



# Louisiana Public Service Commission

Located at 602 North Fifth Street; Baton Rouge, LA 70802

Mailing Address PO Box 91154; Baton Rouge, LA 70821

Transportation Division: (888) 342-5717

## **APPLICATION FOR APPROVAL OF TARIFF RATE CHANGE**

Common Carriers operate under tariffs filed with and approved by the LPSC, which shows the services to be rendered and the basis for computation of rates. After the carrier's initial filing all changes must be effected through tariff publications approved by the LPSC pursuant to General order dated October 02, 2012 as follows:

- I. A Common Carrier is hereby authorized to include a range of rates, fares or charges in the Common Carrier's tariff instead of an established singular rate, fare or charge. The tariff shall provide reasonable criteria for the upward or downward movement within the established range. This authorization is subject to Staff's determination that the range and criteria of applicable rates, fares or charges is reasonable for the current market conditions.
- II. If the effective date of the Common Carrier's last increase in rates occurred more than three (3) years prior to the application date of the Common Carrier's current application for a change in rates, fares or charges, and the Common Carrier is not seeking to increase its rates in excess of 10% from the current tariff rates on file with the Commission, then the application is subject to the following approval procedure.
  - A. The application shall be published in the Commission's Bulletin for fifteen (15) days to allow for intervention and public comment.
  - B. If an intervention is not filed within the fifteen (15) day period established in Subsection (A), then Commission Staff shall approve the rate increase and said increase shall become effective upon the Common Carrier's filing of the approved tariff. If an intervention is received then the application shall be subject to approval by the Commission at a Business & Executive Session.
  - C. Upon request by any Commissioner, any application acted upon by Staff in the procedure established in subsections (A) and (B) herein, may be reviewed by the full Commission at a Business & Executive Session.
- III. If the filing date of the Common Carrier's current application for an increase in rates was three (3) years or less since the effective date of the Common Carrier's last rate increase, or the Common Carrier is seeking to increase its rates in excess of 10% from the current tariff rates on file with the Commission, then the approval of the application is subject to a complete rate review by Staff and approval by the full Commission at a Business & Executive Session. In the event of a declaration by the Commission that an extraordinary circumstance has occurred, applications that are subject to this section, may be processed and approved by Staff.
- IV. A Common Carrier that has a tariff on file with the Commission may decrease its rates, fares or charges by filing an updated tariff with the Commission, but will be subject to all provisions of this General Order if the Common Carrier seeks to increase its rates, fares or charges at a later date.

## REQUIREMENTS AND APPLICATION

1. Application must be notarized and filed in the Commission's office, Post Office Box 91154; Baton Rouge, Louisiana 70821-9154.
2. Filing fee for such application is:
  - a. Rate Increase - \$150.00
  - b. Rate decrease - \$ 10.00
3. The original application when requesting a rate decrease or a rate increase by 10% or less and over 3 years **must** be accompanied by:
  - (a) Application fee as noted in number 2 above
  - (b) Copy of the proposed tariff
  - (c) Copies of your company's last four (4) quarters of Inspection and Supervision Fees (ISF) reports filed with the Louisiana Department of Revenue and proof of payments.
  - (d) One additional copy of the application and one additional copy of items (a)-(c) above.
4. The original application when requesting a rate increase by more than 10% or less or less than 3 years **must** be accompanied by:
  - (a) Application fee \$150.00
  - (b) Copy of the proposed tariff
  - (c) Copies of your company's last four (4) quarters of Inspection and Supervision Fees (ISF) reports filed with the Louisiana Department of Revenue and proof of payments.
  - (d) The last two full years of financial statements; these will include both "Profit & Loss Statements" and "Balance Sheets".
  - (e) Two additional copies of the application and two additional copies of items (a)-(c) above.

LOUISIANA PUBLIC SERVICE COMMISSION

Transportation Division

Post Office Box 91154 Baton Rouge, LA 70821-9154

Telephone: (888) 342-5717 or (225) 342-4439 LPSC Website: <http://lpsc.louisiana.gov>

# TARIFF RATE CHANGE APPLICATION

Every applicant must complete the following affidavit and submit with the appropriate filing fee. All blanks must be completed even if the information requested is not applicable to the requested action. Failure to have this affidavit properly executed before a notary will result in the application being returned to the submitting party. Where corporate resolutions or other documentation is called for, attach same to this affidavit. If the responses require more space, attach separate pages as necessary.

<b>TYPE OF APPLICATION:</b> (Select one)		<b>COMMON CARRIER LPSC NUMBER:</b>	
<input type="checkbox"/> <b>RATE INCREASE/RATE RESTRUCTURE</b> (\$150) <input type="checkbox"/> <b>RATE DECREASE</b> (\$10)			
<b>GENERAL INFORMATION</b>			
<b>Company Name -</b>		E-Mail Address	
Physical Address			
Physical City	Physical State	Physical Zip Code	
Mailing Address			
Mailing City	Mailing State	Mailing Zip Code	
<b>GIVE REASONS FOR THE REQUESTED CHANGE(S)</b> (If additional space is needed, attach a separate sheet.)			
<hr/> <hr/> <hr/>			
<b>REPRESENTATIVE:</b> (Person to whom inquiries may be made concerning this application)			
Name:		Title:	
Address:			
Phone:	Fax:	Email:	
<b>LEVIES - BANKRUPTCIES</b>			
<input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> - Levy against this authority being held by the Louisiana Department of Revenue and Taxation, (If so, a copy of the Notice of Levy is attached)			
<input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> - Any other levies against the authority. (If so, a copy of the Notice of Levy is attached providing a list names and addresses of parties holding the levies and the nature of same and amount(s) claimed under each levy and attach copy of same.)			
<input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> - Is the certificate involved in any bankruptcy proceeding. (If so, a copy of the Notice of Bankruptcy including the name(s) of counsel for the party with an interest in the certificate is attached)			

VERIFICATION STATEMENT FOR TARIFF RATE CHANGE APPLICATION OF LPSC NO. \_\_\_\_\_:

STATE OF \_\_\_\_\_ PARISH/COUNTY OF \_\_\_\_\_ BE

IT KNOWN, that on this day, Before Me \_\_\_\_\_,

Notary Public, in and for the State and Parish/County aforesaid and in the presence of the undersigned witness personally came and appeared \_\_\_\_\_ (Representative/Applicant), who,

after being by me first duly sworn, deposed and represents that the foregoing responses are good, true, and accurate. Affiant acknowledges that should any response be shown to have been either a negligent or intentional misrepresentation of the facts, action taken by the Louisiana Public Service Commission in reliance of the responses contained herein may be declared void ab initio and revocable upon complaint by any interested party or by ex parte motion of the Louisiana Public Service Commission. Affiant's signature reflects an understanding of the consequences attributable to misstatements or misrepresentations of fact.

\_\_\_\_\_  
(REPRESENTATIVE/APPLICANT SIGNATURE & TITLE)

SWORN TO AND SUBSCRIBED, Before Me, Notary, at

\_\_\_\_\_, \_\_\_\_\_,  
(City/Town) (State)

on this \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
NOTARY PUBLIC (Signature & Seal)  
MY COMMISSION EXPIRES ON \_\_\_\_\_

**LPSC OFFICE USE ONLY**

Docket# \_\_\_\_\_ Published in Official Bulletin # \_\_\_\_\_ for 15 days on \_\_\_\_\_.

\_\_\_\_\_  
Application Accepted by: Date