check seatbelts <input type="checkbox"/> Rearview Mirror <input type="checkbox"/> Check parking brake <input type="checkbox"/> Interior Lighting <input type="checkbox"/> Check horn (city & highway) <input type="checkbox"/> Gauges <input type="checkbox"/> Check first aid kit is onboard and full (if applicable) <input type="checkbox"/> Check fire extinguisher is onboard charged (if applicable) <p><u>Start Up Inspection:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Vehicle starts okay without sounds and/or Hesitation. <input type="checkbox"/> Check airbags (warning light should not be on) <input type="checkbox"/> Check steering wheel & column (not too much play) <input type="checkbox"/> Check lights and turn signals <input type="checkbox"/> Check brakes, lines & brake chamber (no leaks) <input type="checkbox"/> Adjust mirrors <p>Beginning Mileage: _____ Fuel level at Start* 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> full tank <input type="checkbox"/> *Borrowed vehicles must be returned with a full tank</p> <p>While operating the vehicle, always be aware of unusual smells, sounds, vibrations, or anything that does not seem right with the vehicle.</p> <p><u>Drivers Notes: (auto-adjust characters max 150:</u></p>	<p><u>Walk Around Visual Inspection II:</u></p> <p>Mark Damage by drawing directional lines with arrows indicating body damage. The Key can also be used to indicate damage on the illustrations below:</p> <p style="text-align: center;"><u>Key</u></p> <table style="width:100%; border: none;"> <tr> <td style="width:50%;">A- Scratch or Scrape</td> <td style="width:50%;">E- Loose</td> </tr> <tr> <td>B- Broken</td> <td>F- Flat</td> </tr> <tr> <td>C- Cracked</td> <td>G- Missing</td> </tr> <tr> <td>D- Dented</td> <td></td> </tr> </table> <p style="text-align: center;">Front of Vehicle</p> <div style="text-align: center;">  </div> <div style="text-align: center; margin-top: 20px;">  </div>	A- Scratch or Scrape	E- Loose	B- Broken	F- Flat	C- Cracked	G- Missing	D- Dented	
A- Scratch or Scrape	E- Loose								
B- Broken	F- Flat								
C- Cracked	G- Missing								
D- Dented									

DAILY PRE-OPERATION CHECKLIST: (BEFORE YOU PREFORM DAILY CHECKLIST)

NOTE: Park Vehicle on level ground, Shift Vehicle Transmission to PARK, and set the EMERGENCY BRAKE.

- Visually check lift for bent or broken parts or for Hydraulic fluid around base.
- Check for hydraulic fluid leaking from cylinder. Lift may be operated if cylinders are weeping a light thin Film of Hydraulic Fluid.
- Check that all DECALS are in place, undamaged and legible.
- Check that all Anti Slip and Safety Striping are in place.
- If the Lift is Dirty? CLEAN IT!
- Make sure the ON / OFF Switch on the pump cover is ON, IF the lift controller display and hand control Are Illuminated. LIFT HAS POWER TO OPERATE!

NOTE: If any of the pre checks have any incorrect indications-Do not operate until repairs are Performed by Qualified Technician.

OPERATIONAL CHECKLIST:

Operate the lift thru ONE full cycle and do the following checks:

- Uses lift Operating Instructions in the manual to **UNFOLD, LOWER, RAISE and FOLD PLATFORM.**
- Make sure lift responds properly to Switches on the hand pendant.
- Listen for unusual noises while the lift operates.
- Watch for uneven movements of the Lift Arms, Platform and Inboard and Outboard ROLLSTOPS.

NOTE: If any Operation Checks have incorrect Indications Discontinue Operating Lift until Repairs Have been made by a Qualified Technician.

Please list and defects below and immediately take bus out of service for repairs!

Auto-Font 500 characters max

Driver Signature: _____ Date: ___/___/___ Time: ____:____ am pm

Docket No. A-2026-3061533

Prime Passenger Transport LLC

Request for Information

The application requires the motor carrier to describe the service area proposed by this application. Your answer, "To transport wheelchair and or ambulatory clients between points in Philadelphia County", will both limit the services that you are able to provide; and as worded, will require 2 types of vehicles to operate. Please consider your statement and take the time to choose correct language. For assistance with this process, you can visit this link as a resource: [Passenger_Carrier_Territory_Examples-Explanations.pdf](#)

To clarify, the vehicle I would like to obtain and use for transportation would include two(2) spaces for wheelchair as well as a single or bench seat for other passengers, therefore I will be able to transport both wheelchair and ambulatory clients.

