



# CERTIFICATE OF LIABILITY INSURANCE

Phone: (800)551-8832

DATE (MM/DD/YYYY)

02/21/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	GM Premier Insurance Services LLC 439 Lakeside Dr Vallejo, CA 94589 License #: 6000416	CONTACT NAME: MaryGrace Valdez PHONE (A/C, No. Ext): (707)424-6020 FAX (A/C, No): (707)422-6001 E-MAIL ADDRESS: grace@gmpremierins.com
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A: Everspan Indemnity Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

## COVERS

CERTIFICATE NUMBER: 00002412-8174

REVISION NUMBER: 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE <input type="checkbox"/> OCCUR			CW3EVE-000281-01	01/29/2024	01/29/2025	EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						
	ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY						
	AUTOMOBILE LIABILITY  EXCESS LIAB <input type="checkbox"/> OCCUR CLAIMS-MADE						
	DED <input type="checkbox"/> RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						
	Y / N <input type="checkbox"/> N / A						
A MOTOR CARGO			CW4215205-00	01/29/2024	01/29/2025	\$ 100000	

## DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

2023 FORD PICKUP: 1FT8W3DTXPED31642

2019 TRAILER: 16V6X3522K6097891

## CERTIFICATE HOLDER

## CANCELLATION

DAT Solutions  
8405 SW Nimbus Ave  
Beaverton, OR 97008

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

(GCV)



# APPORTIONED REGISTRATION CAB CARD

STATE OF CALIFORNIA

DEPARTMENT OF MOTOR VEHICLES

P.O. Box 932320 MS H160 Sacramento, CA 94232-3200 (916) 657-7971

OPERATOR/LESSEE/REGISTRANT  
GETTING IT TRANSPORTATTION LLC  
8509 NINE IRON DR  
BAKERSFIELD, CA 93312

OWNER/LESSOR

ISSUED: 01/17/2024	EFFECTIVE: 01/12/2024	EXPIRES: 01/31/2025
Account 137942	Fleet 001	Supp 0000
TYPE OF CARRIER FOR HIRE		MX
Plate CP94755	Unit 24	Yr-Model 2023
Unladen Wt 07402	Axles 02	Fuel Type D
VIN 1FT8W3DTXPED31642	Seats	Body Type PK

THE VEHICLE DESCRIBED HEREIN HAS BEEN APPORTIONED BETWEEN THE STATE OF CALIFORNIA AND THE JURISDICTIONS SHOWN BELOW. Canadian Provinces are shown in kilograms, Quebec is shown in axles; all other jurisdictions are shown in pounds. Buses may be identified by the number of seats. No jurisdictions are to be listed after the row of asterisks, or the card is invalid.

AL 40000	AB 18144	AZ 40000	AR 40000	BC 18144
CA 40000	CO 40000	CT 40000	DE 40000	DC 40000
FL 40000	GA 40000	ID 40000	IL 40000	IN 40000
IA 40000	KS 40000	KY 40000	LA 40000	ME 40000
MB 18144	MD 40000	MA 40000	MI 40000	MN 40000
MS 40000	MO 40000	MT 40000	NE 40000	NV 40000
NL 18144	NB 18144	NH 40000	NJ 40000	NM 40000
NY 40000	NC 40000	ND 40000	NS 18144	OH 40000
OK 40000	ON 18144	OR 40000	PA 40000	PE 18144
QC 2 AXL	RI 40000	SK 18144	SC 40000	SD 40000
TN 40000	TX 40000	UT 40000	VT 40000	VA 40000
WA 40000	WV 40000	WI 40000	WY 40000	*** *****
*****	*****	*****	*****	*** *****

This apportioned Cab Card must be carried in the vehicle at all times. All fees are due to the State of California on or before the expiration date listed above. The cab card is non-transferable and must be surrendered with the license plate(s) if the vehicle is deleted from the fleet.

CARRIER RESPONSIBLE FOR SAFETY: USDOT 4129840  
GETTING IT TRANSPORTATION LLC  
8509 NINE IRON DR  
BAKERSFIELD, CA 93312

H730117241B0005





## VEHICLE REGISTRATION INQUIRY REPORT

\*\*\*\*\*  
Notice: DMV info use subject to DMV Commercial Requester Account agreement  
\*\*\*\*\*

Reference: RL115891167

Date: 08/26/2024

Requested: 1FT8W3DTXPED31642

Time: 04:00 PM PDT

Reason: VEHICLE RENEWAL

User ID: BJ (USERID=10299)

Note: 1FT8W3DTXPED31642

## REGISTERED OWNER

NAME: MEZA GUADALUPE

ADDRESS:

COUNTY:

ZIP CODE:

ALLOC COUNTY:

## LEGAL OWNER (LIENHOLDER) INFO

NAME: SAN JOAQUIN POWER ECU

ELT

ADDRESS: 1080 W SHAW AVE STE 109

FRESNO

ZIP CODE: 93711

## VEHICLE INFO

EXPIRES: 08/31/24

VLF CLASS: WR

VIN: 1FT8W3DTXPED31642

MOTIVE POWER: D

LICENSE: 34059V3

ENGINE NO:

