## AGENCY CUSTOMER ID:

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ACORD

## MAINE COMMERCIAL AUTO

DATE	(MM/DD/YYYY)
DAIL	(17117)/00/17 17 17 1

ACORD								•••	CO	/ER/	AGES /	LIN	MITS S	SECTION	1								DAI	L (IVI	WI/DD/1	,
												IED INSURED(S)														
POLICY NUMBER										EF	FECTIVE DA	ATE	CARRIE	ARRIER											NAIC C	ODE
BUSINESS AUT	BUSINESS AUTO SECTION																									
COVERAGES COVERED AUTO SYMBOLS LIMITS													COVERAGES COVERED AUTO SYMBOLS LIMITS													
LIABILITY	1 4 9 CSL BI EA PER \$ 2 7 BI EACH ACCIDENT \$																									
	3 8 PROPERTY DAMAGE \$																									
																	PHY	SIC	L DA	MAGI	E					
													TOWING & LABOR			3 7					\$					
														COMP / OTC	;		2		4 7		8					
MEDICAL PAYMENTS		2		4		8	EACH	H PERSO	N	\$				SPECIFIED CAUSES OF	LOSS		2		4 7		8					
UNINSURED / UNDERINSURED		2		6 7				CSL CH ACCI		PER \$				COLLISION			2		4 7		8					
MOTORIST		4												-												
HIRED / BORROWED LIABILITY	YES STATES COST OF HIR NO \$								OF HIRE IF ANY BASIS						ES # DAYS			:	# VEH		COVERAGE / DEDUCTIBLE  COMP \$				E	
NON-OWNED		YES STATES GROUP					GROUP TYPE NUMBER OF EMPLOYEES						HIRED PHYSICAL DAMAGE							SPEC C OF L \$ COLL \$						
LIABILITY							,	VOLUNTI	EERS																	
COVERED (1) ANY	AUT	0						PARTNEI		NED AL	TOS OTHE	R THA	AN PRIVA	TE PASSENG	COVERAGE IS:  ER AUTOS ONLY (7) SF					_	PRIMARY S			ECONI D AUT		
AUTO (2) OWI SYMBOLS (3) OWI	NED A	OTU			ENG	FR AI	ITOS O	NII V	(5) OW	NED AL	JTOS SUBJE	ECT T	TO NO-FA					ΤςιΔ	۱۸/	(8) F	HIRED	AUTO:	S ONLY AUTOS	•		
ENDORSEMENT																				- ' '						
SIGNATURE		(NO)	A/INI/	CL V	DE	0///	)F FA	LCE I	VICOMI	OL ETE	OR MICI			ICODMATIO	N TO A	NI IN	ICLIE	) A NIC	)	2014	DANI	V FOI			IDDOS	г ог
IT IS A CRIME DEFRAUDING TH	E CC	MPA	NY.	PE	NAL	TIES	MAY	INCLUE	DE IMP	RISON	IMENT, FII	NES	AND DE	ENIAL OF IN	SURANC	E BE	ENEF	FITS.						PU	KPUS	e UF
I UNDERSTAND THE FOR LIABILITY CO COVERAGE. PUR UNINSURED MOTO	VER. SUAI	AGE NT T	FOF O TH	R BO HE M	DIL IAIN	Y INJ IE RE	URY C	OR DEAT	TH IN TI JTES, T	HIS PC	DLICY UNL	ESS	I EXPRE	ESSLY REJE	CT SUC	H AN	AMC	TNUC	OF				APPLIC	CAN'	T'S INIT	TIALS
I UNDERSTAND T AND CHANGES U											DICES IND	DICA.	TED HE	RE WILL AF	PPLY TC	) ALL	. FU	TURI	E PO	)LIC	Y RE	NEWA	ALS, C	ONT	INUAT	TIONS
APPLICANT'S SIGNATI	JRE	_	_				_		DATE	_		PRO	DUCER'S	SIGNATURE				_	_			NATI	ONAL P	ROD	UCER N	IUMBER

ACORD 137 ME (2015/12)

AGENCY	CHSTO	MEB ID.

