APSC FORM NO. 11
(Transfer or Lease)

DOCKET NO.	
(Commission	use only)

APPLICATION UNDER ALABAMA MOTOR CARRIER ACT OF 1939 FOR APPROVAL OF TRANSFER OR LEASE OF CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY OR PERMIT

GENERAL INSTRUCTIONS

- 1. This Application should be typed or neatly printed, properly signed and sworn to and the original and one copy returned to the ALABAMA PUBLIC SERVICE COMMISSION, PO BOX 304260, MONTGOMERY, ALABAMA 36130.
- 2. If this is application for approval of <u>transfer of certificate or permit, attach to the application remittance in the amount of \$25.00</u>, or if this is application for approval of <u>lease of certificate of permit of more than six months</u> attach, to the application, remittance in the amount of \$10.00, in payment of application fee by law. (No fee required to accompany an application for approval of lease when said lease is for a period of not less than six months.) Any payment must be in the form of a money order or cashier's check.
- 3. <u>Transferee</u> is the operator to whom the authority is to be transferred. <u>Transferor</u> is the operator from whom the authority is to be transferred. <u>Lessor</u> is the operator from whom the authority is being leased.
- 4. Copy of BILL OF SALE OR LEASE AGREEMENT MUST accompany application.
 - If incorporated, attach a copy of articles of incorporation or corporate charter of transferee or lessee. If a limited liability company, attach a copy of the articles of organization of the transferee or lessee.
- 5. All Individual and Partner Applicants must comply with the provisions of *Code of Alabama*, §3-13-29 by submitting a completed proof of U.S. Citizenship form (available at www.psc.alabama.gov) confirming the Applicant's United States citizenship.

IMPORTANT: At the time of the filing of this application, <u>transferee or lessee must submit and attach hereto a proposed tariff</u> if applicable, and a <u>letter from an insurance agent</u> to the effect that if the transfer herein proposed is approved by the Commission, they will write, upon payment of premiums, such insurance as is required by law and rules and regulations of this Commission.

SECTION	NI
APPLICANTS STATE:	
This is an application of(Full and Correct Name	e of TRANSFEREE or LESSEE)
(State whether Corporation, Limited Liability Company, Par	rtnership, or Individual)
DOING BUSINESS AS	-
Business Address:	
Mailing Address:	
Telephone Number: l	Fax Number:
Email Address:	

AND
(Full and correct name of TRANSFEROR OR LESSOR)
(State whether Corporation, Limited Liability Company, Partnership, or Individual)
DOING BUSINESS AS
Business Address:
Mailing Address:
Telephone Number: Fax Number:
Email Address:
(1) For approval of TRANSFER OF CERT. NO OR PERMIT NO
(2) For approval of LEASE OF CERT. NO OR PERMIT NO
(If proposed transfer or lease involves only a PORTION of Transferor's or Lessor's authority, indicate below:
(3)
All Individual and Partner Applicants have attached hereto a completed "Proof of U.S. Citizenship" form.
SECTION II
(a) Are operations being presently conducted by transferor or lessor under the operating rights here proposed to be transferred or leased? Yes OR No If answer is "No", explain below:
(b) Number of unsettled loss and damage claims filed by shippers and receivers of freight and on hand with Transferor or lessor and aggregate amount of money claimed thereby:
Number Amount \$
(c) Number of unsettled overcharge claims filed by shippers and receivers of freight and on hand with transferor or lessor and aggregate amount of money claimed hereby:
Number Amount \$

SECTION III
That the consideration to be received by the transferor or lessor as a result of such transfer or lease is \$ or other
Time of Payment Method of Payment
SECTION IV
That said transferee or lessee has had the following experience to qualify for this operation:
SECTION V
That the person to whom correspondence with respect to this application should be addressed is as follows:
(State full and correct name)
(State title and name of company, if attorney, so state)
(State business address of person to be addressed)
Telephone Number: Fax Number:
Email Address:

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SECTION VI

hat the financial statement of transferee or lessee as of latest a	vailable date is as	s follows:
If a partnership, submit separate financial statements for each	partner).	
ASSETS: As of		
ASSETS: As of(Latest Date)		(Current Date)
Cash on hand and in bank	\$	
Land and Buildings		
Trucks (value as of balance sheet date)		
Tractors		
Trailers		
Buses		
Automobiles		
Investments (stocks, bonds, other securities)		
Other assets (Describe)		
TOTAL AS	SSETS \$	
LIABILITIES:		
Mortgages on land and buildings	\$	
Balance owed on vehicles		
Other liabilities (Describe)		
TOTAL LIABIL	ITIES \$	
TO FIND NET WORTH:		
TOTAL ASS	SETS \$	
(subtract) TOTAL LIABILI	ΓIES	
THIS IS YOUR NET WOR		

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SECTION VII

Dated tins	day of
	(Signature of Transferee or Lesser)*
	(Signature of Transferor or Lessor)*
	ОАТН
County of	
State of	
lessee or lessor, or ir	being by me duly sworn, stated that they executed the foregoing application as transferee and transferor, on behalf of said parties, and, if the latter, that they were authorized so to do; that the facts stated therein, and of said parties, respectfully, are true and correct to the best of their knowledge, information, and belie ited States citizens.
Subscribed and swor	rn to before me, a notary in and for said State and County above named.
Subscribed and swor	rn to before me, a notary in and for said State and County above named. Date:
	Date:
Subscribed and swor	Date:

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