

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

:00:00:00

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
LINKS INSURANCE SERVICES, INC	PHONE (A/C, No, Ext): (925) 361-5185	FAX (A/C, No)(925) 556-1636
6200 VILLAGE PARKWAY, SUITE#203	E-MAIL ADDRESS: CERTIFICATES@LINKSINSURANCE.NET	
DUDI IN CA 045CO	INSURER(S) AFFORDING COVERAGE	NAIC#
DUBLIN, CA 94568	INSURER A: MAXUM INDEMNITY COMPANY	26743
INSURED JVG Trans Inc	INSURER B: SOUTHLAKE SPECIALTY INSURANCE	16999
6569 N RIVERSIDE DR STE102#502	INSURER C: TRAVELERS PROPERTY CASUALTY CO	25674
FRESNO CA 93722	INSURER D: NATIONAL FIRE & MARINE INSURAN	20079
	INSURER E :	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 0001 / 07/17/2024 REVISION NUMBER: 342

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR LTR		TYPE OF INSURANCE	ADDL SUBR INSD WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
A	Х	CLAIMS-MADE X OCCUR		BDG-3088934-01	07/24/24	07/24/25	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ \$	1,000,000
							MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	300,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000
-	Х	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$	0
		OTHER:						\$	
	AUT	OMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
В		ANY AUTO		TMA71009909	07/16/24	07/16/25	BODILY INJURY (Per person)	\$	0
		OWNED X SCHEDULED AUTOS ONLY		11117133333	0,7,10,21	0,710,13	BODILY INJURY (Per accident)	\$	0
		HIRED NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	0
								\$	
		UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$	0
		EXCESS LIAB CLAIMS-MADE	<u>:</u>				AGGREGATE	\$	0
		DED RETENTION\$						\$	
		KERS COMPENSATION EMPLOYERS' LIABILITY					PER OTH- STATUTE ER		
	ANYF	PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$	0
	(Man	CER/MEMBEREXCLUDED?					E.L. DISEASE - EA EMPLOYEE	\$	0
	DES	s, describe under CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	0
С	MOT	OR TRUCK CARGO		QT-660-5H614417-TIL-24	07/16/24	07/16/25	CARGO LIMIT	\$	250,000
D	РНҮ	SICAL DAMAGE		72TRB005605	07/16/24	07/16/25	COMP/COLL DED	\$	2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

VEHICLE SCHEDULE PER SUBMISSION WITH INSURANCE COMPANY

Reefer- Breakdown Coverage Included with Deductible \$ 2,500 on Cargo Policy # QT-660-5H614417-TIL-24

Cargo Deductible - \$2,500 on Cargo Policy \$#\$ QT-660-5H614417-TIL-24

TRAILER INTERCHANGE ON PHYSICAL DAMANGE POLICY \$90,000 # RTLL29943

For more information see attached Acord 101 form

CERTIFICATE HOLDER	CANCELLATION

5592753181, extricky JvgTransinc@gmail.com;GillCarrier@gmai**SHObblDAN** THE EXPIRA ACCORDANG JVG Trans Inc

JvgTransinc@gmail.com;GillCarrier@gmaiSHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN
ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ERIKA ULINSKAITE

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FRESNO, CA, 93722

6569 N RIVERSIDE DR STE102#502

AGENCY CUSTOMER ID:	
LOC #:	



ADDITIONAL REMARKS SCHEDULE

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Page	of

Links Insurance Services Inc. POLICY NUMBER TMA71009909 CARRIER NAIC CODE		NAMEDINSURED JVG Trans Inc 6569 N RIVERSIDE DR STE102#502 FRESNO CA 93722	
		SOUTHLAKE SPECIALTY INSURANCE	16999

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: FORM TITLE:
2024 FREIGHTLINER TRACTOR 3AKJHHDR9RSUT0137 \$ 132000 - (LISTED ON LIAB/CARGO/PD)
2024 FREIGHTLINER TRACTOR 3AKJHHDR7RSUT0136 \$ 132000 - (LISTED ON LIAB/CARGO/PD)
2023 FREIGHTLINER TRACTOR 3AKJHHDR6PSNX9179 \$ 108000 - (LISTED ON LIAB/CARGO/PD)
2023 FREIGHTLINER TRACTOR 3AKJHHDR4PSNX9178 \$ 108000 - (LISTED ON LIAB/CARGO/PD)
2022 FREIGHTLINER TRACTOR 3AKJHHDR3NSMY5774 \$ 45000 - (LISTED ON LIAB/CARGO/PD)
2024 UTILITY TRAILER 1UYVS2539R2024203 \$ 79000 - (LISTED ON PD)
2024 UTILITY TRAILER 1UYVS2538R2023821 \$ 80000 - (LISTED ON PD)
2023 UTILITY TRAILER 1UYVS2533P2741113 \$ 78000 - (LISTED ON PD)
2022 UTILITY TRAILER 1UYVS2534N2519404 \$ 40000 - (LISTED ON PD)
2022 UTILITY TRAILER 1UYVS2536N2519405 \$ 40000 - (LISTED ON PD)
2022 UTILITY TRAILER 1UYVS2532N2519403 \$ 40000 - (LISTED ON PD)
2022 UTILITY TRAILER 1UYVS2530N2519402 \$ 40000 - (LISTED ON PD)
2021 UTILITY TRAILER 1UYVS253XM2422612 \$ 40000 - (LISTED ON PD)
2021 UTILITY TRAILER 1UYVS2533M2422628 \$ 40000 - (LISTED ON PD)
2021 UTILITY TRAILER 1UYVS2532M2422605 \$ 40000 - (LISTED ON PD)
2021 UTILITY TRAILER 1UYVS2530M2229417 \$ 40000 - (LISTED ON PD)