

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

003/02/13

242147

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2013 - 81 - 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: Marilio Santos Vicente

Telephone: 864-445-1173

Address: 382 Mine Creek Rd  
Saluda SC 29138

Fax:

Other:

Email:

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)

- |   |  |
|---|--|
| <input type="checkbox"/> Application - Class A/A Restricted   | <input type="checkbox"/> Request for Name Change on Certificate        |
| <input checked="" type="checkbox"/> Application - Class C Taxi  | <input type="checkbox"/> Request to Amend Scope of Authority           |
| <input type="checkbox"/> Application - Class C Charter  | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus  | <input type="checkbox"/> Request to Amend Passenger Limit              |
| <input type="checkbox"/> Application - Class C Non-Emergency  | <input type="checkbox"/> Request                                       |
| <input type="checkbox"/> Application - Class C Stretcher Van  | <input type="checkbox"/> Exhibit                                       |
| <input type="checkbox"/> Application - Class E Household Goods  | <input type="checkbox"/> Late-Filed Exhibit                            |
| <input type="checkbox"/> Application - Class E Hazardous Waste  | <input type="checkbox"/> Letter  |
| <input type="checkbox"/> Application  | <input type="checkbox"/> Proposed Order                                |
| <input type="checkbox"/> Request for Extension to Comply with Order   | <input type="checkbox"/> Publisher's Affidavit                         |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | <input type="checkbox"/> Reservation Letter                            |
| <input type="checkbox"/> Request for Cancellation of Certificate  | <input type="checkbox"/> Response                                      |
| <input type="checkbox"/> Request for Suspension   | <input type="checkbox"/> Return to Petition                            |
| <input type="checkbox"/> Request for Reinstatement  | <input type="checkbox"/> Other: _____                                  |

RECEIVED  
MAR 08 2013  
PSC-SC  
CLERK'S OFFICE

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

gps

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

Date: 2-22-13

CLASS C - CHARTER

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.)

Marilio Santos Vicente Sole proprietor

282 Mine Creek Rd. Saluda SC 29138  
Street Address of Applicant

Mailing Address of Applicant (if different from street address)

864-445-1173  
Phone

Fax

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)

- ☒ Individual Owner/Sole Proprietorship  
☐ Partnership - List names and addresses of all person having an interest in the business.  
☐ Corporation - List names and addresses of two principal officers.

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 Feb Year 2013

**Assets:**

Cash	5,000
Receivables	-0-
Real Estate	Mobile home-1 acre 40,000
Buildings and Equipment (Net)	-0-
Motor Vehicles (Net) 3	11,000
Garage Equipment (Net)	-0-
Machinery and Tools (Net)	-0-
Supplies on Hand	-0-
Prepays and Other Assets	-0-
<b>Total Assets*</b>	45,000
<b><u>Liabilities and Equity:</u></b>	
Accounts Payable	810.00
Notes Payable	-0-
Mortgages Payable	-0-
Equipment Obligations	-0-
Accrued Salaries and Wages	-0-
Other Accrued Obligations	-0-
Other Liabilities	-0-
<b>Total Liabilities</b>	810.00
Capital Stock	-0-
Retained Earnings	-0-
<b>Total Equity</b>	-0-
<b>Total Liabilities and Equity*</b>	810.00

\* Total Assets = Total Liabilities and Equity

## PROPOSED RATES AND CHARGES FOR SERVICE

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

3.00 a mile  
10.00 or over a chartered trip for more than  
1 person and over 5 miles

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.

- |  |   |  |   |   |
|--|---|--|---|---|
| <input type="checkbox"/> Abbeville             | <input type="checkbox"/> Cherokee             | <input checked="" type="checkbox"/> Florence   | <input type="checkbox"/> Lee                  | <input checked="" type="checkbox"/> Saluda      |
| <input checked="" type="checkbox"/> Aiken      | <input type="checkbox"/> Chester              | <input type="checkbox"/> Georgetown            | <input checked="" type="checkbox"/> Lexington | <input checked="" type="checkbox"/> Spartanburg |
| <input type="checkbox"/> Allendale             | <input type="checkbox"/> Chesterfield         | <input checked="" type="checkbox"/> Greenville | <input type="checkbox"/> Marion               | <input checked="" type="checkbox"/> Sumter      |
| <input type="checkbox"/> Anderson              | <input type="checkbox"/> Clarendon            | <input checked="" type="checkbox"/> Greenwood  | <input type="checkbox"/> Marlboro             | <input checked="" type="checkbox"/> Union       |
| <input type="checkbox"/> Bamberg               | <input type="checkbox"/> Colleton             | <input checked="" type="checkbox"/> Hampton    | <input checked="" type="checkbox"/> McCormick | <input type="checkbox"/> Williamsburg           |
| <input type="checkbox"/> Barnwell              | <input type="checkbox"/> Darlington           | <input type="checkbox"/> Horry                 | <input checked="" type="checkbox"/> Newberry  | <input type="checkbox"/> York                   |
| <input type="checkbox"/> Beaufort              | <input type="checkbox"/> Dillon               | <input type="checkbox"/> Jasper                | <input type="checkbox"/> Oconee               |   |
| <input type="checkbox"/> Berkeley              | <input type="checkbox"/> Dorchester           | <input type="checkbox"/> Kershaw               | <input type="checkbox"/> Orangeburg           | <input type="checkbox"/> Statewide              |
| <input type="checkbox"/> Calhoun               | <input checked="" type="checkbox"/> Edgefield | <input type="checkbox"/> Lancaster             | <input type="checkbox"/> Pickens              |   |
| <input checked="" type="checkbox"/> Charleston | <input type="checkbox"/> Fairfield            | <input checked="" type="checkbox"/> Laurens    | <input checked="" type="checkbox"/> Richland  |   |