Your responses to Questions # 3,5,6,7,8 and 10 of the Verified Statements are either inadequate or incomplete. You are expected to provide complete answers to each question, and each sub-part of each question. Your answers are essential in determining your fitness to operate a business.

When asked to provide a description, you are expected to provide a DESCRIPTION which is fully responsive to each portion of the question.

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 requirement of 52 Pa code.

a) In reference to Question # 3, you are specifically asked to DESCRIBE your business experience, particularly any experience relating to the operation of a transportation service, and if practical experience is lacking, please provide an EXPLANATION and DESCRIPTION of any education or training that is relevant. What transportation business experience do you have? What

education or training in the transport of people do you have?

I have experience with the general public and in sales. I plan to take the EVOC(EMERGENCY VEHICLE OPERATOR COURSE) within a certified program in Pennsylvania and also an online training course for the day to day operations through the National Safety Council. I will also hire employees who are experienced in the field through online platforms such as Indeed.

b) In reference to Question # 5, 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:

- § 29.504. Driver history (schedule and record retention)
- § 29.505. Criminal history (schedule and record retention)
- § 29.506 and § 29.507 Alcohol/Drug prohibition (policy and testing standards)
- How often will you conduct criminal background checks?
- Please describe your driver training program. Are there training guides or instructions/manuals for the driver(s)?

Criminal History Check

Prime Passenger Transport requires that all new employees undergo certain criminal and other background checks as a condition of employment. PPT conducts a criminal background check on all applicants including drivers, office staff, agency management staff and administrators. Criminal history checks, and process shall be in compliance with Older Adult Protective Services Act. Prior to hiring or permitting a person to act as a driver, we shall obtain a criminal history check.

Administrative Director or designee shall request a criminal background check in compliance with the following:

1. Conduct or have a third party conduct a local and national criminal background check for each driver applicant. The background check shall include a multistate or multijurisdictional criminal records locator or other similar commercial nationwide database with primary source search validation and a review of the United States Department of Justice National Sex Offender Public Website.

PPT shall disqualify an applicant convicted of certain crimes in accordance with the following:

- An applicant convicted of any of the following within the preceding seven years:

- o Driving under the influence of drugs or alcohol.

- o A felony conviction involving theft.

- o A felony conviction for fraud.

- o A felony conviction for a violation of the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act.

- An applicant convicted of any of the following within the preceding 10 years:

- o Use of a motor vehicle to commit a felony.

- o Burglary or robbery.

- An applicant convicted of any of the following at any time:

- o A sexual offense under 42 Pa.C.S. § 9799.14(c) or (d) (relating to sexual offenses and tier system) or a similar offense under the laws of another jurisdiction or under a former law of this Commonwealth.

- o A crime of violence as defined in 18 Pa.C.S. § 5702 (relating to definitions).

- o An act of terror.

2. Prime Passenger Transport shall obtain and review a driving history research report for the person from the Department of Transportation and other

relevant sources. A person with more than three moving violations in the three year period prior to the check or a major violation in the three-year period prior to the check may not be Prime Passenger Transport driver. Driver may not have their driving privileges suspended or revoked. Not Disqualified to drive a commercial motor vehicle.

Prime Passenger Transport shall ascertain that all the requirements of this section are met before permitting a person to provide service as a driver.

The Administrative Director or designee will send the job applicant a letter to rescind the offer if the criminal history record reveals a prohibited conviction.

Prime Passenger Transport shall maintain files for drivers and members of the office staff which include copies of State Police criminal history records or Department of Aging letters of determination regarding Federal criminal history records. The files shall be available for Department of Health, Public Utility Commission, other regulatory bodies or contractual oversight.

Prime Passenger Transport shall maintain copies of criminal history report for the owner, which shall be available for Department of Health inspection.

Prime Passenger Transport shall keep the information obtained from the Pennsylvania State Police criminal history records, Federal Bureau of Investigation and Department of Aging letters of determination regarding Federal criminal history records confidential in compliance with 055 Pa. Code § 52.15. Provider Record. The criminal background check obtained shall be used solely to determine an applicant's eligibility to be hired, rostered, or retained. All employee files shall be kept in a locked cabinet and only accessible to staff as needed to be able to complete their job functions.

