

**ATTENTION**

**Insured Information**

Company Name: <u>YEMI TRANSPORTATION LLC</u>	DOT #: <u>3782728</u>
DBA Name: <u></u>	MC #: <u>1354720</u>
Business Entity Type: <u>Llc</u>	Operation description:
FEIN #: <u>873991189</u>	Range of operation: <input checked="" type="radio"/> Interstate <input type="radio"/> Intrastate
Garaging Address: <u>3309 DUNLEAF ARC WAY</u>	Radius of operation: <u>Interstate unlimited</u>
City: <u>NORCROSS</u>	Any related broker authority?: <input type="radio"/> Yes <input type="radio"/> No
State: <u>GA</u>	Annual mileage: <u></u>
ZIP: <u>30093</u>	Annual revenue: <u></u>
Owner's name: <u>ADEWALE BAJERE</u>	Federal or State Filings Required?: <input type="radio"/> Yes <input type="radio"/> No
Owner's DOB: <u>12/05/1985</u>	Will policy cover all vehicles owned, operated, or under lease to applicant?: <input checked="" type="radio"/> Yes <input type="radio"/> No
Phone Number: <u>6787073225</u>	Major cities: Atlanta, Pittsburgh, Tampa
Email Address: <u>adebajere1@aol.com</u>	Has risk been cancelled or non-renewed in last 3 years?: <input type="radio"/> Yes <input checked="" type="radio"/> No
Years of primary liability coverage: <u></u>	How many years has insured owned commercial equipment?: <u></u>
Business Start Date: <u>12/01/2021</u>	Do you pull?: <input type="radio"/> doubles <input type="radio"/> triples <input checked="" type="radio"/> neither <input type="radio"/> both
Desired Effective Date: <u>05/15/2023</u>	Do you allow non-employee passengers?: <input type="radio"/> Yes <input type="radio"/> No
	Is risk covered by workers compensation?: <input type="radio"/> Yes <input checked="" type="radio"/> No
	Notes - Description of Operations:
	<input type="text" value="Hauling - General Freight"/>

**Commodity Information**

Commodity	% of Loads	Average Value per load	Max Value per load	Commodity	% of Loads	Average Value per load	Max Value per load
General Freight	100						

**Driver Information**

Name	Marital status	Dob	License number	State	Date hired	Year CDL issued	Last 3 Years # of	
							Mov. Violations	Accidents
ADEWALE BAJERE	not_married	12/05/1985	059331892	GA		2019	0	0

**Vehicle Information**

Year	Make	Vehicle type string	Gvw string	Stated value	Vin	Radius
2007	Freightliner	Truck Tractor			1FU8A5CG27LXF6269	500.0

**Loss Information**

(Previous career & loss information - must show current year and previous 2 years. If previously leased to another company, list that company.)

Policy start date	Policy end date	Company name	Policy numbers	Premium amount	Number of claims	Total paid and reserved

**Coverage and Limits**

**Liability**

Auto Liability	<input checked="" type="checkbox"/>	Limit	<u>1m</u>	Deductible	<u></u>
Non-Trucking Liability	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
UM/UIM	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
PIP	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Medical Payments	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Hired Auto	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Trailer Interchange	<input checked="" type="checkbox"/>	Limit	<u>50k</u>	Deductible	<u></u>
General Liability	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>

**Physical Damage**

Specified causes of loss	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Comprehensive	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Collisions	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>

**Cargo**

Broadform Cargo	<input checked="" type="checkbox"/>	Limit	<u>100k</u>	Deductible	<u></u>
Refrigeration Malfunction	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>
Expanded Refrigeration	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>