Run Date: 12/27/24

Time: 10:19:26

NTA General Insurance Agency

Carrier: UNITED SPECIALTY INSURANCE CO

Inception Through: 01/09/2020 (Cancellation Date)

PAGE: 1

Name Of Insured: M TRANS SERVICES INC Effective/Expiration Date: 09/12/2019 / 09/12/2020

Policy Number: GWP51335 00 Deductible Amount: 0.00

Claim Number: H50421 Name Of Driver: PARAMJIT SINGH Vehicle Make: VOLVO Claim Status: CLOSED Date Of Birth: 07/15/1976 Vehicle Year: 2017

Date Of Loss: 10/20/2019 Date Of Hire: 01/01/2019 Vin Number: 4V4NC9EH0HN986942

Date Received: 11/06/2019 Driver Status: Reported Driver Unreported Unit: NO

Late Reported Claim: YES Accident State: OR Location/City: SAMUEL, PILOT TRUCK

Description: IV BACKED INTO PARKED CV

CLAIMANT	STATUS	COVERAGE	LOSS PAID	RESRV		RECOVERD	INCURRE	-
SCHNEIDER NATIONAL CARRIERS	CLOSED AL	PD	2,984.13	0.00	l	0.00	2,	984.13
CLAIM TOTAL:-			 2,984.13	 0.00	 	0.00	2,	984.13

GRAND TOTALS-: | TOTAL LOSS PAID | TOTAL RESERVED | RECOVERD | INCURRED

TOTAL CLAIMS-: 001 | 2,984.13 | 0.00 | 0.00 | 2,984.13

Coverages: Liab BI = Liability Bodily Injury Coll = Collision

Liab PD = Liability Property Damage Comp = Comprehensive
Liab UM = Liability Uninsured Motorist Spec Per = Specific Perils

Liab PIP = Liability PIP Cargo = Cargo

Adj Exp = Adjuster Expense Reef-BD = Reefer Breakdown
Lgl Exp = Legal Expense Gen Liab = General Liability

Other Exp = Other Expense