



CLAIMS ACTIVITY REPORT

Motor Truck Cargo

carrier	AP HAULS LLC
Policy Number	MTC0697187-00
Effective	04/05/2023
Expiration	04/05/2024
Carrier	Zurich American Insurance Company
As of	November 06, 2025

Status	NO ACTIVITY
Date of Loss	n/a
Claim Number	n/a
Incurred	n/a



Individual Risk Experience as of 09/30/2025

Policy Number: TRM044993 **Effective Date:** 05/11/2022

Named Insured: AP HAULS LLC **Expiration Date:** 05/11/2023

Company: CONTINENTAL DIVIDE INSURANCE COMPANY

Policy Effective Year: 2022 *** The policy was canceled on 12/16/2022 ***

Line of Business	Date of Loss	Total Paid	Open/Closed	Claim Number	Accident Description
AUTO COLLISION					
	12/01/2022	579	CLOSED	00599533	DAMAGE IN LOADING OR UNLOADING
TOTAL: AUTO COLLISION		579			
AUTO COMPREHENSIVE					
TOTAL: AUTO COMPREHENSIVE		0			
AUTO LIABILITY					
TOTAL: AUTO LIABILITY		0			
INLAND MARINE					
TOTAL: INLAND MARINE		0			
POLICY YEAR TOTAL:		579	0 *		

*Open Reserve, if any

GRAND TOTAL:	579	0 *
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USLI
DEVON PARK SPECIALTY INSURANCE
888-523-5545
Fax 610-687-9398

Date: 11/3/2025
To: MAXIMUM
Attn: Skylar Perry
Fax#: 312 559 0930
RE: LOSS RUN REQUEST
INSURED: AP HAULS LLC

Policy# Eff Dates	Claim#	D/L	Insured Name	Incurred	PD Loss	PD Exp	O/S Loss Reserve	O/S Exp Reserve	Status	Alleged Loss Description
GLI228503 12/16/2023 - 12/16/2024			AP HAULS LLC	No Claims Found						
GLI228503A 12/16/2024 - 12/16/2025			AP HAULS LLC	No Claims Found						



**P.O. Box 94739
Cleveland, OH 44101**

**Telephone: 800-444-4487
progressive.com**

Date: November 3, 2025

State: FL

Policy #: 02119838-1

Insured: AP HAULS LLC

DBA:

Coverage Dates: 05/11/2020 - 05/11/2022

Re: Loss History

There have been no losses on the policy term(s)/date(s) listed

There have been losses on the policy term(s)/date(s) listed

If you have any questions regarding your loss history, please contact us at:
1-800-444-4487

We comply with the state insurance laws that regulate the provision of loss history information. Unless required by law we provide a list of claims and the paid amounts only.

Thank you,
Commercial Lines Customer Care

Date of Loss	Claim Number	Claim Status	Coverage	Pay Out	Subrogation Amount	Vehicle Make/Model	Driver
2022-04-27	22-2532743	CLSD	COMP	\$186.77		13 FRHT 125	AUSTIN, PETER E.
2020-07-31	20-2995580	CLSD	COMP	\$714.28			



**P.O. Box 94739
Cleveland, OH 44101**

**Telephone: 800-444-4487
progressive.com**

Date: November 3, 2025

State: FL

Policy #: 964290407

Insured: AP HAULS LLC

DBA:

Coverage Dates: 12/16/2022 - 12/16/2023

Re: Loss History

There have been no losses on the policy term(s)/date(s) listed

There have been losses on the policy term(s)/date(s) listed

If you have any questions regarding your loss history, please contact us at:
1-800-444-4487

We comply with the state insurance laws that regulate the provision of loss history information. Unless required by law we provide a list of claims and the paid amounts only.

Thank you,
Commercial Lines Customer Care

Date of Loss	Claim Number	Claim Status	Coverage	Pay Out	Subrogation Amount	Vehicle Make/Model	Driver
2023-01-06	23-6103773	CLSD	COMP	\$187.78		13 FREIGHTLINER CASCADIA 125	AUSTIN, PETER



Policy Loss Report

AP HAULS LLC
IMP F273512
INFORCE

12/16/2024 to 12/16/2025 1 Claim Count								\$0.00	Total for Policy Period	
Policy Period	Claim Number	Loss Date	Loss State	Report Date	Claimant Name	Claim Adjuster Name	Loss Description	Claim Status	Total Incurred	Total Incurred Details
12/16/2024 to 12/16/2025	A00728522	06/03/2025	FL	06/11/2025	AP HAULS LLC	ANDREW SATTERFIELD	MOTOR TRUCK CARGO: FULL TRUCKLOAD LOSS. PRODUCT WAS OUT OF TEMPERATURE.	Closed	\$0.00	
1 Total Claim Count								\$0.00	Total For Policy	



