233902

STATE OF SOUTH CAROLINA

(Caption of Case)
Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET NUMBER: 2011-492-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Charles Willis DBA CW TRANSIT
Address: 4291 Granada DR
Sumter, SC 29154
Telephone: 301-237-3657
Fax: 803-795-4806
Other:
Email: cw.transit@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- [ ] Application – Class C Taxi
- [ ] Application – Class C Charter
- [ ] Application – Class C Charter Bus
- [x] Application – Class C Non-Emergency
- [ ] Application – Class E Household Goods
- [ ] Application – Class E Hazardous Waste
- [ ] Application
- [ ] Request for Extension to Comply with Order
- [ ] Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded
- [ ] Request for Cancellation of Certificate
- [ ] Request for Suspension
- [ ] Request for Reinstatement
- [ ] Request for Name Change on Certificate
- [ ] Request to Amend Scope of Authority
- [ ] Request to Amend Tariff (rate increase, etc.)
- [ ] Request to Amend Passenger Limit
- [ ] Request
- [ ] Exhibit
- [ ] Late-Filed Exhibit
- [ ] Letter
- [ ] Proposed Order
- [ ] Publisher's Affidavit
- [ ] Reservation Letter
- [ ] Response
- [ ] Return to Petition
- [ ] Other: _____

JPS

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY

Date: 11/28/11

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Charles Willis DBA CW Transit

4291 Granada Dr. Sumter SC 29154
Street Address of Applicant

Mailing Address of Applicant (if different from street address)

803-795-4806
Phone

803-795-4806
Fax

cw.transit@yahoo.com
Email Address

2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)
   - [x] Individual Owner/Sole Proprietorship
   - [ ] Partnership - List names and address of all person having an interest in the business.
   - [ ] Corporation - List names and addresses of two principal officers.

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:
Month 11 Year 2011

Assets:		
Cash		10,565
Receivables		
Real Estate		
Buildings and Equipment (Net)		
Motor Vehicles (Net)		9,800
Garage Equipment (Net)		
Machinery and Tools (Net)		
Supplies on Hand		
Prepaids and Other Assets		
Total Assets *		20,365
Liabilities and Equity:		
Accounts Payable		
Notes Payable		9,155
Mortgages Payable		
Equipment Obligations		
Accrued Salaries and Wages		
Other Accrued Obligations		
Other Liabilities		
Total Liabilities		9,155
Capital Stock		
Retained Earnings		
Total Equity		
Total Liabilities and Equity *		$11,210

* Total Assets = Total Liabilities and Equity

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PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges (List only maximum charges per mile or trip, and/or hourly rate):

See Attached Access2Care RATE TABLE

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

☐ Abbeville	☐ Cherokee	☐ Florence	☐ Lee	☐ Saluda
☐ Aiken	☐ Chester	☐ Georgetown	☐ Lexington	☐ Spartanburg
☐ Allendale	☐ Chesterfield	☐ Greenville	☐ Marion	☐ Sumter
☐ Anderson	☐ Clarendon	☐ Greenwood	☐ Marlboro	☐ Union
☐ Bamberg	☐ Colleton	☐ Hampton	☐ McCormick	☐ Williamsburg
☐ Barnwell	☐ Darlington	☐ Horry	☐ Newberry	☐ York
☐ Beaufort	☐ Dillon	☐ Jasper	☐ Oconee	
☐ Berkeley	☐ Dorchester	☐ Kershaw	☐ Orangeburg	☒ Statewide
☐ Calhoun	☐ Edgefield	☐ Lancaster	☐ Pickens	
☐ Charleston	☐ Fairfield	☐ Laurens	☐ Richland	

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ACCESS2CARE RATE TABLE

Level of Service	1 - 5 Miles	6 - 21 Miles	22+ Miles
Ambulatory	$6.00	+$1.20/Mile	+$1.05/Mile
Wheelchair	$12.00	+1.35/Mile	+$1.20/Mile
Stretcher	*$45.00*	*+$1.50/Mile*	*+$1.35/Mile*
BLS Ambulance	$98.00	+$2.25/Mile	+$2.10/Mile

