

Application for Motor Common Carrier of Persons in Limousine Service

This application is required to operate as a common carrier of persons in luxury vehicles seating no more than 10 when providing transportation between points in Pennsylvania. Applicants providing service between points in the city and county of Philadelphia or from any airport, railroad station or hotel located in whole or in part in Philadelphia, must apply to the Philadelphia Parking Authority. Contact PPA at (215) 683-9434 or the website at www.philapark.org

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

Elite Luxury Chauffeur Services, 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)

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 Limo Service" 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 Limo Service" or "J. Doe Limo Service" 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 15549189

(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).**

TAREK AHMED _____

6. **Mailing Address**

1913 BLEIGH AVE, FL 1
Street Address

PHILADELPHIA, PA 19111-3815
City, State and Zip Code County

929-393-3462
Telephone Number E-mail Address
Eliteluxurychauffeur@yahoo.com

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 from Mailing Address. Do not use a PO Box)

Street Address

City, State and Zip Code

Telephone Number E-mail Address

The address entered here should be 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 **MAILING ADDRESS** is the same as the **PHYSICAL 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 people as a limousine service between points in the Commonwealth of PA

Examples:

- *To transport people from points in Berks County to points in PA, and return.*
- *To transport people between points in the counties of Chester, Delaware, and Montgomery.*

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 limousine 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.

TAREK AHMED	M.M.
(Print Name)	(Position)
	06/15/2026
(Signature)	(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.

Elite Luxury Chauffeur Services, LLC

Legal Name of Applicant

Trade Name, if any

1913 Bleigh Ave Fl 1

Street Address (principal place of business)

Philadelphia,

City or Municipality

PA

State

19111

Zip Code

The Verified Statement of the Applicant is more or less a business plan, or your proposal for providing the transportation service for which you are making application. Prior to deciding to make application for operating authority from the Public Utility Commission, you likely gave much consideration to the manner in which you would operate the business in order that you could provide satisfactory service to your customers and so that you could make a reasonable profit. As part of the application process, you must provide the Commission with your proposal to provide the transportation service.

At minimum, the Verified Statement of the Applicant should include a discussion of the numbered items listed below and on the following pages. You are encouraged to provide as much information as possible about the particular subject as is necessary to fully explain your plan. If you fail to provide sufficient information about the subjects listed below, it may cause the review of your application to be delayed until you provide the necessary information. If you need more space to provide your explanation, please attach additional pages that list the appropriate item by number.

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.

Tarek Ahmed, Managing Member
1913 Bleigh Ave FL 1 Philadelphia, PA 19111
929-393-3462

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

Applicant does not have any other affiliation with any other carrier

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.

PLEASE SEE THE ATTACHED

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.

PLEASE SEE THE ATTACHED

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.

PLEASE SEE THE ATTACHED

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. (Vehicles in limousine service may not be used if the vehicle mileage is greater than 350,000.)

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY*</u>	<u>VEHICLE ID #</u>	<u>MILEAGE</u>
2024	Chevrolet	Suburban	7	1GNSKEKD4RR399785	75,026

*Vehicles with seating capacity of more than ten passengers cannot be used for limousine service.

3.) The applicant has over 7 years of chauffeur experience, primarily serving Uber Black clients.

From 2023 to 2025, the applicant gained limousine fleet management experience while working with Top Star NYC Limo, where responsibilities included fleet maintenance and safety inspections, scheduling and trip coordination, incident reporting, and client relations.

The applicant also worked with Northstar Limo from 2025 to 2026, where duties included managing driver onboarding, reviewing background checks, and conducting performance evaluations.

4.) Business location: 1913 Bleigh Ave, Floor 1, Philadelphia, PA 19111. The office space is approximately 600 sq. ft. and contains a fire-safe, laptop, printer, desk, and a locking filing cabinet. All certificates, licenses, insurance policies, driver information, vehicle information, and all other records related to drivers and vehicles will be securely stored in this cabinet.

New customers will be obtained through dispatching platforms, referrals, and colleagues in the same industry.

This location will also serve as the garaging location for the company's vehicles.

Daily vehicle inspections will be completed by the driver and properly documented.

Continuous communication will be maintained through cell phones and GPS tracking

5a.) Must have a valid PA driver's license, clean motor vehicle record, and 3 prior years' experience as a chauffeur, no one younger than 25 years old, drivers older than 63 must have doctor's physical completed

5b.) Criminal background checks will be obtained through epatch.pa.gov. Each employee prior to hire will have their criminal background pulled and evaluated

5c.) Training will cover safe driving habits, customer services, what to do in the event of an accident, how to handle difficult customers, and road test

5d.) Driver's license check will be obtained through PennDot website, prior employment will be confirmed by contacting previous employer or Uber/Lyft profile must be submitted, Uber/Lyft profile must show ratings, how many trips completed and start date

5e.) There is a zero tolerance for drug and alcohol, testing will be done pre hire and random testing will be done

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).
 - c. Your system for ensuring that vehicles which no longer meet vehicle mileage requirement shall be replaced in a timely fashion.

