

ARIZONA INSURANCE IDENTIFICATION CARD

COMPANY NAIC NUMBER

18058

COMPANY

Philadelphia Indemnity Insurance Company



COMMERCIAL



PERSONAL

POLICY NUMBER

PHPK1646752

EFFECTIVE DATE

5/2/2017

EXPIRATION DATE

5/2/2018

YEAR

2016

MAKE/MODEL

LAND ROVER / RANGE ROVER

VEHICLE IDENTIFICATION NUMBER

SALGS2KF7GA290515

AGENCY/COMPANY ISSUING CARD

**Warburton Insurance Services, Inc.
1445 E Guadalupe Rd Ste 103
Tempe, AZ 85283**

AGENCY/COMPANY TELEPHONE NUMBER: **4807594101**

INSURED

**Autoed Inc dba Automatik
3419 E University Dr
Phoenix, AZ 85034-7211**

SEE IMPORTANT NOTICE ON REVERSE SIDE



PHLY

**To Report A Claim
Call (800) 765-9749**

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

1. A person is required to possess evidence of financial responsibility within the motor vehicle.
2. The card or an image of the card that is displayed on a wireless communication device meets the requirement.
3. The card or an image of the card that is displayed on a wireless communication device is satisfactory evidence if the person is asked by the department of transportation to verify financial responsibility on the motor vehicle.

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

ARIZONA INSURANCE IDENTIFICATION CARD

COMPANY NAIC NUMBER COMPANY ☒ COMMERCIAL ☐ PERSONAL
18058 **Philadelphia Indemnity Insurance Company**

POLICY NUMBER EFFECTIVE DATE EXPIRATION DATE
PHPK1646752 **5/2/2017** **5/2/2018**

YEAR MAKE/MODEL VEHICLE IDENTIFICATION NUMBER
2007 **CHEVROLET / AVALANCHE K150** **3GNFK12Y57G269752**

AGENCY/COMPANY ISSUING CARD
Warburton Insurance Services, Inc.
1445 E Guadalupe Rd Ste 103
Tempe, AZ 85283

AGENCY/COMPANY TELEPHONE NUMBER: **4807594101**

INSURED
┌ **Autoed Inc dba Automatic**
 3419 E University Dr
 Phoenix, AZ 85034-7211
└

SEE IMPORTANT NOTICE ON REVERSE SIDE



To Report A Claim
Call (800) 765-9749

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

1. A person is required to possess evidence of financial responsibility within the motor vehicle.
2. The card or an image of the card that is displayed on a wireless communication device meets the requirement.
3. The card or an image of the card that is displayed on a wireless communication device is satisfactory evidence if the person is asked by the department of transportation to verify financial responsibility on the motor vehicle.

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.