STRETCHER SUBJECT TO REVISION

LOS	MILES																								
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
AMB	$6.00	$6.00	$6.00	$6.00	$6.00	$7.20	$8.40	$9.60	$10.80	$12.00	$13.20	$14.40	$15.60	$16.80	$18.00	$19.20	$20.40	$21.60	$22.80	$24.00	$25.20	$26.25	$27.30	$28.35	$29.40
W/C	$12.00	$12.00	$12.00	$12.00	$12.35	$14.75	$16.05	$17.40	$18.75	$20.10	$21.45	$22.50	$24.15	$25.50	$26.85	$28.20	$29.55	$30.90	$32.25	$33.60	$34.95	$36.15	$37.35	$38.55	$39.75
STR*	$45.00	$45.00	$45.00	$45.00	$45.00	$49.50	$48.00	$48.50	$51.00	$52.50	$54.00	$56.50	$57.00	$58.50	$60.00	$61.50	$63.00	$64.50	$66.00	$67.50	$69.00	$70.35	$71.85	$73.35	$74.85
BLS	$98.00	$98.00	$98.00	$98.00	$98.00	$100.25	$102.50	$104.75	$107.00	$109.25	$111.50	$113.75	$116.00	$118.25	$120.50	$122.75	$125.00	$127.25	$129.50	$131.75	$134.00	$135.10	$136.35	$140.50	$142.85

LOS	MILES																									Each Additional Mile Add
	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	
AMB	$30.45	$31.50	$32.55	$33.60	$34.65	$35.70	$36.75	$37.80	$38.85	$39.90	$40.95	$42.00	$43.05	$44.10	$45.15	$46.20	$47.25	$48.30	$49.35	$50.40	$51.45	$52.50	$53.55	$54.60	$55.65	$1.05
W/C	$40.95	$42.15	$43.35	$44.55	$45.75	$46.95	$48.15	$49.35	$50.55	$51.75	$52.95	$54.15	$55.35	$56.55	$57.75	$58.95	$60.15	$61.35	$62.55	$63.75	$64.95	$66.15	$67.35	$68.55	$69.75	$1.20
STR*	$75.26	$77.55	$79.90	$80.25	$81.60	$82.95	$84.30	$85.65	$87.00	$88.35	$89.70	$91.05	$92.40	$93.75	$95.10	$96.45	$97.80	$99.15	$100.50	$101.85	$103.20	$104.55	$105.90	$107.25	$108.60	$1.35
BLS	$144.95	$147.35	$149.75	$151.25	$153.35	$155.45	$157.55	$159.65	$161.75	$163.85	$165.95	$168.05	$170.15	$172.25	$174.35	$176.45	$178.55	$180.55	$182.75	$184.55	$186.25	$188.05	$189.15	$193.25	$195.35	$2.10

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of **seatbelts** in the vehicle, including the driver's seatbelt.)

- [x] 1-7 Passengers, including driver
- [ ] 8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT	WHEEL-CHAIR LIFT
Dodge	2007 Grand Caravan SXT	2D4GP44R17R149571A		N/A

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INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quote is for:

CW TRANSIT
Name of Applicant

4291 GRANADA DR SUMTER SC 29154
Address of Applicant

Amount of Premium:

Liability Insurance $ 5,068

The above quoted premium is for a term of 12 months.

Minimum Limits - Bodily injury and property damage limits will not be less than the following:

		Limits Quoted
Liability Combined Each Occurance	$ 1,000,000	1,000,000
Medical Payments per Person	$ 1,000	1,000

National Casualty Company
Name of Insurance Company

8877 North Gainey Center Dr, Scottsdale, AZ 85258
Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

12-1-11
Date

Authorized Insurance Company Representative's Signature

NOTICE:
If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor Vehicles at (803) 896-8457.

Exhibit Fit, Willing, and Able (FWA)

CW TRANSIT
Name

U.S.D.O.T No.

ICC No.

1. Is there currently any outstanding judgments against the Applicant?
   ○ Yes ☒ No
   If Yes, indicate nature of judgement(s) against applicant.
   N/A

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?
   ☒ Yes ○ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?
   ☒ Yes ○ No

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Exhibit on Driver Qualifications

1. Applicant understands that drivers must possess at least a current American Red Cross Standard First Aid and CPR Certificate or its equivalent, and records that verify/record such training must be kept on file at the company's primary place of of business within South Carolina.

   ☒ Yes ○ No

2. Applicant understands that drivers must be in compliance with all OSHA regulations.

   ☒ Yes ○ No

3. Applicant understands that drivers must be trained in the use of all vehicle installed safety equipment such as two-way radios, first-aid kits, fire extinguishers, and other equipment as outlined in PSC Regulations.

   ☒ Yes ○ No

4. Applicant understands that drivers must be able to physically perform actions necessary to assist persons with disabilities, including wheelchair users.

   ☒ Yes ○ No

5. Applicant understands that drivers must wear a professional uniform and photo identification badge that easily identifies the driver and the company for whom the driver works.

   ☒ Yes ○ No

6. Applicant understands that drivers must complete twelve (12) hours of in-service training annually in the area of safety, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

   ☒ Yes ○ No

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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 26, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Charles Willis
Applicant's Signature

Owner
Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA)
)
COUNTY OF Sumter)

SWORN TO BEFORE ME
This 28 day of November, 2011

Notary Public

Commission Expires 7/28/21

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