## NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES

INSURANCE CERTIFICATE -- FOR HIRE PASSENGER VEHICLE

#### 326 HEREFORD INSURANCE COMPANY

Name & Address of Issuer HEREFORD INSURANCE COMPANY 36 - 01 43rd AVENUE 2nd FLOOR **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:

SINGH, SATWINDER **16 AMARA LANE** WESTAMPTON NY 08060 Policy Number

## CA303747-1

Effective Date

**Expiration Date** 

03/01/2020

03/01/2021

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

Applicable with respect to the following Motor Vehicle:

2018

**CHRYS** 

Year

Make

2C3CCAEG9JH145975

5

Vehicle Identification Number

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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03/01/2020

12:01 a.m.

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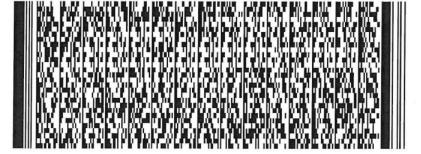
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FH-1

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

PRODUCER	INSURER AFFORDING COVERAGE	
K.S. BILLING & ASSOCIATES INC	HEREFORD INSURANCE COMPANY	
118-12 ATLANTIC AVE	36 - 01 43rd AVENUE, 2nd FLOOR	
RICHMOND HILL NY 11419	LONG ISLAND CITY, NY 11101	

INSURED

SINGH, SATWINDER

16 AMARA LANE

WESTAMPTON NY 08060

AUTOMOBILE LIABILITY	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE
SCHEDULED AUTO	CA303747-1	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	\$ 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

## DESCRIPTION OF REGISTERED OWNED VEHICLE(S)

2018 CHRYSLER 2C3CCAEG9JH145975

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, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

## 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.

The Deste

Authorized Representative

## HEREFORD INSURANCE COMPANY

36 - 01 43rd AVENUE, 2nd FLOOR

LONG ISLAND CITY, NY 11101

Tel: (718) 361-9191

Fax: (718)361-6243

PC	DLICY NO.	CA303747		COMM	ERCIAL AUT	OMOBILE INS	URANCE.	
N	AMED INSURE	D AND ADDRESS		PRODUCE	ERS NAME AN	ND ADDRESS		
SINGH,SATWINDER 16 AMARA LANE WESTAMPTON NY 08060		K.S. BILLING & ASSOCIATES INC 118- 12 ATLANTIC AVE RICHMOND HILL NY 11419						
POL	ICY PERIOD	Effective 03	3-01-2020 (12:01	AM) - Expires	s: 03-01-202	1 (12:01 AM)		
CASE	MODEL YEAR	MAKE	IDENTIFICATION	ON NUMBER	CLASS	TERR	UNIT#	PLATE #
1	2018	CHRYSLER	2C3CCAEG9J	H145975	9200	17		
DRIVE	R 1. SATWIND	ER SINGH		DRIVER 2.	l			
DRIVE	R 3.			DRIVER 4				
DRIVE	R 5.					T		
COVE	ERAGES			SYMBOL		LIMITS OF LIA	BILITY	PREMIUM
BODI	LY INJURY LIABI	LITY		7		100,000 EACH		2,745.00
						300,000 EACH	ACCIDENT	
PROF	PERTY DAMAGE	LIABILITY		7		10,000 EACH	ACCIDENT	668.00
UNINSURED MOTORIST		7		25,000 EACH PERSON		60.00		
						50,000 EACH	ACCIDENT	
SUPF	PLEMENTARY UN	IINSUREDJUNDERIN	SURED MOTORIST			EACH	PERSON	
				F.		EACH	ACCIDENT	
PERS	ONAL INJURY P	ROTECTION			COVER	AGE LIMITS		PREMIUM
MANDATORY PERSONAL INJURY PROTECTION		7		50,000		1,045.00		
OPTIO	ONAL BASIC ECC	NOMIC LOSS						
ADDITIONAL PERSONAL INJURY PROTECTION		7		150,000		418.00		
AGGREGATE NO-FAULT				200,000				
MAXIMUM MONTHLY WORK LOSS BENEFIT				2,000				
DEATH BENEFIT				2,000				
C	THER NECESSA	RY EXPENSES (PER	R DAY)			25		
Motor \	Vehicle Law Enfo	rcement (MVLE) Fe	e. \$10 Per Registere	d Vehicle				\$10
Amended Premium \$		4936.00	Pre	mium		\$ 4936.00		
					Ins	tallment Fee	1	\$ 180.00
					Anı	nual Premiu	m	\$ 5116.00
					DOV	VN PAYMENT		\$ 1234.01
		ENDORS CA 22 32(11/13	EMENTS ATTACH	ED TO POLICY (11/13)	CA 31 13 (C		HIC- CAL(03/1	7)

