

Secretary
Pennsylvania Public Utility Commission
400 North Street, Second Floor
Harrisburg, PA 17120
717.787.3834
www.puc.pa.gov

Application for Motor Common Carrier of Persons in Group and Party Service of 16 or More Passengers, including the Driver

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE WHEN PROVIDING TRANSPORTATION EXCLUSIVELY USING VEHICLES WITH A SEATING CAPACITY OF 16 OR MORE PASSENGERS, INCLUDING THE DRIVER.

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

Golden Green Alternative Oil 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)

Greenway Shuttles

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 Trucking" 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 Trucking" or "J. Doe Trucking" 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 13928500
13972714

(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).**

Cory Secuton
Douglas Dickherber

6. **Mailing Address**

3509 Post Valley Dr.
Street Address
O'Fallon Mo 63368 St. Charles
City, State and Zip Code County
314-422-2020 ggaoil@yahoo.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.)

3509 Post Valley Dr.
Street Address
O'Fallon Mo 63368 St. Charles
City, State and Zip Code County
314-422-2020 ggaoil@yahoo.com
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)

Lewis Rice 314-444-7600
Attorney's Name & Telephone Number for this Filing
600 Washington Ave. Suite 2500 St. Louis Mo. 63101
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. 1902526