

COMMONWEALTH OF KENTUCKY
BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

ALLAN CRAIG

ALLEGED VIOLATION OF UNDERGROUND
FACILITY DAMAGE PREVENTION ACT

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)
)
)
)
)
)

CASE NO.
2021-00036

NOTICE OF FILING

Notice is given to all parties that evidence of successful service of process has been filed into the record of this proceeding.



Linda C. Bridwell, PE
Executive Director
Public Service Commission
P.O. Box 615
Frankfort, KY 40602

DATED MAR 16 2021

cc: Parties of Record

7020 0090 0000 3520 8361

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee	3.60
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.05
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	1.40
\$	
Total Postage and Fees	7.85
\$	

Postmark
Here

Sent To

Street

City, &

Allan Craig
48 Lakeway Ave
Campbellsville, KENTUCKY 42718

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Allan Craig
48 Lakeway Ave
Campbellsville, KENTUCKY 42718

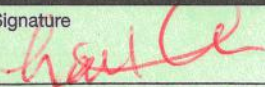
 2. Article Number
(Transfer from service label)

7020 0090 0000 3520 8361

COMPLETE THIS SECTION ON DELIVERY

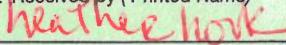
A. Signature

X



-
- Agent
-
-
- Addressee

B. Received by (Printed Name)



C. Date of Delivery



- D. Is delivery address different from item 1?
-
- Yes
-
- If YES, enter delivery address below:
-
- No

3. Service Type

-
- Certified Mail
-
- Express Mail
-
-
- Registered
-
- Return Receipt for Merchandise
-
-
- Insured Mail
-
- C.O.D.

4. Restricted Delivery? (Extra Fee)
-
- Yes

UNITED STATES POSTAL SERVICE
LOUISVILLE KY 400

13 FEB 2021 PM 1 L

First Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

Public Service Commission
211 Sower Blvd
Frankfort KY 40601

Case 21-00036 Inc 316d01

Allan Craig
48 Lakeway Ave
Campbellsville, KENTUCKY 42718