Please see the attached.

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

Quote has been obtain through First Chicago Insurance Company, waiting for PA PUC approval to proceed with coverage

9. State whether the applicant has been convicted of a misdemeanor or felony. If applicant is partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

_____ YES X NO

10. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.



(Signature)

TAREK AHMED M.M.

(Name and Title, printed or typed)

06/15/2026

(Date)

7a.) Maintenance Plan: The vehicle undergoes routine every 5k miles, including oil changes, brakes checks, tie rotation, and fluid top-offs.

All service records will be kept on file

7b.) Will ensure all vehicles meet Pennsylvania safety and inspection standards

(67 pa. Code, Chapter 175) through annual state inspections and daily safety checks completed by driver. Driver must also document the vehicle check when complete.

7c.) Any vehicle exceeding 350,000 miles or failing inspections will be immediately replaced with an upgraded vehicle to ensure vehicle complies and to maintain quality service.

Statement of Financial Position (Balance Sheet)
As of (date) 06/15/2026
(Must be less than 6 months old)

ASSETS

Current Assets		
Cash	10,000	
Other Current Assets (specify)		
Total Current Assets		10,000
Tangible Assets		
Motor Vehicle Equipment	22,000	
Property (buildings, land, etc.)		
Office Equipment		
TOTAL ASSETS		32,000

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	0	
Credit cards/revolving credit		
Other Liabilities (Attach schedule)		
Total Current Liabilities		0
Long Term Liabilities (Due after one year of date)		
Mortgage	0	
Long term commercial loan		
Other Liabilities (Attach Schedule)		
Total Long-Term Liabilities		0
TOTAL LIABILITIES		



Deposit Account Balance Summary

06/15/2026

Requestor information:

ELITE LUXURY CHAUFFEUR SERVICES LLC

1913 BLEIGH AVE FL 1
PHILADELPHIA, PA 19111-3815

JPMorgan Chase Bank, N.A.
Northeast Philadelphia
2500 Welsh Rd
PA1-0796
Philadelphia, PA 19152

Summary of Deposit Account				
Account Number	Account Type	Open Date	Current Balance	Avg Balance (12 mos)
	Chase Business Complete Checking	06/10/2026	\$10,000.00	\$0.00
Customer Information				
ELITE LUXURY CHAUFFEUR SERVICES LLC		Sole Owner		
TAREK AHMED		Signer		

Deposit Account Balance Summary request completed by:

MIKITA SEMCHANKA
(614) 248-5800
Northeast Philadelphia

PLEASE NOTE THAT THE INFORMATION PROVIDED IN THIS LETTER WILL BE THE ONLY INFORMATION RELEASED BY JPMorgan Chase, N.A.

This letter is written as a matter of business courtesy, without prejudice, and is intended for the confidential use of the addressee only. No consideration has been paid or received for the issuance of this letter. The sources and contents of this letter are not to be divulged and no responsibility is to attach to this bank or any of its officers, employees or agents by the issuance or contents of the letter which is provided in good faith and in reliance upon the assurances of confidentiality provided to this bank. Information and expressions of opinion of any type contained herein are obtained from the records of this bank or other sources deemed reliable, without independent investigation, but such information and expressions are subject to change without notice and no representation or warranty as to the accuracy of such information or the reliability of the sources is made or implied or vouched in any way. This letter is not to be reproduced, used in any advertisement or in any way whatsoever except as represented to this bank. This bank does not undertake to notify of any changes in the information contained in this letter. Any reliance is at the sole risk of the addressee.

Pennsylvania State Police

1800 Elmerton Avenue
Harrisburg, Pennsylvania 17110

Response for Criminal Record Check

TAREK AHMED
1913 BLEIGH AVE FLI
PHILADELPHIA PA 19111

TELEPHONE (215) 624-7100

TO WHOM IT MAY CONCERN:

THE PENNSYLVANIA STATE POLICE DOES HEREBY CERTIFY THAT:

Name: Ahmed, Tarek
Date of Birth: 06/15/1984
Social Security #:
Sex: M
Race: White
Date of Request: 06/15/2026
03:31 PM
Purpose of Request: Employment