## 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.)

- ☒ 1-7 Passengers, including driver
- ☐ 8-15 Passengers, including driver

[illegible]

8038965199

03:47:00 p.m. 03-06-2013 1/1

INSURANCE**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:

Marilio Santos Vicente

Name of Applicant

282 Mine Creek Rd Saluda SC 29138

Address of Applicant

**Amount of Premium:**

Limits Quoted: (See Below)

Liability Insurance \$

25/50/25

Limits

1800.00 yr.

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

**Minimum Limits - Intrastate Only:**

1-7 Passengers\* \$ 25,000/50,000/25,000

8-15 Passengers\* \$ 25,000/100,000/25,000

\* Passengers = Number of seatbelts in the vehicle, including the driver's seatbelt

Columbia Insurance

Name of Insurance Company

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.

3-7-13

Date

Laura Eick

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.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at [www.wcc.state.sc.us/self-insurance](http://www.wcc.state.sc.us/self-insurance).

**Exhibit Fit, Willing, and Able (FWA)**

Marilio Santos Vicente  
Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes ☒ No

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

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

### **Exhibit on Driver Qualifications**

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ 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 (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.

Mario Santos Vicente  
Applicant's Signature

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

STATE OF SOUTH CAROLINA )  
COUNTY OF Saluda )

SWORN TO BEFORE ME  
This 3rd day of March, 2013

Hector D. Ortiz  
Notary Public

Commission Expires 07/07/2018





Certified to be a true and correct  
copy of the original document on file  
with the South Carolina Department of  
Motor Vehicles.

## OFFICIAL 3 YEAR DRIVER RECORD

Driver Services, Deputy Director

Customer No.: 30604894

Driver License No.: [REDACTED]

Name : SANTOS-VICENTE, MARILIO

Address : 282 MINE CREEK RD

City : SALUDA

State: SC

Zip: 291387517

County : SALUDA

DOB: 08/11/1975

Sex: M

Driver Training: N

Status - DL: NO SUSPENSION

CDL: NO DISQUALIFICATION

### License Information

Type	Class	Function	Issued	Expires	First Issued	Rest.	Endor.
Current							
DL	D	Original	12/17/2012	12/17/2013	12/17/2012	N	N

### Name Change -

Date Changed: 10/29/2012

Name: SANTOS MARILIO VICENTE

### Point Summary

Total Current Points: 0  
Driver Credit: - 0  
Adjusted Current Points: 0

### SC Driver License/ID Surrendered

Credential Type: ID

Class:

Function: Original

Posted: 12/17/2012

Issued: 10/29/2012

Date Surrendered: 12/17/2012

Reason For Return: RETURNED VOLUNTARILY

Returning State: SC

### OOS Driver License Surrendered

OOS License No.: 20570656

OOS Jurisdiction: NC

Issued: 02/02/2004

Date Surrendered: 10/29/2012

Reason For Return: OOS LICENSE EXCHANGE FOR SC LICENSE

End of Report

# SOUTH CAROLINA LAW ENFORCEMENT DIVISION

NIKKI R. HALEY  
Governor



MARK A. KEEL  
Chief

## NO RECORD

### CRIMINAL RECORD CHECK

S.C. LAW ENFORCEMENT DIVISION

(Please print your completed form and submit to SLED. You may want to print a copy for your records.)

FULL NAME (with middle name):

Marilio Santos

AKA and/or MAIDEN NAMES:

DOB

08-11-75

SSN:

N/A

(Federal law permits governmental agencies to require a social security number in order to conduct official business; however, private entities may only obtain social security numbers if given voluntarily).

NAME OF CHARITABLE ORGANIZATION (if applicable):

CHARITABLE VERIFICATION ACCOUNT # (if applicable):

MAILING ADDRESS:

(A self addressed stamped envelope is required for the return of background check)

#### PLEASE NOTE:

The fee is twenty-five dollars (\$25) unless you are a charitable organization approved for a fee of eight dollars (\$8). A charitable organization must include its name and account number or the request may not be processed. Payment must be business check, certified/cashier's check or money order payable to SLED. **PERSONAL CHECKS WILL NOT BE ACCEPTED.** This report contains records of arrests and convictions made by state/local agencies in South Carolina only. Alteration of a completed criminal records check may subject a person to criminal prosecution. A completed criminal records check should not be accepted unless it bears an original SLED stamp. **\*PLEASE ENCLOSE A SELF ADDRESSED STAMPED ENVELOPE FOR THE RETURN OF YOUR RECORD CHECK.**

**SLED RECORDS SECTION HAS BEEN CLOSED TO THE PUBLIC SINCE DECEMBER 15, 2008.**

(CJ-022) 08/12/11

RECEIVED SLED/CJICS  
2013 FEB 25 PM 4:28  
CRIMINAL RECORDS DEPT

