NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES

INSURANCE CERTIFICATE -- FOR HIRE PASSENGER VEHICLE

339 MAYA ASSURANCE COMPANY

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

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:

> LORENZI, NANCY 715 SENECA AVE FL 1 **RIDGEWOOD NY 11385**

Policy Number

1-MA024779

Effective Date **Expiration Date**

01/27/2020 12:01 a.m.

01/23/2021 12:01 a.m.

(Not acceptable to obtain registration after 45 days from effective date.)

Applicable with respect to the following Motor Vehicle:

2020

HONDA

Year

Make

5FNYF6H53LB037893

Vehicle Identification Number

REPLACEMENT VEHICLE

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.

THIS ID CARD MUST BE CARRIED

IN THE INSURED VEHICLE FOR

WARNING: Any person who issues

or produces an ID card knowing that

an Owner's Policy of insurance is not in

PRODUCTION UPON DEMAND

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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Applicable with respect to the following Motor Vehicle:

2020

Year

HONDA Make

5FNYF6H53LB037893

Vehicle Identification Number

Seats

Expiration Date

01/23/2021

REPLACEMENT VEHICLE



THIS ID CARD MUST BE CARRIED IN THE INSURED VEHICLE FOR PRODUCTION UPON DEMAND

WARNING: 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

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 CERTFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

PRODUCER			INSURER AFFORDING COVERAGE					
KS BILLING & ASSOCIAT 881 CYPRESS AVENUE RIDGEWOOD, NY 11358			MAYA ASSURANCE COMPANY 45-18 COURT SQUARE, SUITE 300 LONG ISLAND CITY, NEW YORK 11101					
INSURED								
LORENZI,NANCY 715 SENECA AVE FL 1 RIDGEWOOD, NY 11385								
AUTOMOBILE LIABILITY	POLICY NUM	IBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE				
SCHEDULED AUTO	1-MA024779	9	01-23-2020 (12:01 AM)	01-23-2021 (12:01 AM)				
COVERAGES		LIMITS OF LIABILITY						
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 INJ PROTECTION	URY	\$50,000						
ADDITIONAL PIP		\$150,000						
SUPPLEMENTARY UNINSURED MOTORIST		EACH PERSON						
		EACH A	EACH ACCIDENT					
AGGREGATE NO-FAULT								

DESCRIPTION OF REGISTERED OWNED VEHICLE(S)

2020 HONDA 5FNYF6H53LB03789	3
CERTIFICATE HOLDER	CANCELLATION
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.
	DISCLAIMER

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
Amendatory Declarations ...

POLI	CY NO.		1-N	1A024779 CON	MERC	JAL	AUTOMOBILE				
NAMED INSURED AND ADDRESS					PRODUCERS NAME AND ADDRESS						
715 SENECA AVE FL 1					KS BILLING & ASSOCIATES INC 2 881 CYPRESS AVENUE RIDGEWOOD, NY 11358						
POLIC	Y PERIOD)	Eff	fective 01-23-2020	(12:01 AM) - Expires: 01-23-2021 (12:01 AM)						
UNIT #	MODEL YEAR	MAKE		IDENTIFICATION NUMBER	CLASS TEF			TERR	PLATE #		
1	2020	HONDA		5FNYF6H53LB03	7893						
Driver	1 NANCY	LORENZI									
Radio	Base Na	ame: EINUNDZ	ZWA	NZIG-NY,LLC							
COVE	RAGES				SYME	BOL	LIMITS OF LIA	BILITY	Y PREMIUM		
BODII	Y INJURY	LIABILITY			7		100,000 EACH			\$2,165.00	
							300,000 EACH				
PROP	ERTY DAN	MAGE LIABILIT	Υ		7		10,000 EACH ACCIDENT			\$527.00	
UNINS	SURED MC	TORIST			6		25,000 EACH PERSON			\$60.00	
							50,000 EACH	ACCIDEN	1T		
SUPPPLEMENTARY UNINSURED/UNDERINSURED MOTORISTS						EACH PERS		\$0.00			
							EACH ACCID	DENT			
PERS	ONAL INJ	URY PROTECT	TION		SYME	BOL	COVERAGE LIM	ITS		PREMIUM	
MANDATORY PERSONAL INJURY PROTECTION			5		50,000			\$824.00			
OPTIO	ONAL BASI	C ECONOMIC	LOS	S							
ADDITIONAL PERSONAL INJURY PROTECTION			5		150,000			\$329.00			
AC	GREGATE	E NO-FAULT					200,000				
M	M MUMIXA	ONTHLY WOR	K LC	OSS BENEFIT			2,000				
DE	EATH BENI	EFIT					2,000				
0	THER NEC	ESSARY EXPE	NSE	ES (PER DAY)			25				
Motor	Vehicle La	aw Enforceme	nt (N	/IVLE) Fee. \$10 Pe	r Regis	stere	d Vehicle			\$10.00	
Paym	ent Plan F	ee								\$10.00	
Am	ended Pre	mium		\$3,903.94		Pre	mium			\$3,905.00	
Cover	age Effect	ive Date: 01/2	27/2	020							
Annua	al Premium	ı								\$3,905.00	
DOWI	N PAYMEN	IT								\$810.79	

CERSING

AUTHORIZED SIGNATURE

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> LORENZI, NANCY 715 SENECA AVE FL 1 RIDGEWOOD NY 11385

Policy Number

1-MA024779

Effective Date

Expiration Date

01/23/2020

01/23/2021

12:01 a.m. 12:01 a.m.