TRUCKERS SECTION AGENCY COSTOMER ID.																		
COVERAGES	co	VERED	AUTO	SYMBOLS	LIMITS PHYSICAL DAMAGE										E			
		41		47	CSL	BI EA PER	\$		COVERA	GES	AU	COVE TO SY	RED MBOI	s		LIMITS		DEDUCTIBLE
		42		50	BI EACH ACCIE		\$					42		47				
LIABILITY		43		55	PROPERTY DA		\$		COMP / OTC	)		43		''				\$
		1		1	PROFERITOR	IVIAGE	Ψ							'				·
		46										46	1					
									SPECIFIED			42		47	SCL	FT	LSP	
									CAUSES OF	LOSS		43			F	FTW	1	\$
												46						
												42		47				
MEDICAL		42		46					COLLISION			43						\$
PAYMENTS		43			EACH PERSON	l	\$					46						
		42		46	CSL	BI EA PER	\$		TOWING			46						
UNINSURED / UNDERINSURED		43		1	BI EACH ACCIE		\$		& LABOR					1	5			
MOTORIST		45		1	Di Enternationi	Z_141	Ψ						TPAII	.ER INT				
		45							COVEDA	050	CVM				# DAYS	DEDUCTIBLE		
									COVERA	GES			# IK	AILERS	ZONE	# DATS	RADIUS	DEDUCTIBLE
									COMP / OTC			48						
											$\perp$	49	_					
NON-TRUCKERS		YES		STATES	COST OF HIRE		IF ANY BA	ASIS	SPECIFIED			48						
HIRED / BORROWED		NO			\$					LOSS		49						
TRUCKERS HIRED / BORROWED		YES		STATES	COST OF HIRE	:	IF ANY BA	ASIS				48						
LIABILITY		NO			\$				COLLISION			49						\$
		YES		STATES	GROUP TYPE		NUI	MBER OF	TRAILER VA	LUE	\$							
NON-OWNED		NO			EMPLOYE	ES				STA	ATES	# D	AYS	# \	/EH			
AUTO		1			VOLUNTE													
LIABILITY					PARTNER				HIRED									
OTHER					PARTNER	.5			PHYSICAL	PHYSICAL								
OTTLER									DAMAGE									
											COV	ERAG	E IS:		F	PRIMARY	8	SECONDARY
									OTHER									
COVERED AUTO SYME	BOLS			(44)	OWNED AUTOS	SUBJECT 1	TO NO-FAULT		CIFICALLY DES		D AUTO	os		(49) Y	OUR TR	AILERS IN	THE POS	SESSION OF
(41) ANY AUTO (42) OWNED AUTOS O	NI V			(45)	OWNED AUTOS COMPULSORY				D AUTOS ONL LERS IN YOUF		-99101	חאוו	ER				R UNDER	A TRAILER
(43) OWNED COMMER		AUTOS	ONL	.Y	MOTORIST LAV		,		AILER INTERC							NED AUTO		
ENDORSEMENT	s/	REMA	4RK	S (ACOR	D 101. Addi	tional Re	marks Sc	hedule. ma	v be attac	hed if	mor	e sp	ace	is red	uired	)		
					- <b>,</b>			, ,	,							,		
SIGNATURE																		
IT IS A CRIME T DEFRAUDING THI															OMPAN	Y FOR	THE PU	RPOSE OF
I UNDERSTAND TH	НАТ	MAINE	LAV	V REQUIRE	S UNINSURED	MOTOR V	/EHICLE CC	VERAGE LIM	IITS TO EQU	JAL TH	E LIMI	TSIF	HAVE	SELE	CTED			
FOR LIABILITY CO																_		
COVERAGE. PUR UNINSURED MOTO							: 24-A, SEC	110N 2902, SI	JBSECTION	2, I HA	VE EL	.ECTI	ED TO	) PUR	CHASE		PPLICAN	Γ'S INITIALS
OIVIIVOUNED IVIOTO	J∩ V	LITIOL		VENAGE	WILLSOER	LIIVII I J.												
I UNDERSTAND T AND CHANGES U							HOICES IN	DICATED HE	RE WILL A	PPLY <sup>-</sup>	TO AL	L FU	TURI	E POL	ICY RI	ENEWAL	S, CONT	INUATIONS
APPLICANT'S SIGNATI	JRE					DATE		PRODUCER'S	SIGNATURE							NATIO	NAL PROD	UCER NUMBER

AGENCY	CUST	OMER	ID:

