

ATTENTION

Insured Information

Company Name: <u>UVALLE TRANSPORTATION LLC</u>	DOT #: <u>3925761</u>
DBA Name: <u></u>	MC #: <u>1453493</u>
Business Entity Type: <u>Llc</u>	Operation description:
FEIN #: <u>883462060</u>	Range of operation: <input checked="" type="radio"/> Interstate <input type="radio"/> Intrastate
Garaging Address: <u>1034 EARLY BLVD APT 14</u>	Radius of operation: <u>Interstate up to 500 mile</u>
City: <u>EARLY</u>	Any related broker authority?: <input type="radio"/> Yes <input type="radio"/> No
State: <u>TX</u>	Annual mileage: <u></u>
ZIP: <u>76802</u>	Annual revenue: <u></u>
Owner's name: <u>Pedro Uvalle</u>	Federal or State Filings Required?: <input checked="" type="radio"/> Yes <input type="radio"/> No
Owner's DOB: <u>04/16/1997</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>3252030093</u>	Major cities:
Email Address: <u>uvalletransportation@gmail.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>07/28/2022</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>06/19/2023</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="Hotshot - general freight - deliver to receiver"/>

Commodity Information

Commodity	% of Loads	Average Value per laod	Max Value per load	Commodity	% of Loads	Average Value per laod	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
Pedro Uvalle	not_married	04/16/1997	39862655	TX		0	2	1

Vehicle Information

Year	Make	Vehicle type string	Gvw string	Stated value	Vin	Radius
2011	Ford	Pickup Truck		18000.0	1FTAX3B66BEC12229	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				Physical Damage			
Auto Liability	<input checked="" type="checkbox"/>	Limit	<u>750k</u>	Deductible	<u></u>	Specified causes of loss	<input type="checkbox"/> Limit <u></u> Deductible <u></u>
Non-Trucking Liability	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>	Comprehensive	<input type="checkbox"/> Limit <u></u> Deductible <u></u>
UM/UIM	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>	Collisions	<input type="checkbox"/> Limit <u></u> Deductible <u></u>
PIP	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>	Cargo Broadform Cargo <input type="checkbox"/> Limit <u></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>	
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 type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>		
General Liability	<input type="checkbox"/>	Limit	<u></u>	Deductible	<u></u>		