YR MODEL: 2023

WEIGHT:

YR SOLD: 2023

AXLES: 2

\* YEAR:

UNLADEN WGT: 7402

BODY TYPE: 4C

VEH TYPE: 32

EQUIP NO:

HULL NO:

MAKE: FORD

SUB PLATE:

CYLINDERS:

HULL MATERIAL:

PFR ACCT #:

TYPE: Commercial (31)

Date of latest Registration Card Issuance: 08/01/2024

Date of latest Ownership Certificate Issuance: 08/01/2024

## RECORD STATUS

08/08/24 SMOG DUE 08/31/25

05/21/24 VEH REG SUSPENDED EFF: 05/21/2024

## ODOMETER NOTICE

08/24/2023-ODOMETER: 27 MILES ACTUAL MILEAGE

TOTAL RECORDS 002

## REGISTERED OWNER

NAME: GETTING IT TRANSPORTATTION

LLC

ADDRESS:

COUNTY:

ZIP CODE:

ALLOC COUNTY:

## LEGAL OWNER (LIENHOLDER) INFO

NAME:

ADDRESS:

ZIP CODE:

----- VEHICLE INFO -----  
EXPIRES: 01/31/25 VLF CLASS: MA  
VIN: 1FT8W3DTXPED31642 MOTIVE POWER: D  
LICENSE: CP94755 ENGINE NO:  
YR MODEL: 2023 WEIGHT: F - 35,001-40,000  
YR SOLD:  
\* YEAR: 2024 AXLES: 2  
BODY TYPE: PK UNLADEN WGT: 7402  
EQUIP NO: 24 VEH TYPE: 51  
MAKE: FORD HULL NO:  
CYLINDERS: SUB PLATE:  
HULL MATERIAL:  
PFR ACCT #:  
TYPE: Commercial - IRP ID (83)

Date of latest Registration Card Issuance: 01/17/2024

Date of latest Ownership Certificate Issuance:

----- RECORD STATUS -----

01/19/24 MA CLASS VEHICLE VALUE: 0104674

01/12/24 FHVUT EXEMPT

THIS RECORD DOES NOT REFLECT OWNERSHIP INFORMATION - USE VIN INQUIRY

----- END of DMV PRINTOUT -----

===== Fee Calculation Report =====

\*\*\*\*\* NOTICE \*\*\*\*\*

FEE ESTIMATE based on DMV-supplied data and disregards any title transfer taking place or other specific credits or charges.

^^^

-----  
Time Period 1/31/2024 - 1/31/2025  
CURRENT REGISTRATION \$ 71  
CURRENT CHP \$ 32  
CURRENT WEIGHT FEE \$ 257  
CURRENT VLF \$ 478  
CURRENT COUNTY SAFE FEE \$ 1  
CURRENT SMOG ABATEMENT FEE \$ 2  
CURRENT FINGERPRINT ID FEE \$ 2  
CURRENT SMOG HPR FEE \$ 4  
ORIGINAL SMOG ABATEMENT \$ 6  
ALT FUEL/TECH SMOG FEE \$ 8  
CURRENT VALLEY AIR QUALITY \$ 18  
CURRENT SAN JOAQUIN VALLEY AIR POLLUTION CONTROL  
DISTRICT \$ 1  
ALTERNATIVE FUEL RENEW FEE \$ 3  
CURRENT TRANSPORTATION IMPROVEMENT FEE \$ 227  
-----  
Subtotal \$ 1110  
-----

-----  
ESTIMATED FEES DUE BY 08/31/24 \$ 1110  
ESTIMATED FEES DUE AFTER 08/31/24 (+\$94) \$ 1204  
ESTIMATED FEES DUE AFTER 09/10/24 (+\$177) \$ 1287

**ESTIMATED FEES DUE AFTER 09/30/24 (+\$501) \$ 1611**

**----- End of Fee Calculation Report -----**

DISCLAIMER: AVRS is providing the above information at the request of its customer. Such information is provided to AVRS by the California Department of Motor Vehicles (DMV) from its database as of the date shown. AVRS acquires the information and, in turn, provides such information to the customer in a readable format. The information is based on DMV data that AVRS has acquired from the DMV on the date shown, but which by its nature is dynamic and subject to rapid and/or abrupt changes over time. AVRS uses its best efforts to acquire and decode the information from the DMV database. However, AVRS assumes no responsibility for the accuracy of the information acquired from the DMV.

# Loss Run (Page 1)



Policy Number: CW3EVE-000281-01 01/29/2024  
Insured Name: Getting It Transportation LLC 01/29/2025

Grand Total	Expense Paid	Reserves	Total
TOTAL	0	0	0

COVER WHALE INSURANCE SOLUTIONS

Valued as of: 01/01/25  
Report Run Date: 01/16/25

# Loss Run (Page 1)



Policy Number: CW4215205-00 01/29/2024  
Insured Name: Getting It Transportation LLC 01/29/2025

Grand Total	Expense Paid	Reserves	Total
TOTAL	0	0	0

COVER WHALE INSURANCE SOLUTIONS

Valued as of: 01/01/25  
Report Run Date: 01/16/25