MOTOR CARRIER SECTION AGEN											AGENCY CUSTOMER ID:												
COVERAGES	COVERED AUTO SYMBOLS LIMITS PHYSICAL DAMAGE COVERED																						
		61		67		CSL	BI EA PER	\$		COVERA	GES	AU	TO SY	RED MBO	LS		LIMITS		DEDUCTIBLE				
LIABILITY		62		68	BIE	ACH ACCID	ENT	\$			_		62		67								
		63		71	PRO	OPERTY DAI	MAGE	\$		COMP / OTC	3		63		68				\$				
		64											64			001							
										SPECIFIED			62 63		67	SCL	FT\	LSP	\$				
										CAUSES OF	LOSS		64		66		F I \	/V	\$				
													62		67								
										COLLISION			63		68				\$				
													64										
MEDICAL		62		64	E A C	CH PERSON		\$		TOWING			63			\$							
PAYMENTS		63		67		DITFERSON	T DI			& LABOR			67			Ψ							
UNINSURED /		62		66		CSL	BI EA PER	\$								ERCHAI							
UNDERINSURED MOTORIST		63		67	BIE	ACH ACCID	ENT	\$		COVERA	GES	SYN		# TR	AILER	SFARTH	# DAYS	RADIUS	DEDUCTIBLE				
		64								COMP / OTO			69 70										
										SPECIFIED CAUSES OF	LOSS		69 70										
NON-TRUCKERS		YES	3	STATES	cos	ST OF HIRE		IF ANY E	BASIS				69										
HIRED / BORROWED		NO			\$		_			COLLISION			70						\$				
TRUCKERS HIRED / BORROWED		YES	6	STATES	cos	ST OF HIRE		IF ANY E	BASIS	TRAILER VA	LUE	\$											
LIABILITY		NO			\$						STA	ATES	# D	AYS	#	VEH							
		YES	6	STATES	GR	OUP TYPE		N	UMBER OF	-													
NON-OWNED AUTO		NO				EMPLOYE				HIRED PHYSICAL													
LIABILITY						VOLUNTE				DAMAGE													
OTHER						PARTNER	5			-		COV	ERAG	E IO			PRIMARY		ECONDARY				
OTTLER										OTHER			EKAG	E 15:			PRIIVIARY		BECONDART				
COVERED AUTO SYME	BOLS					NED COMME		TOS ONLY TO NO-FAUL		CIFICALLY DES		D AUT	os						SESSION OF A TRAILER				
(62) OWNED AUTOS O (63) OWNED PRIVATE		: ALIT	ns c	(6	1WO (8		SUBJECT '	TO A COMPI	JL- (69) TRAI	LERS IN YOUR	R POSSE				I	NTERCH		REEMENT	7. TO GLETC				
ENDORSEMENT																		JO ONET					
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0.00.00																							
SIGNATURE		(1)(0)	A // B 1 /	01.1/ PB01/	//DE_E		OOMBLE:	TE OD M	IOLEADINO IN	IFORMATIO	N TO	A N I . I	NOLI	- A N I C	25.0	OMBAN	N/ FOD	THE DI	DD005 05				
IT IS A CRIME TO DEFRAUDING THI	E CC	MPA	ANY.	PENALTIE	S MA	Y INCLUDI	IMPRIS	ONMENT,	FINES AND D	ENIAL OF IN	ISURAI	NCE E	BENE	FITS	-		IY FOR	THE PU	RPOSE OF				
I UNDERSTAND THE FOR LIABILITY CO COVERAGE. PUR UNINSURED MOTO	VER SUA	AGE NT T	FOF O Th	R BODILY IN HE MAINE R	IJURY EVISE	OR DEATH	HIN THIS ES, TITLE	POLICY UI	NLESS I EXPR	ESSLY REJE	CT SU	CH AI	N AMO	CNUC	ΓOF		≣ <del></del> A	PPLICAN <sup>-</sup>	T'S INITIALS				
I UNDERSTAND T	HAT	THE	= CC	OVERAGE S	SELEC	TION AND	D LIMIT C	CHOICES II	NDICATED HE	ERE WILL AI	PPLY 1	TO AL	L FU	TUR	E POI	LICY R	ENEWAL	S, CONT	INUATIONS				
APPLICANT'S SIGNATI						1	DATE		PRODUCER'S	SIGNATURE							NATIO	NAL PROD	UCER NUMBER				