Data as of:	4th November 2025
Named Insured:	AP Hauls LLC
Policy No.:	KPB23PW03-0070
Effective Dates:	7th March 2024 to 16th December 2024

Deductible Wording/ Structure	
Auto Physical Damage USD1,000 each and every loss each and every unit but minimum USD5,000 each and every loss each and every unit in respect of units with sum insured USD100,000 or greater	

****ALL INDEMNITY RESERVES ARE NET OF THE DEDUCTIBLE****

Named Insured	Policy Number	Effective Date	Deductible Wording / Structure	Claim Reference	Coverage Type	Claim Status	Date of loss	Date Claim Reported	Location	Description	Indemnity Reserves	Fee Reserve	Paid Indemnity	Paid Fees	Subrogation	Salvage	Total Incurred	Claim Handler	Loss Run Date
AP Hauls LLC	KPB23PW03-0070	07-Mar-2024	\$1,000.00		No Reported Auto Physical Damage Losses						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Vanguard	04-Nov-2025

This document contains confidential information and is intended for the insured or authorised personnel only. If you have received this document by mistake, please discard and notify us immediately.

Disclaimer: Note claims may be handled by third parties appointed by underwriters and KP Brokers trading as Transportation Agency Partners "TAP", the program manager. If you have any questions or concerns regarding information contained herein then please contact claims@kpbrokers.com.



Data as of:	5th November 2025
Named Insured:	AP Hauls LLC
Policy No.:	KPB-HDIWLU-20240125
Effective Dates:	16th December 2024 to 15th December 2025

Deductible Wording / Structure	
Auto Physical Damage USD 2,500 Graduated deductible, each and every loss, each and every automobile form USD 2,500 to USD 5,000 dependent on unit value	

****ALL INDEMNITY RESERVES ARE NET OF THE DEDUCTIBLE****

Named Insured	Policy Number	Effective Date	Deductible Wording / Structure	Claim Reference	Coverage Type	Claim Status	Date of loss	Date Claim Reported	Location	Description	Indemnity Reserves	Fee Reserve	Paid Indemnity	Paid Fees	Subrogation	Salvage	Total Incurred	Claim Handler	Loss Run Date
AP Hauls LLC	KPB-HDIWLU-20240125	16-Dec-2024	\$2,500.00		No Reported Auto Physical Damage Losses						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	TAP	05-Nov-2025

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Data as of:	4th November 2025
Named Insured:	AP Hauls LLC
Policy No.:	KPB23PW03-0070
Effective Dates:	7th March 2024 to 16th December 2024

Deductible Wording/ Structure	
Auto Physical Damage USD1,000 each and every loss each and every unit but minimum USD5,000 each and every loss each and every unit in respect of units with sum insured USD100,000 or greater	

****ALL INDEMNITY RESERVES ARE NET OF THE DEDUCTIBLE****

Named Insured	Policy Number	Effective Date	Deductible Wording / Structure	Claim Reference	Coverage Type	Claim Status	Date of loss	Date Claim Reported	Location	Description	Indemnity Reserves	Fee Reserve	Paid Indemnity	Paid Fees	Subrogation	Salvage	Total Incurred	Claim Handler	Loss Run Date
AP Hauls LLC	KPB23PW03-0070	07-Mar-2024	\$1,000.00		No Reported Auto Physical Damage Losses						\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Vanguard	04-Nov-2025

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Disclaimer: Note claims may be handled by third parties appointed by underwriters and KP Brokers trading as Transportation Agency Partners "TAP", the program manager. If you have any questions or concerns regarding information contained herein then please contact claims@kpbrokers.com.

Policy Number: 1BWHFL1901463379-00

Name of Insured: AP HAULS LLC

Name of Agent: UNK

Carrier Name: Accredited Surety and Casualty Company Inc.