NOTE: The following notice is required to be shown in the UM/SUM section of the declarations, or in another part of the declarations and referred to by an asterisk(\*) in this section if SUM coverage is purchased:

The maximum amount payable under SUM coverage shall be the policy's SUM limits, reduced and thus offset by motor vehicle bodily injury liability insurance policy or bond payments received from, or on behalf of, any negligent party involved in the accident, as specified in the SUM endorsement.

**AUTHORIZED SIGNATURE** 

10830



# HEREFORD INSURANCE COMPANY

Est. 1982 "Licensed by the New York State Insurance Department 36-01 43rd Avenue "Long Island City, NY 11101
Tel: (718) 361-9191 "Fax: (718)361-6243 WWW.HEREFORDINSURANCE.COM

## TENTATIVE RENEWAL QUOTE INFORMATION\* Wednesday, January 29,2020

Named Insured

Broker of Record

SINGH, SATWINDER

16 AMARA LANE

WESTAMPTON NY 08060

K.S. BILLING & ASSOCIATES INC 118-12 ATLANTIC AVE RICHMOND HILL NY 11419

(Current - Discounts / Surcharges)
Current Symbol = HK116052 \$4,936.00

(Proposed - Discounts / Surcharges)

Proposed Renewal Symbol = HK116052 \$4,936.00

DISCOUNTS	SURCHARGES	DISCOUNTS	SURCHARGES		
1. Accident Prevention Course	1:	1. Accident Prevention Course	1.		
2. Safe Driver Discount	2.	2. Safe Driver Discount	2.		
3.	3.	3.	3.		
4.	4.	4.	4.		
5. Loss Control	5.	5. Loss Control	5.		
6.	6.	6.	6.		
7.	7.	7.	7.		
8.	8.	8.	8.		
9.	9.	9.	9.		
10.	10.	10.	10.		

Re: Upcoming Renewal / Policy CA303747

Hereford Insurance Company is pleased to inform you of your policy renewal effective March 1st, 2020 expiring on March 1st, 2021. Please remit payment of your renewal deposit to your broker's office, along with providing all required documents listed below prior to March 1st, 2020.

Option 1 Full Payment - No Installment Fees !!!

Option 2 40 % Deposit = \$1,974.40 = 2 Payments of \$1,480.80 + \$45 fee per installment (\$20 for Medallion)

Option 3 25 % Deposit = \$1,234.00 = 9 Payments of \$411.33 + \$20 fee per installment (\$10 for Medallion)

Option 4 20 % Deposit = \$987.20 = 9 Payments of \$438.76 + \$25 fee per installment (\$10 for Medallion)

Option 5 15 % Deposit = \$740.40 = 9 Payments of \$466.18 + \$30 fee per installment (\$15 for Medallion)

\$10 Motor Vehicle Law Enforcement (MVLE) Fee will be charged per registered vehicle.

Documents Required with Renewal			
1.			
2.			
3.			

### Radio Base Of Affiliation

Radio Base As With TLC: DIAL 7 CAR & LIMOUSINE SERVICE INC.
Radio Base As With HIC: DIAL 7 CAR & LIMOUSINE SERVICE INC. DBA
TEL AVIV
For Broker Use ONLY

<sup>\*</sup> IMPORTANT: This is a tentative renewal quote. HIC reserves the right to adjust this quote. In some instances policy changes processed after the date of this letter may warrant an adjustment which may result in an increase in premium.