
From: WMATC E-Filings
Sent: Wednesday, January 11, 2023 2:07 PM
To: WMATC carrier filings
Subject: 2023 Annual Report - WMATC No: 1345, Carrier Name: My Own Place, Inc.
Attachments: 63bf08be057f2-MOP Vehicle Listing'12'31'2022.pdf

Washington Metropolitan Area Transit Commission
2023 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2023, must file a complete 2023 annual report and pay a \$175 annual fee on or before **January 31, 2023**. To be timely, the report and fee must be received at the WMATC 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 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, 2023.
- Filing an annual report containing false information, or omitting information, may result in a civil forfeiture.
- Make check or money order payable to WMATC. WMATC does not accept cash.

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: 201

City: Hyattsville

State: MD

Zip: 20783

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:

State:

Zip:

Telephone Number: (301)830-7702

Other Telephone: (202)386-4314

Fax Number:

E-mail: kkee@myownplaceinc.org

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

USDOT No.:

DC DFHV No.:

Virginia DMV passenger carrier No.:

Maryland PSC No.:

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

Name: Kimberly Scott

Title: CEO

Telephone Number: (202)580-6701

Other Telephone:

Fax Number:

E-mail: kscott@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 12/31/2022

Year	Make	VIN	Tag	State	Seating Capacity	Wheelchair Lift or Ramp Yes/No
2006	Ford	1FDWE35L96DA83330	54231B	MD	10	Yes
2011	Ford	1FMNE1BL2BDA15658	63733B	MD	7	No
2016	Ford	1FBAX2CM0GKA41354	61800B	MD	12	No
2012	Ford	1FBNE3BLXCDA08947	55485B	MD	12	Yes
2018	Ford	1FBVU4XM2JKB31547	65191B	MD	6	Yes