**Maiden Name
and/or Alias (1)
(2)**

**(3)
(4)
(5)**

*** REQUEST STILL PENDING FOR CONTROL #R35264874 ***

THE RESPONSE IS BASED ON A COMPARISON OF DATA PROVIDED BY THE REQUESTOR AGAINST INFORMATION CONTAINED IN THE FILES OF THE PENNSYLVANIA STATE POLICE CENTRAL REPOSITORY ONLY. PLEASE CONFIRM IDENTIFIERS PROVIDED. POSITIVE IDENTIFICATION CANNOT BE MADE WITHOUT FINGERPRINTS THE PENNSYLVANIA STATE POLICE RESPONSE DOES NOT PRECLUDE THE EXISTENCE OF CRIMINAL RECORDS, WHICH MIGHT BE CONTAINED IN THE REPOSITORIES OF OTHER LOCAL, STATE, OR FEDERAL CRIMINAL JUSTICE AGENCIES. THE INFORMATION ON THIS CERTIFICATION FORM CAN BE VALIDATED BY ACCESSING THE PENNSYLVANIA ACCESS TO CRIMINAL HISTORY (PATCH) RECORD CHECK STATUS SCREEN (<https://epatch.pa.gov/RcStatusSearch>) AND SUBMITTING A STATUS CHECK REQUEST THAT CONTAINS THE FOLLOWING - SUBJECT'S NAME (EXACTLY AS INITIALLY ENTERED), CONTROL NUMBER AND DATE OF REQUEST. PATCH WILL FIND AND DISPLAY THE CORRESPONDING RECORD CHECK REQUEST. DETAILS ON THE REQUEST CAN BE VIEWED BY CLICKING ON THE CONTROL NUMBER. YOU WILL BE ABLE TO VERIFY IF THIS REQUEST WAS SENT OUT AS A NO RECORD OR RECORD RESPONSE BY THE PENNSYLVANIA STATE POLICE.

QUESTIONS CONCERNING THIS CRIMINAL RECORD CHECK SHOULD BE DIRECTED TO THE PATCH HELP LINE TOLL FREE AT 1-888-QUERY-PA (1-888-783-7972).

Certified by:

DISSEMINATED ON:



Lt. Danae L Durham

Director, Criminal Records and Identification
Division
Pennsylvania State Police



pennsylvania

DEPARTMENT OF TRANSPORTATION

**PENNSYLVANIA DEPARTMENT OF TRANSPORTATION
BUREAU OF DRIVER LICENSING**

3-YEAR DRIVER'S HISTORY

JUN 15 2026

FULL LEGAL NAME:

TAREK AHMED

EXPANDED NAME:

TAREK

AHMED

1913 BLEIGH AVE FL 1ST

PHILADELPHIA , PA 19111

DRIVER'S LICENSE NO:

REAL ID:

NONE

TRUNC: N

TRANSLIT: N

TRUNC:

TRANSLIT:

TRUNC: N

TRANSLIT: N

DATE OF BIRTH:

JUN 15 1984

SEX:

MALE

RECORD TYPE:

REG LICENSE

VETERAN STATUS:

NOT DECLARED

DRIVER LICENSE (DL)

LICENSE CLASS:

C

LICENSE ISSUE DATE:

MAY 29 2024

LICENSE EXPIRES:

JUN 16 2028

ORIG ISSUE DATE:

MED RESTRICTIONS:

NONE

LEARNER PERMITS:

LICENSE STATUS:

VALID

CDL MED SELF CERT:

COMMERCIAL DRIVER LICENSE (CDL)

CDL LICENSE CLASS:

CDL LICENSE ISSUED:

CDL LICENSE EXPIRES:

CDL ENDORSEMENTS:

NONE

CDL RESTRICTIONS:

NONE

CDL LEARNER PERMITS:

CDL LICENSE STATUS:

VALID

CDL LIC DOWNGRADED:

SB ENDORSEMENT:

OCCUPATIONAL LIMITED LICENSE (OLL)

OLL LICENSE CLASS:

OLL LICENSE ISSUED:

OLL LICENSE EXPIRES:

OLL LICENSE STATUS:

PROBATIONARY LICENSE (PL)

PL LICENSE CLASS:

PL LICENSE ORIG ISS:

PL LICENSE ISSUED:

PL LICENSE EXPIRES:

PL LICENSE STATUS:

INTERLOCK LIMITED LICENSE (IILL)

IILL LICENSE CLASS:

IILL LICENSE ISSUED:

IILL LICENSE EXPIRES:

IILL LICENSE STATUS:

MEDICAL EXAMINER (ME)

ME NAME:

ME TELEPHONE:

MEDICAL CERTIFICATE (MC)

MC STATUS:

MC RESTRICTIONS:

LICENSE NUMBER:

PAGE: 2

MC EXPIRES:

ME LICENSE NO:

ME SPECIALITY CODE:

ME LICENSING

JURISDICTION CODE:

SKILL PERFORMANCE EVALUATION (SPE)

WAIVER/EXEMPT (W/E)

SPE EFFECTIVE:

W/E EFFECTIVE:

SPE EXPIRES:

W/E EXPIRES:

REPORT OF VIOLATIONS AND DEPARTMENTAL ACTIONS

NO VIOLATIONS OR DEPARTMENTAL ACTIONS DURING THIS REPORTING PERIOD

REPORT OF MEDICALS AND DEPARTMENTAL ACTIONS

NO MEDICALS OR DEPARTMENTAL ACTIONS DURING THIS REPORTING PERIOD

REPORT OF ACCIDENTS AND DEPARTMENTAL ACTIONS

NO ACCIDENTS DURING THIS REPORTING PERIOD

END OF RECORD

WID#: 261662650010746-001

PROCESSED: 06/15/2026