223959

DD 8/14/10

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from John Doe d/b/a Doe's Limo

RECEIVED BY OFFICE OF REGULATORY STAFF
MAY 12 2010

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET NUMBER: 2010 - 177 - 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: Cornellius Scott Sr

Address: P.O. Box 1662
Lake City S.C. 29560

Telephone: 843-356-0628

Fax: 843-394-1633

Other: NONE

Email: NONE

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 A/A Restricted
- [ ] Application - Class C Taxi
- [ ] Application - Class C Charter
- [x] Application - Class C Charter Bus
- [ ] Application - Class C Non-Emergency
- [ ] Application - Class C Stretcher Van
- [ ] 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- [ ] Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded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: _____

RECEIVED
MAY 14 2010
PSC SC
MAIL / DMS

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

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 CLASS C - CHARTER BUS CERTIFICATE

Date: May 6-2010

CLASS C - CHARTER BUS

Application is hereby made for a Class C - Charter Bus Certificate.

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

Happy Tours LLC

Lake City, SC, 29560
Street Address of Applicant

P.O. Box 1662 Lake City SC, 29560
Mailing Address of Applicant if different from street address

(843) 356-0628 (843) 394-1033
Phone FAX

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)
   - ☑ 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.

DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Vanhool	1998	YE2TC76B3W2029470		58

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE.**

The following insurance quote is for:

Happy Tours, LLC
Name of Motor Carrier

P.O. box 16662 Lake City SC 29560
Address of Motor Carrier

Amount of Premium:

Liability Insurance $ 5,000,000.00

Limits Quoted: (See Below)

Limits 16 or more passengers

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

Minimum Limits - Intrastate Only:

16 or More Passengers **$ 25,000/300,000/25,000**

Granite State Insurance Company
Name of Insurance Company

158 N. Harbor City Blvd., Melbourne, FL 32935
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.

May 6 - 2010
Date

Thomas Wood Insurance Agency, LLC
Authorized Insurance Company Representative's Signature

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.

Exhibit FWA

Happy Tours LLC
Name

1670178
U.S.D.O.T No.

613909
ICC No.

1. Does Applicant have a Safety Rating from the U.S.D.O.T.?
   ✓ Yes ○ No ○ Pending (Submit when received.)

   If Yes, indicate rating below and provide copy.
   ✓ Satisfactory ✓ Conditional ○ Unsatisfactory

2. Have any of Applicant's drivers or vehicles been places "out of service" by Transport Police safety officers in the past twelve (12) months?
   ○ Yes ✓ No

3. Are there currently any outstanding judgments against the Applicant?
   ○ Yes ✓ No

   If Yes, indicate nature of judgement(s) against applicant.

4. Is Applicant familiar with all insurance regulations and safety regulations governing charter bus carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these regulations?
   ✓ Yes ○ No

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

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 (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA

COUNTY OF Williamsburg

Cornelius Scott Sr
Applicant's Signature

I, Cornelius Scott Sr. (Name of Applicant's Representative), owner (Title)

of Happy Tours LLC (Applicant),

the Applicant for the Charter Bus Certificate as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Cornelius Scott
Cornelius Scott Sr
Signature of Applicant's Representative

SWORN TO BEFORE ME

This 11 day of May, 2010

Alpha M Henryhand
Notary Public

Commission Expires

Alpha M. Henryhand
NOTARY PUBLIC
South Carolina
My Commission Expires 1/31/2017

Detach, complete and remit AFTER your safety audit has been performed by State Transport Police.