D. EMPLOYEE SCREENING FOR EXCLUSION POLICY (LEIE, EPLS & MEDICHECK)

During the hiring process, the Human Resources manager or designee will screen all employees and contractors on the LEIE, EPLS, and DHS's Medi-check list to determine if they have been excluded from participation in Medicare, Medicaid or any other federal health care program. The screening will occur both before employing or contracting with them, and then monthly once they have been hired. The Manager will screen all employees, vendors, contractors, service providers, and referral sources whose functions are necessary for providing items and services to MA recipients and who are involved in generating a claim to bill for services or are paid by Medicaid. This includes individuals whose salaries are on a cost report submitted to the Department. The screening will be documented on the LEIE, EPLS and Mediceck Screening Form. Claims that have submitted for a staff or person who was found to be on an exclusion list will be voided by the agency. Services that have been rendered and not billed for yet, for a staff person who was found to be on an exclusion list will not be submitted for a claim. The agency will terminate contracts with the staff/contractor who was found to be on an exclusion list.

Examples of individuals or entities that must be screened for exclusion include, but are not limited to:

1. Individual or entity that provides a service for which a claim is submitted to Medicaid;
2. Individual or entity that causes a claim to be generated to Medicaid;
3. Individual or entity whose income derives all, or in part, directly or indirectly, from Medicaid funds;
4. Independent contractors if they are billing for Medicaid services;
5. Referral sources, such as providers who send a Medicaid recipient to another provider for additional services or second opinion related to medical condition.
6. Directors, billing agents, accountants, claims processors and other staff who

perform services that is related to and paid, directly or indirectly, by a Medicaid program;

7. Pharmacists or other individuals who input prescription information for pharmacy billing or who are involved in filling prescriptions for drugs paid (in)directly by a Medicaid program;

8. Manufacturers or suppliers who sell items or equipment used in the care or treatment of recipients and paid (in) directly by a Medicaid program.

In accordance with DPW requirements, the exclusion check must be completed against at least three different databases:

- The List of Excluded Individuals/Entities (LEIE):

<http://oig.hhs.gov/fraud/exclusions.asp>

- The Pennsylvania Mediceck List:

<http://www.dpw.state.pa.us/learnaboutdpw/>

[fraudandabuse/medicheckprecludedproviderslist/S_001152,](http://www.dpw.state.pa.us/fraudandabuse/medicheckprecludedproviderslist/S_001152)

On a monthly basis, The Human Resources manager or designee will check the EIE, EPLS, and DHS's Medi-check list for all employees and contractors to determine if they have been excluded from participation in Medicare, Medicaid or any other federal health care program.

The Manager will audit the LEIE, EPLS and Mediceck Screening Form monthly to ensure compliance and document the audit on the LEIE, EPLS and Mediceck Screening Form.

The Manager will organize the documents and share the specific results with the Administrative Director monthly. The screening results will also be shared with the program's managers after each screening.

The Administrative Director or designee will conduct self-audits to determine compliance with this requirement twice yearly.

If an exclusion of an employee or contractor is discovered, it must be reported immediately to the Bureau of Program Integrity. Communication may be via e-mail through the MA Provider Compliance form or by mail or fax.

Bureau of Program Integrity Commonwealth of Pennsylvania P.O. Box 2675
Harrisburg, PA 17105-2675 Fax: 1-717-772-4655 or 1-717-772-4638

E. Social Security Number Verification:

(1) The hiring of new employees is completed at first day of report.

staff verifies the employee Social Security Number on the Official Social Security Website to ascertain the SSN is real and belongs to the individual.

(2) Proof of verification will be filed in the employees personnel file.

(3) HR staff completes other employee identify verification in compliance with the Department of Homeland Security; US Immigration Service Form I-9, Employee Eligibility Verification.

(4) Social Security Number and other identify information verified shall kept confidential in compliance with 055 Pa. Code § 52.15. Provider Record.

DRIVER TRAINING

Purpose:

Drivers hired by this company to operate a motor vehicle will have the basic skills and credentials necessary to perform this function as confirmed through the driver selection process.