**LOSS RUN BY POLICY****"These loss runs only include losses reported PRIOR to 06-01-2025"****WHITEHILL AGENCY/BRAZOS SPECIALTY RISK****Policy Period: 12/16/2023 TO 12/16/2024**

Claim #:	WHAC25040174		Date of Loss:	10/24/2024	Accident State:	IL	Old Claim#:			Unit Number:	unlisted		
Date Open:	04/29/2025		Date Closed:	09/17/2025	Claim Status:	Closed	Driver:	CHAPMAN RICHARD					
Description of Accident:	IV was waiting at the dock to unload when OV was approaching and hit the d/s of IV, causing IV to be lifted off the ground. IVD was in the truck laying down and the collision caused him to fall and hit his head.												
Claimant	<u>Line/Cov</u>	<u>St</u>	<u>Loss Paid</u>	<u>Med Paid</u>	<u>Exp Paid</u>	<u>Current Loss Resv</u>	<u>Current Exp Resv</u>	<u>Current Med Resv</u>	<u>Gross Incurred</u>	<u>Expense Recover</u>	<u>Deduct Recover</u>	<u>Salvage Recover</u>	<u>Subro Recover</u>
CHAPMAN RICHARD	19.4/621.1349	C	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$0.00
CHAPMAN RICHARD	19.3/1287	C	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Group Total for Claim No: WHAC25040174			\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$0.00

SUB TOTALS for Policy Period: 12/16/2023 TO 12/16/2024

	<u>Loss Paid</u>	<u>Med Paid</u>	<u>Exp Paid</u>	<u>Current Loss Resv</u>	<u>Current Exp Resv</u>	<u>Current Med Resv</u>	<u>Gross Incurred</u>	<u>Expense Recover</u>	<u>Deduct Recover</u>	<u>Salvage Recover</u>	<u>Subro Recover</u>
TOTALS IN PERIOD:	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$0.00

NUMBER OF CLAIMS IN PERIOD: 1

GRAND TOTALS

	<u>Loss Paid</u>	<u>Med Paid</u>	<u>Exp Paid</u>	<u>Current Loss Resv</u>	<u>Current Exp Resv</u>	<u>Current Med Resv</u>	<u>Gross Incurred</u>	<u>Expense Recover</u>	<u>Deduct Recover</u>	<u>Salvage Recover</u>	<u>Subro Recover</u>
GRAND TOTALS:	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$70.50	\$0.00	\$0.00	\$0.00	\$0.00

TOTAL NUMBER OF CLAIMS: 1



"These loss runs only include losses reported PRIOR to 06-01-2025"

November 5, 2025

Requestor: Rachel Santiago-Rivera

Company: 925 Partners Insurance Agency

Email: rachelsr@925PARTNERS.COM

We acknowledge your request for Loss Runs for the following policies:

Named Insured	Policy Number	Policy Period	Carrier
AP Hauls LLC	1BWHFL1901463379-01	12/16/2024 - 12/16/2025	Accredited Surety and Casualty Company Inc.

A search of our records reflects no losses for the above referenced policies. If you have additional information that would prove helpful in determining otherwise, kindly forward it our attention.

Please note that NARS may not be in a position to provide the requested information if we were not the contracted Third Party Claims Administrator during the policy periods for which you are seeking a loss history.

If we may be of further assistance, please let us know.

Kind Regards,

Loss Run Administration (ah, sr)
North American Risk Services
Phone: (800) 315-6090
Fax: (866) 261-8507
Email: losrruns@narisk.com

Financial Data Last Updated At
12:50, 11/04/2025 EST
Report Created At
12:50, 11/04/2025 EST

These loss runs only include losses reported 06/01/25 and later.



Loss Run Report

Policy Information										
Policy Number	Carrier Name	Broker Name	Insured Name	Original Risk Inception Date	Original Risk Expiry Date	Policy Region	Indemnity Total Incurred	Expense Total Incurred	Total Recovered	Policy Total Incurred
1BWHFL1901463379-00	Accredited Surety and Casualty Company	Whitehill Agency / Brazos Specialty Risk, Inc	AP Hauls LLC	12/16/2023	12/16/2024	N/A	\$0.00	\$0.00	\$0.00	\$0.00

Claims Information
There are no claims for this policy period.

Financial Data Last Updated At
12:50, 11/04/2025 EST
Report Created At
12:50, 11/04/2025 EST

These loss runs only include losses reported 06/01/25 and later.



Loss Run Report

Policy Information										
Policy Number	Carrier Name	Broker Name	Insured Name	Original Risk Inception Date	Original Risk Expiry Date	Policy Region	Indemnity Total Incurred	Expense Total Incurred	Total Recovered	Policy Total Incurred
1BWHFL1901463379-01	Accredited Surety and Casualty Company	Whitehill Agency / Brazos Specialty Risk, Inc	AP Hauls LLC	12/16/2024	12/16/2025	N/A	\$0.00	\$0.00	\$0.00	\$0.00

Claims Information
There are no claims for this policy period.