

NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES

INSURANCE CERTIFICATE -- FOR HIRE PASSENGER VEHICLE

036 AMERICAN TRANSIT INSURANCE CO

Name & Address of Issuer **American Transit Ins Co**
One MetroTech Center - 7th and 8th fl
Brooklyn NY 11201

Policy Number

B708025

Effective Date

03/01/2020

12:01 a.m.

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

Expiration Date

03/01/2021

12:01 a.m.

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:

RAMGOBIN,SURESH
15501 LINDEN BLVD
JAMAICA NY 11434

Applicable with respect to the following Motor Vehicle:

2010

Year

TOYOT

Make

5TDDK4CCXAS031702

Vehicle Identification Number

7

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.

FH-1

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FAX: Scannable 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 scannable bar code will be retained
3. A faxed ID card must be replaced with a scannable ID card within 14 days of the effective date.
4. DMV will not accept a faxed ID card without a scannable 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.

PRODUCER	INSURER AFFORDING COVERAGE
K.S. BILLING & ASSOC. INC 118-12 ATLANTIC AVENUE RICHMOND HILL, NY 11419	AMERICAN TRANSIT INSURANCE COMPANY One MetroTech Center - 7th and 8th floors Brooklyn, New York 11201 212 857-8200 1 800 683-ATIC

INSURED
RAMGOBIN,SURESH 15501 LINDEN BLVD JAMAICA, NY 11434

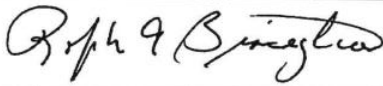
AUTOMOBILE LIABILITY	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE
SCHEDULED AUTO	B708025	03/01/2020 (12:01 AM)	03/01/2021 (12:01 AM)

COVERAGES	LIMITS OF LIABILITY	
BODILY INJURY	\$100,000	EACH PERSON
	\$300,000	EACH ACCIDENT
PROPERTY DAMAGE	\$10,000	EACH ACCIDENT
UNINSURED MOTORIST		EACH PERSON EACH ACCIDENT
SUPPLEMENTAL UNINSURED/UNDERINSURED MOTORIST	\$25,000	EACH PERSON
	\$50,000	EACH ACCIDENT
MANDATORY PERSONAL INJURY PROTECTION	\$50,000	
ADDITIONAL PIP	\$150,000	
AGGREGATE NO-FAULT	\$200,000	
COMPREHENSIVE COLLISION		

DESCRIPTION OF REGISTERED OWNED VEHICLE(S)
2010 TOYOTA SIENNA VIN: 5TDDK4CCXAS031702 Effective: 03/01/2020

CERTIFICATE HOLDER	CANCELLATION
NYC TAXI AND LIMOUSINE COMMISSION 31-00 47 AVE. 3FL. 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 30 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 REPRESENTATIVE



AMERICAN TRANSIT INSURANCE COMPANY (036)
ONE METROTECH CENTER - 7TH AND 8TH FLOORS, BROOKLYN, NEW YORK 11201
 (212) 857-8200 1-800-683-ATIC

DECLARATIONS
AUTOMOBILE INSURANCE -NEW BUSINESS (NEW YORK)

DATE OF ISSUE 02/18/2020

POLICY NUMBER B708025

(NAMED INSURED AND ADDRESS)

(PRODUCERS NAME AND ADDRESS)

RAMGOBIN,SURESH
 15501 LINDEN BLVD
 JAMAICA, NY 11434

K.S. BILLING & ASSOC. INC
 118-12 ATLANTIC AVENUE
 RICHMOND HILL, NY 11419

POLICY PERIOD 03/01/2020 12:01 AM - 03/01/2021 12:01 AM

THE OWNED AUTOMOBILE(S) WILL BE GARAGED AT THE ADDRESS DESIGNATED, UNLESS OTHERWISE STATED HEREIN.

GARAGE ADDRESS

REGISTERED OWNED VEHICLE

CAR	MODEL YEAR	TRADE NAME	IDENTIFICATION NUMBER	CLASS	TERR.	MEDALLION #	PLATE #
TOYO	2010	TOYOT	5TDDK4CCXAS031702	CS	18		
DRIVER 1.	SURESH RAMGOBIN			DRIVER 4.			
DRIVER 2.				DRIVER 5.			
DRIVER 3.							

THE INSURANCE AFFORDED IS ONLY WITH RESPECT TO SUCH OF THE FOLLOWING COVERAGES AS ARE INDICATED BY SPECIFIC PREMIUM CHARGE OR CHARGES. THE LIMIT OF THE COMPANY'S LIABILITY AGAINST EACH SUCH COVERAGE SHALL BE STATED HEREIN, SUBJECT TO ALL THE TERMS OF THIS POLICY HAVING REFERENCE THERETO.

PREMIUMS(ALL PREMIUMS SHOWN ARE FULL POLICY PREMIUMS)

COVERAGES	SYMBOL	LIMITS OF LIABILITY		PREMIUM
BODILY INJURY LIABILITY	7	\$100,000	EACH PERSON	\$3,379.00
		\$300,000	EACH ACCIDENT	
PROPERTY DAMAGE LIABILITY	7	\$10,000	EACH ACCIDENT	\$453.00
UNINSURED MOTORIST	7		EACH PERSON	\$0.00
			EACH ACCIDENT	
SUPPLEMENTARY UNINSURED/UNDERINSURED MOTORIST.	7	\$25,000	EACH PERSON	\$111.00
		\$50,000	EACH ACCIDENT	
PERSONAL INJURY PROTECTION		COVERAGE LIMITS		PREMIUM
MANDATORY PERSONAL INJURY PROTECTION	7	\$50,000		\$1,555.00
ADDITIONAL PERSONAL INJURY PROTECTION	7	\$150,000		\$774.00
OPTIONAL BASIC ECONOMIC LOSS				
AGGREGATE NO-FAULT		\$200,000		\$2,329.00
MAXIMUM MONTHLY WORK LOSS BENEFIT		\$2,000		
DEATH BENEFIT		\$2,000		
OTHER NECESSARY EXPENSES (PER DAY)		\$25		