Policy:

All drivers employed will complete the driver training prior to driving any company vehicle

Procedure:

New employees, contractor, and temporary hires will receive a copy of this program as part of their initial orientation. A formal orientation program is established to help assure all drivers are presented with this policy, understand their responsibilities, and are familiarized with their vehicles. Areas that must be addressed with the driver include:

a. Defensive Driving

b. Passenger Assistance Training

c. Customer Service Training

d. Sensitivity Training

e. First Aid and CPR if mandated Understand, review, and be given a copy of the Standard Operating Manual.

f. Understand and sign the Vehicle Assignment Agreement.

g. Review individual Motor Vehicle Report (MVR).

h. Understand accident reporting and emergency procedures.

i. Transportation of blind or deaf persons with dog guides

j. Driver cell use phone policy

k. Review operation and controls of vehicle being assigned.

l. Inspect vehicle using Vehicle Inspection Form.

Safe Driving Policy

Policy:

The purpose of this policy is to ensure the safety of those individuals who drive company vehicles and to provide guidance on the proper use of company fleet vehicles. Vehicle accidents

are costly to our company, but more importantly, they may result in injury to you or others. It is

the driver's responsibility to operate the vehicle in a safe manner and to drive defensively to prevent injuries and property damage. As such, Integrated Medical Transport endorses all applicable state motor vehicle regulations relating to driver responsibility. The employer expects each driver to drive in a safe and courteous manner pursuant to the following safety

rules. The attitude you take when behind the wheel is the single most important factor in driving safely.

Compliance:

Employees must have a valid and current Driver's license to operate a company vehicle, or a personal vehicle with current auto insurance while on company business.

Employees are expected to drive in a safe and responsible manner and to maintain a good driving record.

Driver Guidelines and Reporting Requirements

1. Company vehicles are to be driven by authorized employees only, except in case of repair testing by a mechanic.
2. Any employee who has a driver's license revoked or suspended shall immediately notify their Operations Manager by 9 a.m. eastern time the next business day, and immediately discontinue operation of the company vehicle. Failure to do so may result in disciplinary action, including termination of employment.
3. All accidents in company vehicles, regardless of severity, must be reported to the police and to dispatch. Accidents are to be reported immediately (from the scene, during the same day, or as soon as practicable if immediate or same day reporting is not possible). Accidents in personal vehicles while on company business* must follow these same accident procedures. Accidents involving the employee's personal injury must be reported to Human Resources for Worker's Compensation purposes. Failing to stop after an accident and/or failure to report an accident may result in disciplinary action, up to and including termination of employment.
4. Drivers must report all ticket violations received during the operation of a company vehicle, or while driving a personal vehicle on company business*, within 72 hours to their Operations Manager. Failure to report a ticket violation may result in disciplinary action, up to and including termination of employment.
5. Motor Vehicle Records will be obtained on all drivers prior to employment and no less than every twelve months. A driving record that fails to meet the criteria stated in this policy, or is considered to be in violation of the intent of this policy by the Operations Director will result in a loss of the privilege of driving a company vehicle.

* Company business is defined as driving at the direction, or for the benefit, of employer. It does not include normal commuting to and from work.

Process:

Driver Safety Rules

1. Driving on company business and/or driving a company vehicle while under the influence of intoxicants and other drugs (which could impair driving ability) is forbidden and is sufficient cause for discipline, up to and including termination of employment.
2. Cell phone use while driving should be kept to a minimum. Drivers need to be aware when use of the cell phone is creating a distraction from safe driving and adjust their usage

accordingly, including pulling off the road to continue/finish the conversation if needed.

Whenever possible, Drivers should complete calls while the vehicle is parked and/or use the phone in a “hands free” mode via a headset or speaker. While driving, attention to the road and safety should always take precedence over conducting business over the phone.

3. No driver shall operate a company vehicle when his/her ability to do so safely has been impaired by illness, fatigue, injury, or prescription medication.

4. All drivers and passengers operating or riding in a company vehicle must wear seat belts, even if air bags are available.

5. No unauthorized personnel are allowed to ride in company vehicles.

6. Drivers are responsible for the security of company vehicles assigned to them. The vehicle

engine must be shut off, ignition keys removed, and vehicle doors locked whenever the vehicle is left unattended.

7. Head lights shall be used 2 hours before sunset and until 2 hours after sunrise, or during inclement weather or at any time when a distance of 500 feet ahead of the vehicle cannot be clearly seen.

