Policy Number: TMA81001419
Name Of Insured: SJS TRANS INC
Insurance Co: SOUTHLAKE SPECIALTY INSURANCE COMPANY

SOUTHLAKE SPECIALTY INSURANCE COMPANY

Policy Period: 10/05/2024 to 10/05/2025
Run Date: 10/14/2025
Deductible Amount: $0

TOTAL CLAIMS: 1	**OPEN CLAIMS:** 0	**CLOSED CLAIMS:** 1	**LATE REPORTED CLAIMS:** 0	**CLAIMS WITH UNREPORTED VEHICLES:** 0	**CLAIMS WITH UNREPORTED DRIVERS:** 0

COVERAGE	**AUTO LIABLITY**	**PHYSICAL DAMAGE**	**CARGO**
TOTAL LOSSES PAID	$24960.42	No Coverage	No Coverage
TOTAL RESERVED	$0.00	No Coverage	No Coverage
RECOVERIES (Including Deductible)	$0.00	No Coverage	No Coverage
TOTAL INCURRED	$24960.42	No Coverage	No Coverage

1	**Claim Number: A1081246**	**Claim Status: Closed**	**Name of Driver: HARZANMEET SINGH**	**Date of Birth: 09/25/1994**	**Driver Status: Reported**	**Date of Hire: 10/04/2024**
	Date of Loss: 06/17/2025	**Date Reported: 06/19/2025**	**Late Reported Claim: N**	**Vehicle Info : 2021 - FREIGHTLINER - 3AKJHHDR4MSNA9266**	**Unreported Unit: N**	**Accident Location: SMYTH , VA**
	Description: PHYSDAM* IV HIT OV					

	CLAIMANT	**STATUS**	**COVERAGE**	**PAID**	**RESERVES**	**RECOVERED**	**DEDUCTIBLE**	**INCURRED**
AL	M.D.Miller Company Inc.	Closed	Auto Liability PD	$24780.42	$0.00	$0.00		$24780.42
	ADJUSTING EXPENSES	Closed	Adjusting Expenses	$180.00	$0.00	$0.00		$180.00
	M.D.Miller Company Inc.	Closed	Auto Liability PD	$0.00	$0.00	$0.00		$0.00
	CLAIM TOTAL:			$24960.42	$0.00	$0.00		$24960.42