Cornelius Scott Sr.
Applicant's Name

Safety Certification

If your operations are subject to Safety Fitness Procedures of the Federal Motor Carrier Safety Regulations (FMCSR) (49 CFR Parts 100-199), even if you have not yet received a Safety Fitness Rating, you must certify as follows:

Applicant has access to and if familiar with all applicable U.S.D.O.T. regulations relating to the safe operation of commercial vehicles. In so certifying, applicant is verifying that, as a minimum, it:

1. Has in place a system and an individual responsible for ensuring overall compliance with the FMCSR and the HM regulations;
2. Can produce a copy of the FMCSR and the HM regulations;
3. Has in place a driver safety/orientation program;
4. Is familiar with the FMCSR governing driver qualifications and has in place a system for overseeing driver qualification requirements in accordance with 49 CFR Part 391.51C;
5. Has in place policies and procedures consistent with FMCSR governing driving and operational safety of commercial motor vehicles, including drivers' hours of service and vehicle inspection, repair, and maintenance (49 CFR Parts 392;395 and 396);
6. Is in compliance with the Controlled Substance and Alcohol Use and Testing as stated in FMCSR (49 CFR Part 40, 382, if applicable).

PLEASE CHECK THE APPROPRIATE RESPONSE BELOW:

☑ Yes ○ Not Applicable

Exempt Applicants - If you will operate only small vehicles (GVWR of 10,000 pounds or less) and do not transport hazardous materials in a quantity to require placarding under the HM regulations and are thus exempt from the FMCSR and HM regulation, you must certify as follows:

Applicant is familiar with and will observe FMCSR general operational safety fitness guidelines.

PLEASE CHECK THE APPROPRIATE RESPONSE BELOW:

○ Yes ○ Not Applicable

Any applicant who certifies they are in compliance with FMCSR and/or the HM regulations and upon completion of a compliance review audit, is found not to be in compliance, may have its certificate revoked.

I, Cornelius Scott, Sr., verify under penalty of perjury under the laws of the State of South Carolina, that all information supplied on this form or relating to this application is true and correct. Further, I certify that I am qualified and authorized to file this application. I know that willful misstatements or omissions of material fact constitute criminal violations punishable by imprisonment and fines as prescribed by law. (Note: This oath embraces all schedules and supplemental filings to this application).

Cornelius Scott
Cornelius Scott Sr.
Applicant's Signature

SWORN TO BEFORE ME
This 11 day of May, 2010

Alpha M Henryhand
Notary Public

Commission Expires

Alpha M. Henryhand
NOTARY PUBLIC
South Carolina
My Commission Expires 1/31/2017

071130-0208 Filed: 11/30/2007

HAPPY TOURS, LLC

Filing Fee: $110.00 ORIG

Mark Hammond South Carolina Secretary of State

STATE OF SOUTH CAROLINA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION
FOR A
LIMITED LIABILITY COMPANY

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to Sections 33-44-202 and 33-44-203 of the South Carolina Code of Laws, as amended.

1. The name of the limited liability company which complies with Section 33-44-105 of the 1976 South Carolina Code of Laws as amended is HAPPY TOURS, LLC

2. The address of the initial designated office of the Limited Liability Company in South Carolina is

   1331 OLANTA HWY
   Street Address

   LAKE CITY SC — 29560
   City — Zip Code

3. The initial agent for service of process of the Limited Liability Company is

   CORNELIUS SCOTT — Electronically filed on SCBOS. Signature not required.
   Name — Signature

   and the street address in South Carolina for this initial agent for service of process is

   1331 OLANTA HWY
   Street Address

   LAKE CITY SC — 29560
   City — Zip Code

4. The name and address of each organizer is

   a) CORNELIUS SCOTT
   Name

   1331 OLANTA HWY CORNELIUS SCOTT
   Street

   LAKE CITY — SC US — 29560
   City — State — Zip Code

5. [ ] Check this box if the company is to be a term company. If so, provide the term specified:

HAPPY TOURS, LLC

Name of Corporation

6 ☐ Check this box only if managemnt of the limited liability company is vested in a manager or managers If this company is to be managed by managers, specify the name and address of each initial manager

7 ☐ Check this box if one or more of the members of the company are to be liable for its debts and obligations under section 33-44-303(c) If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members

8 Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State Specify any delayed effective date and time

9 Set forth any other provisions not inconsistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement

10 Signature of each organizer

Electronically filed on SCBOS.
Refer to attached signature page.

Date 2007-11-30

FORM REVISED BY SOUTH CAROLINA SECRETARY OF STATE, JANUARY 2003