8. All State and Local laws must be obeyed.

Defensive Driving Guidelines

■ Drivers are required to maintain a safe following distance at all times. Drivers should keep a two second interval between their vehicle and the vehicle immediately ahead. During slippery road conditions, the following distance should be increased to at least four seconds.

■ Drivers must yield the right of way at all traffic control signals and signs requiring them to do so. Drivers should also be prepared to yield for safety's sake at any time. Pedestrians and bicycles in the roadway always have the right of way.

■ Drivers must honor posted speed limits. In adverse driving conditions, reduce speed to a safe operating speed that is consistent with the conditions of the road, weather, lighting, and volume of traffic. Tires can hydroplane on wet pavement at speeds as low as 40 mph.

- Radar Detectors are strictly prohibited in company Vehicles. Drivers are to drive at the speed of traffic but never to exceed the posted speed limit.
- Turn signals must be used to show where you are heading; while going into traffic and before every turn or lane change.
- When passing or changing lanes, view the entire vehicle in your rear-view mirror before pulling back into that lane.
- Be alert of other vehicles, pedestrians, and bicyclists when approaching intersections. Never speed through an intersection on a caution light. When the traffic light turns green, look both ways for oncoming traffic before proceeding.
- When waiting to make left turns, keep your wheels facing straight ahead. If rear ended, you will not be pushed into the lane of oncoming traffic.
- When stopping behind another vehicle, leave enough space so you can see the rear wheels of the car in front. This allows room to go around the vehicle if necessary, and may prevent you from being pushed into the car in front of you if you are rear-ended.
- Avoid backing where possible, but when necessary, keep the distance traveled to a minimum and be particularly careful.

*Check behind your vehicle before backing.

*Back to the drivers side. Do not back around a corner or into an area of no visibility.

Accident Procedures

1. In an attempt to minimize the results of an accident, the driver must prevent further damages or injuries and obtain all pertinent information and report it accurately.

- Call for medical aid if necessary.
- Call the police. All accidents, regardless of severity, must be reported to the police. If the driver cannot get to a phone, he should write a note giving location to a reliable appearing motorist and ask him to notify the police.
- Record names and addresses of driver, witnesses, and occupants of the other vehicles and any medical personnel who may arrive at the scene.

■ Complete the form located in the Vehicle Accident Packet. Pertinent information to obtain includes: license number of other drivers; insurance company names and policy numbers of other vehicles; make, model, and year of other vehicles; date and time of accident; and overall road and weather conditions.

2. Do not discuss the accident with anyone at the scene except the police. Do not accept any responsibility for the accident. Don't argue with anyone.

3. Provide the other party with your name, address, drivers license number, and insurance information.

4. Immediately report the accident to Integrated Medical Transport Dispatch or an Operations Manager. Provide a copy of the accident report and/or your written description of the accident to your Operations Manager ASAP.

5. There will be a formal accident review conducted on each accident to determine cause and how the accident could have been prevented.

The administrative Director or designee will ensure a copy of the completed orientation is maintained in the driver's employment file. All records will be maintain electronically as well as in a locked file cabinet to ensure to be in compliance with state regulations and be available for inspection at any time.

DRUG AND ALCOHOL POLICY

Drug and alcohol screenings will be performed via Labcorp

How often? PRIOR TO HIRE, AFTER AN ACCIDENT, ALSO RANDOM DRUG TESTS IF DEEMED NECESSARY.

ii. Any consequences for a failed test? TERMINATION OF EMPLOYMENT; WE DO NOT PROVIDE AFTERCARE

The unlawful use, possession, purchase, sale, distribution, or being under the influence of an illegal drug and/or the misuse of legal drugs while on company or client premises or while performing services for the company is strictly prohibited. Integrated Medical Transport also prohibits reporting to work or performing services while impaired by the use of alcohol or consuming alcohol while on duty or during work hours.

To ensure compliance with this policy, substance abuse screening may be conducted in the following situations:

Pre-employment: As required by the company for all prospective employees who receive a conditional offer of employment

For Cause: Upon reasonable suspicion that the employee is under the influence of alcohol or drugs that could affect or has adversely affected the employee's job performance

Random: As authorized or required by federal or state law

Compliance with this policy is a condition of employment. Employees who test positive or who refuse to submit to substance abuse screening will be subject to termination.

Notwithstanding any provision herein, this policy will be enforced at all times in accordance with applicable state and local law.

