

**NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES**

INSURANCE CERTIFICATE -- FOR HIRE PASSENGER VEHICLE

**339 MAYA ASSURANCE COMPANY**

Policy Number

**1-MA018933**Name & Address of Issuer **MAYA ASSURANCE COMPANY  
45-18 COURT SQUARE, SUITE 300  
LONG ISLAND CITY, NY, 11101**

Effective Date

**09/08/2018**

Expiration Date

**09/08/2019**

12:01 a.m.

12:01 a.m.

(Not acceptable to obtain registration  
after 45 days from effective date.)An authorized NEW YORK insurer certifies that it has issued  
a liability policy complying with Section 370 of the NEW YORK  
Vehicle and Traffic Law to:

Applicable with respect to the following Motor Vehicle:

**2015****TOYOT**

Year

Make

**4T1BF1FK5FU996916****5**

Vehicle Identification Number

Seats

**SINGH, HARINDER  
91-30 118 STREET  
RICHMOND HILL NY 11418**THIS ID CARD MUST BE CARRIED  
IN THE INSURED VEHICLE FOR  
PRODUCTION UPON DEMANDWARNING: Any person who issues  
or produces an ID card knowing that  
an Owner's Policy of insurance is not in  
effect may be committing a misdemeanor.  
In addition, a person who presents  
an ID card if insurance is not in  
effect may be committing a  
misdemeanor.The name of the registrant and the  
name of the insured must coincide.REPLACEMENT VEHICLE NOTATION:  
DMV WILL ONLY PROCESS A VEHICLE  
CHANGE (RE-REGISTRATION) USING  
THE REPLACED VEHICLE'S CURRENT  
REGISTRATION.

FH-1

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FAX: Scanable Bar Code

## FAX INSTRUCTIONS:

1. The entire page must be faxed.
2. If submitted to DMV, either the entire page or the second ID card and large scanable bar code will be retained
3. A faxed ID card must be replaced with a scanable ID card within 14 days of the effective date.
4. DMV will not accept a faxed ID card without a scanable barcode

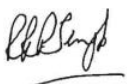
## CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

<b>PRODUCER</b>		<b>INSURER AFFORDING COVERAGE</b>	
K S BILLING AND ASSOCIATES INC 118-12 ATLANTIC AVENUE RICHMOND HILL, NY 11419		MAYA ASSURANCE COMPANY 45-18 COURT SQUARE, SUITE 300 LONG ISLAND CITY, NEW YORK 11101	
<b>INSURED</b>			
SINGH, HARINDER 91-30 118 STREET RICHMOND HILL, NY 11418			
<b>AUTOMOBILE LIABILITY</b>	<b>POLICY NUMBER</b>	<b>POLICY EFFECTIVE DATE</b>	<b>POLICY EXPIRATION DATE</b>
SCHEDULED AUTO	1-MA018933	09-08-2018 (12:01 AM)	09-08-2019 (12:01 AM)
<b>COVERAGES</b>	<b>LIMITS OF LIABILITY</b>		
BODILY INJURY	\$ 100,000 EACH PERSON		
	\$300,000 EACH ACCIDENT		
PROPERTY DAMAGE	\$10,000 EACH ACCIDENT		
STATUTORY UNINSURED MOTORIST	\$25,000 EACH PERSON		
	\$50,000 EACH ACCIDENT		
MANDATORY PERSONAL INJURY PROTECTION	\$50,000		
ADDITIONAL PIP	\$150,000		
SUPPLEMENTARY UNINSURED MOTORIST	EACH PERSON		
	EACH ACCIDENT		
AGGREGATE NO-FAULT			

### DESCRIPTION OF REGISTERED OWNED VEHICLE(S)

2015 TOYOTA 4T1BF1FK5FU996916	
<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
NYC TAXI AND LIMOUSINE COMMISSION 31-00 47th Avenue, 3rd Floor Long Island City, NY 11101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER OR REPRESENTATIVES.
<b>DISCLAIMER</b>	
THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), OR PRODUCER, AND THE CERTIFICATE HOLDER, NOR DOES IT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED THEREON.	



Authorized Signature



**MAYA ASSURANCE COMPANY**  
**45-18 COURT SQUARE, SUITE 300**  
**LONG ISLAND CITY, NEW YORK 11101**  
**TEL: 718-937 2010 FAX: 718-937 2050**

<b>POLICY NO.</b>		1-MA018933		COMMERCIAL AUTOMOBILE		
<b>NAMED INSURED AND ADDRESS</b>				<b>PRODUCERS NAME AND ADDRESS</b>		
SINGH, HARINDER 91-30 118 STREET RICHMOND HILL, NY 11418				K S BILLING AND ASSOCIATES INC 118-12 ATLANTIC AVENUE RICHMOND HILL, NY 11419		
<b>POLICY PERIOD</b>		Effective 09-08-2018 (12:01 AM) - Expires: 09-08-2019 (12:01 AM)				
<b>UNIT #</b>	<b>MODEL YEAR</b>	<b>MAKE</b>	<b>IDENTIFICATION NUMBER</b>	<b>CLASS</b>	<b>TERR</b>	<b>PLATE #</b>
1	2015	TOYOTA	4T1BF1FK5FU996916			
Driver 1 HARINDER SINGH						
Radio Base Name: DRINNEN-NY, LLC						
<b>COVERAGES</b>				<b>SYMBOL</b>	<b>LIMITS OF LIABILITY</b>	<b>PREMIUM</b>
BODILY INJURY LIABILITY				7	100,000 EACH PERSON	\$2,392.00
					300,000 EACH ACCIDENT	
PROPERTY DAMAGE LIABILITY				7	10,000 EACH ACCIDENT	\$583.00
UNINSURED MOTORIST				6	25,000 EACH PERSON	\$60.00
					50,000 EACH ACCIDENT	
SUPPLEMENTARY UNINSURED/UNDERINSURED MOTORISTS					EACH PERSON	\$0.00
					EACH ACCIDENT	
<b>PERSONAL INJURY PROTECTION</b>				<b>SYMBOL</b>	<b>COVERAGE LIMITS</b>	<b>PREMIUM</b>
MANDATORY PERSONAL INJURY PROTECTION				5	50,000	\$910.00
OPTIONAL BASIC ECONOMIC LOSS						
ADDITIONAL PERSONAL INJURY PROTECTION				5	150,000	\$364.00
AGGREGATE NO-FAULT					200,000	
MAXIMUM MONTHLY WORK LOSS BENEFIT					2,000	
DEATH BENEFIT					2,000	
OTHER NECESSARY EXPENSES (PER DAY)					25	
<b>Motor Vehicle Law Enforcement (MVLE) Fee. \$10 Per Registered Vehicle</b>						<b>\$10.00</b>
<b>Payment Plan Fee</b>						<b>\$10.00</b>
<b>Amended Premium</b>		<b>\$4,309.01</b>		<b>Premium</b>	<b>\$4,309.00</b>	
<b>Coverage Effective Date:</b>						
<b>Annual Premium</b>						<b>\$4,309.00</b>
<b>DOWN PAYMENT</b>						<b>\$1,097.25</b>



AUTHORIZED SIGNATURE