(Not acceptable to obtain registration after 45 days from effective date.)

Applicable with respect to the following Motor Vehicle:

HONDA Make

Year

2HKRW2H59HH674793

Vehicle Identification Number

5 Seats

THIS ID CARD MUST BE CARRIED IN THE INSURED VEHICLE FOR PRODUCTION UPON DEMAND

WARNING: 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.

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> LORENZI, NANCY 715 SENECA AVE FL 1 **RIDGEWOOD NY 11385**

Policy Number

1-MA024779

Effective Date

Expiration Date 01/23/2021

01/23/2020 12:01 a.m.

12:01 a.m.

(Not acceptable to obtain registration after 45 days from effective date.)

Applicable with respect to the following Motor Vehicle:

2017 Year

HONDA Make

2HKRW2H59HH674793

Vehicle Identification Number

5 Seats THIS ID CARD MUST BE CARRIED IN THE INSURED VEHICLE FOR PRODUCTION UPON DEMAND

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		INSURER AFFORDING COVERAGE					
KS BILLING & ASSOCIATES INC 2 881 CYPRESS AVENUE RIDGEWOOD, NY 11358		MAYA ASSURANCE COMPANY 45-18 COURT SQUARE, SUITE 300 LONG ISLAND CITY, NEW YORK 11101					
NSURED							
LORENZI,NANCY 715 SENECA AVE FL 1 RIDGEWOOD, NY 11385							
AUTOMOBILE LIABILITY POLICY NU	MBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE				
SCHEDULED AUTO 1-MA0247	79	01-23-2020 (12:01 AM)					
COVERAGES	LIMITS OF LIABI	LIMITS OF LIABILITY					
BODILY INJURY	\$ 100,000 EA	\$ 100,000 EACH PERSON					
	\$300,000 EACH	\$300,000 EACH ACCIDENT					
PROPERTY DAMAGE	\$10,000 EACH A	\$10,000 EACH ACCIDENT					
STATUTORY UNINSURED MOTORIST	\$25,000 EACH PERSON						
	\$50,000 EACH ACCIDENT						
MANDATORY PERSONAL INJURY PROTECTION	\$50,000	\$50,000					
ADDITIONAL PIP	\$150,000						
SUPPLEMENTARY UNINSURED MOTORIST	EACH PERSON						
	EACH A	CCIDENT					
AGGREGATE NO-FAULT							

DESCRIPTION OF REGISTERED OWNED VEHICLE(S)

2017 HONDA 2HKRW2H59HH6747	93
CERTIFICATE HOLDER	CANCELLATION
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.
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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

POLI	CY NO.		1-MA024779 COI	MERC	CIAL	AUTOMOB	ILE			
NAMED INSURED AND ADDRESS				PRODUCERS NAME AND ADDRESS						
LORENZI,NANCY 715 SENECA AVE FL 1 RIDGEWOOD, NY 11385				KS BILLING & ASSOCIATES INC 2 881 CYPRESS AVENUE RIDGEWOOD, NY 11358						
POLIC	CY PERIOD		Effective 01-23-2020	(12:01 AM) - Expires: 01-23-2021 (12:01 AM)						
UNIT #	MODEL YEAR	MAKE IDENTIFICATION NUMBER			CLASS TERF			ERR	PLATE #	
1	2017	HONDA	2HKRW2H59HH6	74793	74793			T754	T754769C	
Driver	1 NANCY	LORENZI								
Radio	Base Na	me: EINUNDZ	WANZIG-NY,LLC							
COVE	RAGES			SYME	BOL	LIMITS	OF LIABIL	ITY		PREMIUM
BODII	Y INJURY	LIABILITY		7		100,000 EACH PERSON			\$2,143.00	
						300,000	EACH AC	CIDEN	IT	
PROF	ERTY DAN	MAGE LIABILIT	Υ	7		10,000 EACH ACCIDENT			IT	\$522.00
UNINS	SURED MC	TORIST		6		25,000 EACH PERSON				\$60.00
						50,000 EACH ACCIDENT				
SUPPPLEMENTARY UNINSURED/UNDERINSURED MOTORISTS						EACH PERSON				\$0.00
						EACH	ACCIDEN.	Т		
PERS	ONAL INJU	JRY PROTECT	TON	SYME	BOL	COVERAG	E LIMITS			PREMIUM
MANDATORY PERSONAL INJURY PROTECTION			5		50,000				\$815.00	
OPTIO	DNAL BASI	C ECONOMIC	LOSS							
ADDITIONAL PERSONAL INJURY PROTECTION			5		150,000				\$326.00	
AC	GREGATE	NO-FAULT				200,000				
MAXIMUM MONTHLY WORK LOSS BENEFIT						2,000				
DEATH BENEFIT						2,000				
0	THER NEC	ESSARY EXPE	NSES (PER DAY)			25				
Motor	Vehicle La	aw Enforceme	nt (MVLE) Fee. \$10 Pe	r Regis	stere	d Vehicle				\$10.00
Paym	ent Plan Fe	ee								\$10.00
Amended Premium \$3,865.99 Premium								\$3,866.00		
Cover	age Effect	ive Date:								
Annua	al Premium	l								\$3,866.00
NOO	DOWN PAYMENT							\$793.20		

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AUTHORIZED SIGNATURE

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