Any employee violating this policy is subject to discipline, up to and including termination, for the first offense.

c) In reference to Question # 6, your answer states that you are "working with someone to obtain vehicles". Who are you working with? How many vehicles are you going to obtain? What type of vehicles are they? What is the projected cost of these vehicles? Please provide DETAILED answers.

There is no particular individual to list as I am familiar with online auctions and being able to purchase vehicles through their platforms. Also, various online searches can assist me as well. I am looking at Ford Transits as well as single Caravans. My budget is around \$30,000 as I would like to obtain two(2) vehicles.

d) Question # 7 requests a description of your vehicle safety program. Please provide additional details. For example, a pre/post checklist for the driver.

Also, what are your vehicle inspection criteria to deem a vehicle inoperable and the procedure for a back up plan if any vehicle happens to become inoperable?

If a vehicle is inoperable, I will have a backup vehicle ready.

The employee responsible for the vehicle will inspect the vehicle semi-annually using the Vehicle Inspection Report form provided in this packet and forward the report to the Vehicle Safety Coordinator. More frequent inspections and reports may be required based on heavy use. Vehicle Maintenance: Vehicle maintenance can take the form of three distinct programs: preventive maintenance, demand maintenance, and crisis maintenance. While all three types have their role in ensuring passenger safety and vehicle longevity, the most cost-effective control is preventive maintenance. The groundwork for a good preventive maintenance program shall start with management. A review of manufacturers' specifications and recommendations for periodic preventive maintenance shall be coordinated by the Vehicle Safety Coordinator.

1. Preventive maintenance (PM) shall be performed on a mileage or time basis. Typical PM shall include oil/filter changes, lubrication, tightening belts and components, engine tune-ups, brake work, tire rotation, hose inspection/replacement, and radiator maintenance.

2. Demand maintenance shall be performed only when the need arises. Some vehicle parts are replaced only when they actually fail.

3. These include light bulbs window glass, gauges, wiring, air lines, etc. Other "demand maintenance" items involve vehicle components that are worn based on information from the vehicle condition report. These include tires, engines, transmissions, universal joints, bushings, batteries, etc. Since these situations are identified through periodic vehicle inspection, they can be classified within the PM program. The Vehicle Safety Coordinator shall be responsible for demand maintenance. Records of all demand maintenance for each vehicle shall be maintained.

4. Crisis maintenance involves a vehicle breakdown while on the road. While situations of this type may happen regardless of the quality of the PM program, it is an expensive alternative to not having an effective preventive maintenance program at all. Crisis maintenance situations should be minimized through proper PM procedures. In the event of a crisis maintenance, the Vehicle Safety Coordinator shall be responsible for the immediate coordination of all repairs. Records of all crisis maintenance shall be maintained for each vehicle by the Vehicle Safety Coordinator.

5. Recordkeeping: This company's vehicle selection, inspection, and maintenance program is only as good as its recordkeeping procedures. The Vehicle Safety Coordinator shall maintain records of each vehicle including vehicle list, make, model, VIN, tire size, inspection, repair and maintenance dates to include all preventive maintenance, demand maintenance and crisis maintenance. Employees will forward all vehicle maintenance, records for maintenance performed each quarter to the Vehicle Safety Coordinator.

This system will ensure my vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa Code, Chapter 175)

e) Question # 8 requests that you explain steps taken to determine if you can obtain insurance and pay the required premium, to which your response was “I am very familiar with NREMT commercial insurance quotes and have a licensed and insured agent ready to insure my vehicle upon purchase. I will be able to finance my premium monthly and be able to insure thru cardigan, nationality liability, or PA assigned risk”. What is your projected annual cost for commercial paratransit coverage? Have you verified that the policy would support the filing of the required Form E with the Commission? It is not possible to determine your financial fitness without being able to fully consider your operating costs, such as insurance premiums.

I have a licensed agent in the Philadelphia area who will be able to quote me a projected premium as well as proper insurance and the ability to file a Form E to be in compliance.

You mention “Medicare, Medicaid, or any other federal health plan program”, do you plan to participate in the ODP waiver program? If so, how much of your transportation will end up going through that program? Are there brokers involved? How will you advertise and get customers?

No we do participate with ODP; We would like to advertise in our local community and be able to obtain contracts within but this will also be for the general public as well.