* MAXIMUM PAYABLE UNDER SUM SHALL BE THE ABOVE NOTED SUM LIMITS REDUCED AND OFFSET BY MOTOR VEHICLES B.I. LIABILITY POLICY OR BOND PAYMENTS RECEIVED FROM OR ON BEHALF OF ANY OTHER PARTY INVOLVED IN THE ACCIDENT, SEE SUM ENDORSEMENTS HEREIN.

EFFECTIVE DATE	PR/SR FACTOR	ANNUAL PREMIUM	** AMENDED ANNUAL PREMIUM
03/01/2020	1.000	\$6,272.00	\$6,272.00

** AMENDED TOTAL INCLUDES ORIGINAL POLICY PREMIUM AND ALL PREMIUM AMENDMENTS THROUGH CURRENT DATE FOR TERM SHOWN.

DOWN PAYMENT	\$1,140.38	*MONTHLY PREMIUM THEREAFTER	\$570.18
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*** PLUS \$80.00 SERVICE CHARGE

* PLUS \$40.00 MONTHLY SERVICE CHARGE

THIS POLICY IS SUBJECT TO MOTOR VEHICLE LAW ENFORCEMENT ANNUAL FEE OF \$ 10.00 PER VEHICLE.

ENDORSEMENTS ATTACHED TO POLICY AT ISSUANCE

CA 00 01 10 13 CA 01 02 01 20 CA 01 12 12 15 CA 02 25 08 14 CA 22 32 11 18 CA 22 33 11 18 CA 31 07 11 18
 CA 31 13 11 18 IL U 004 09 03 IL 01 83 08 08 CA 22 60 04 92 CA 04 42 10 13 CA 99 27 01 87 ATIC 9-16
 CA 31 08 11 18

KSB002

COUNTER SIGNATURE

ATIC Single Car DEC - NY(10/16)

INSURED COPY

Ralph B. Brington



www.iiX.com
(800) 683-8553

DRIVER RECORD SERVICE REPORT FOR NEW YORK

404775245

0*

REPORT DATE	REQUESTOR	ACCT#	SEQUENCE#	BILL CODE	PAGE
02/11/2020		897063	748303742	000	1

LICENSEE NAME/ADDRESS		LICENSE NUMBER	LICENSE CLASS	STATUS
RAMGOBIN,SURESH 15501 LINDEN BLVD JAMAICA NY 11434		562963424	*E*	VALID
		DATE OF BIRTH	RESTRICTIONS	
		08/28/1960	CORRECTIVE LENSES	
ISSUED	EXPIRES	DRIVER DESCRIPTION		
	08/28/2027	Gender: M Height: 5-8 Eye Color: BROW		

REPORT PREPARED FOR	COMMENT
KS BILLING & ASSOCIATES INC 118-12 ATLANTIC AVE RICHMOND HILL, NY 11419-1120	

This report is generated for insurance purposes only and may not be used for any other purpose. iiX does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records. The use and dissemination of this report and the information contained therein must comply with your iiX agreement, the Fair Credit Reporting Act, the Driver's Privacy Protection Act, and any applicable state statute(s). The data in the report from the applicable state or service is provided through iiX "as-is", and any information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

MISCELLANEOUS AND STATE SPECIFIC INFORMATION

REQUESTED AS: VALID *E* DOB: 08282027 LICENSE: 562963424
PERS:01: ACTIVE *E* DESC: TAXI, PASSENGER, TRUCKS < 18K CORRECTIVE LENSES
LIC CLASS: *E*
LIC STATUS: VALID
LIC EXPIRES: 08/28/2027
LIC RESTR: CORRECTIVE LENSES
NAME ON LICENSE/ID: RAMGOBIN,SURESH
CLIENT ID#: 562963XXX
COUNTY: QUEENS
MI #: R01456 64306 22560X-XX
***** ACTIVITY *****
CLASS CHANGE: 10/09/1998 NEW: *D* OLD: PERMIT
CLASS CHANGE: 08/14/2006 NEW: *E* OLD: *D*
ACCIDENT PREVENTION COURSE COMPLETED ON: 10/20/2018
POINT REDUCTION ELIGIBLE FOR VIOLATIONS OCCURRING FROM 04/20/2017 - 10/20/2018
N/A - NON 19-A DRIVER OR COURSE PRIOR TO 01/01/94
NOTE Request match analysis: dl=Y, ln=?, fn=?, dob=?

DRIVING RECORD HISTORY

TYPE	VIOL/SUS	CONV/REI	DESCRIPTION	CODE	POINTS
VIOL	08/21/2015	06/20/2017	FLD TO YIELD ROW-PED LOCATION: QUEENS COUNTY, QUEENS SOUTH ADMINISTRATIVE ADJ. PENALTY: FINE- \$50 COM VEH: NO HAZMAT: NO		3

If you are an iiX Customer, and have questions contact:

iiX
1716 Briarcrest Dr Ste 200
Bryan, TX 77802
Telephone: 1-800-683-8553

Refer Consumer to:

iiX-FCRA
1716 Briarcrest Dr Ste 200
Bryan, TX, TX 77802
Telephone: 1-866-560-7015

*** END OF REPORT ***