

Transportation Quick Quote Form

Named Insured chely express llc US DOT 2901387 Date 7/10/2016
 DBA _____ FEIN/SSN 812848834 ICC# _____
 GARAGE ADD 23405 fernhurst dr apt 2304 CITY houston STATE tx TXDOT# _____
 MAIL ADD _____ CITY _____ STATE _____ ZIP _____ CO _____
 BUS. TEL _____
 # 8322929758 COMMODITIES reefer

AREA OF OPERATION / STATES TRAVELLED tx,ok,la RADIUS 1500
 EFFECTIVE DATE 07/11/2016 #YRS W/OWN AUTH _____ ANN. MILEAGE/PWR UNT _____
 PRIMARY LIABILITY 1000000 UM/UIM _____ PIP _____ H/NOA _____
 NON-TRUCKING LIA _____ UM/UIM _____ PIP _____ H/NOA _____
 PHYSICAL DAMAGE _____ TIV _____ PHYS.DED. _____
 CARGO LIMIT _____ CARGO DED. _____ TRL INT _____ TRL INT LIMIT _____

EQUIPMENT LIST:
 1 YEAR ²⁰⁰⁵ MAKE frth TYPE tt GVW _____ VALUE 15k VIN 1fujapav25dn44707
 2 YEAR _____ MAKE _____ TYPE _____ GVW _____ VALUE _____ VIN _____
 3 YEAR _____ MAKE _____ TYPE _____ GVW _____ VALUE _____ VIN _____
 4 YEAR _____ MAKE _____ TYPE _____ GVW _____ VALUE _____ VIN _____
 5 YEAR _____ MAKE _____ TYPE _____ GVW _____ VALUE _____ VIN _____

DRIVER LIST: DOB EXP DOH DL# STATE 3 YR MVR VIOLATIONS
 1 Reinaldo pina Pavon 12/29/1968 tx dl# 38147003
 2 Rafael machado matos 07/22/2013 tx # 26758624
 3 _____
 4 _____
 5 _____

PRIOR CARRIERS/LOSSES
 CURRENT YR _____ POL# _____ #LOSSES _____ \$INCURRED _____
 1ST PRIOR _____ POL# _____ #LOSSES _____ \$INCURRED _____
 2ND PRIOR _____ POL# _____ #LOSSES _____ \$INCURRED _____
 HAS POLICY CANCELLED OR BEEN NON-RENEWED IN LAST 3 YEARS? _____ IF YES, WHY? _____

REMARKS _____
 EXPIRING PREMIUM _____ AGENCY RENEWAL _____
 PRODUCER _____
 EMAIL _____
 PHO# _____ FAX# _____

