FRANK SWINGLE & ASSO 13760 NOEL RD #600 DALLAS, TX 75240 1-972-387-3000



Policy number: 960702702

Underwritten by: Progressive County Mutual Ins Co NAIC Number: 29203 January 27, 2023 Page 1 of 2

Certificate of Insurance

Certificate Holder

JRT Delivery Systems, LLC 10610 Newkirk St Suite 206 Dallas, TX 75220

Insured Agent

JRT Delivery Systems, LLC Zip Delivery 10610 NEWKIRK ST DALLAS, TX 75220 FRANK SWINGLE & ASSO 13760 NOEL RD #600 DALLAS, TX 75240

This document certifies that insurance policies identified below have been issued by the designated insurer to the insured named above for the period(s) indicated. This Certificate is issued for information purposes only. It confers no rights upon the certificate holder and does not change, alter, modify, or extend the coverages afforded by the policies listed below. The coverages afforded by the policies listed below are subject to all the terms, exclusions, limitations, endorsements, and conditions of these policies. Liability coverage may not apply to all scheduled vehicles.

Policy Effective Date: Aug 16, 2022	Policy Expiration Date: Aug 16, 2023
Insurance coverage(s)	Limits
Bodily Injury/Property Damage	\$1,000,000 Combined Single Limit
Hired Auto Bodily Injury/Property Damage	\$1,000,000 Combined Single Limit
Employer's Non-Owned Auto BIPD	\$1,000,000 Combined Single Limit
Uninsured/Underinsured Motorist	\$1,000,000 Combined Single Limit
Uninsured Motorist Property Damage	(included in combined single limit w/\$250 Ded)

Motor Truck Cargo coverage part

Description	Limits	Deductible
Motor Truck Cargo	\$150,000	\$1,000
Blanket Additional Insured		

Blanket Waiver of Subrogation

Description of Location/Vehicles/Special Items

Scheduled autos only

2019 FREIGHTLINER M2 3ALACWFC0KDKE3401

Stated Amount \$88,000

Medical Payments\$10,000Comprehensive\$1,000 DedCollision\$1,000 Ded

Rental Reimbursement \$125 Per Day (\$3,750 Max)



Policy number: 960702702 JRT Delivery Systems, LLC

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2019 FREIGHTLINER M2 3ALACWFC9KDKE3400

Stated Amount \$88,000

Medical Payments\$10,000Comprehensive\$1,000 DedCollision\$1,000 Ded

Rental Reimbursement \$125 Per Day (\$3,750 Max)

2017 FORD TRANSIT CONNECT NMOLS7E77H1332655

Medical Payments\$10,000Comprehensive\$1,000 DedCollision\$1,000 Ded

Rental Reimbursement \$50 Per Day (\$1,500 Max)



Form 5241 (05/16)