

Chris Aquino

From: WMATC E-Filing <administrator@wmatc.gov>
Sent: Thursday, January 21, 2016 4:45 PM
To: Constantine Kolouas; Chris Aquino
Subject: 2016 Annual Report - WMATC No: 1345, Carrier Name: My Own Place, Inc.
Attachments: 56a1515e510b5-MOP Vehicle Listing'2016.pdf

Washington Metropolitan Area Transit Commission 2016 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2016, must file a complete 2016 annual report and pay a \$175 annual fee on or before **February 1, 2016**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2016.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

1. ANNUAL REPORT OF:

WMATC No.: 1345

Name of Carrier (as shown on certificate of authority): My Own Place, Inc.

Trade Name:

Principal Place of Business

Street Address: 6495 New Hampshire Ave.

Apt./Suite: Suite 201

City: Hyattsville

State: MD

Zip: 20783

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:

State:

Zip:

Telephone Number: 2025806700

Other Telephone: 2025806700

Fax Number: (301)891-4987

E-mail: kkee@myownplaceinc.org

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.:

DCTC No.:

Virginia DMV passenger carrier No.:

Maryland PSC No.: Maryland

3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Name: Kimberly Scott-Hopkins

Title: CEO

Telephone Number: (202)580-6701

Other Telephone: (202)386-4404

Fax Number: (301)891-4987

E-mail: kscott-hopkins@myownplaceinc.org

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

Name of Registered Agent for Service of Process:

Agent Address:

Apt./Suite:

City:

State:

Zip:

Telephone Number:

E-mail:

5. *CHANGES: Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

WMATC 2014

Model Year	Make	VIN	Plate #	State	Seating Capacity	Wheelchair Lift or Ramp Yes/No
2006	Ford	2FMZA516X68A27021	45852B	MD	7	No
2011	Dodge	2D4RN3DG6BR639805	C75076	DC	7	No
2005	Ford	2FMZA506Z5BA22296	45850B	MD	7	No
2006	Ford	1FBNE31L16HA05093	45853B	MD	12	No
2006	Ford	1FDWE35L96DA83330	54231B	MD	10	Yes
2005	Ford	1FBNE31L65HA10577	45858B	MD	12	No
2005	Ford	2FMZA50625BA31774	45851B	MD	7	No
2005	Ford	2FMZA50625BA39695	53131B	MD	7	No
2005	Ford	1FBNE31L16HA05000	59182B	MD	4	Yes
2006	Ford	1FBNE31L86HA38186	59181B	MD	7	Yes
2012	Ford	1FBNE3BLXCDA08947	55485B	MD	12	No
2011	Ford	1FMNE1BL2BDA15658	54262B	MD	7	No
2011	Ford	1FBNE3BLOBDA53524	54264B	MD	12	No
2011	Ford	1FTNS2EL4BDB24830	55460B	MD	10	No