

RECEIVED

JUN 22 2017

Letter of Appeal

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

06/07/2017

Mondial Mobile Motors LLC  
807 Serrill ave  
Yeadon, Pa 19050

C2017-2586448  
A6415050

1. At the end of January I renewed my insurance policy with TOPA but we had some disputes over unjustified charges on my account. As a conclusion to our dispute TOPA decided to cancel my insurance policy. Shortly after I had my insurance agent searching for another provider. We were able to secure another policy with Progressive. Upon completion of documentation verification, Progressive issued a policy sometime in February 2017. I was informed by agent that Progressive filed with PUC showing proof of insurance. This is a protocol for any PUC certificate owner.
2. My Docket number is C-2017-2586448
3. This petition is being made on behalf of Mondial Mobile Motors LLC
4. I have included my proof of insurance with this letter
5. I, Edgar Kaoma, hereby state that the fact set forth are true and correct ( or are true and correct to the best of my knowledge, information, and belief) and I expect to be able to prove the same at a time held in this matter. I understand that the statements herein are made subject to the penalties of 28 Pa.C.S. 4904 (relating to unsworn falsification to authorities).



Edgar Kaoma  
610 659 5412

REAL DEAL ESURANCE  
1201 RTE 70 W  
CHERRY HILL, NJ 08002

**PROGRESSIVE**  
COMMERCIAL

Named insured

MONDIAL MOBILE MOTORS LLC  
41 S. UNION AVE  
LANSDOWNE, PA 19050

**Policy number: 05978728-0**

Underwritten by:  
United Financial Casualty Company  
March 18, 2017  
Policy Period: Mar 13, 2017 - Mar 13, 2018  
Page 1 of 2

**progressiveagent.com**

**Online Service**

Make payments, check billing activity, print policy documents, or check the status of a claim.

**1-856-229-7035**

**REAL DEAL ESURANCE**

Contact your agent for personalized service.

**1-800-444-4487**

For customer service if your agent is unavailable or to report a claim.

## Commercial Auto Insurance Coverage Summary

### This is your Declarations Page

Your coverage began the later of March 13, 2017 at 12:01 a.m. or at the time your application is executed on the first day of the policy period. This policy period ends on March 13, 2018 at 12:01 a.m.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (06/10). The contract is modified by forms 2852PA (03/11), 1652PA (03/11), 4881PA (03/11), 4852PA (10/04) and 2228 (01/11).

The named insured organization type is a corporation.

#### **COLLISION COVERAGE FOR RENTAL VEHICLES**

**IF THIS POLICY PROVIDES COLLISION COVERAGE ON A PRIVATE PASSENGER VEHICLE, IT WILL APPLY TO A PRIVATE PASSENGER VEHICLE YOU RENT IF THE RENTAL IS COVERED AS A "TEMPORARY SUBSTITUTE AUTO" AS PROVIDED FOR IN PART II OF THIS POLICY.**

#### **Outline of coverage**

Description	Limits	Deductible	Premium
Liability To Others			\$1,742
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured Motorist - Nonstacked	\$35,000 combined single limit		35
Underinsured Motorist - Nonstacked	\$35,000 combined single limit		69
Basic First Party Benefit - Full Tort			142
Medical Expense Benefit Without Workers Comp	up to \$5,000		
Extraordinary Medical Benefits	Rejected		--
Income Loss Benefits	Rejected		--
Funeral Expense Benefits	Rejected		--
Accidental Death Benefits	Rejected		--
Comprehensive			185
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			323
See Auto Coverage Schedule	Limit of liability less deductible		
<b>Total 12 month policy premium</b>			<b>\$2,496</b>

**Rated drivers**

1. RODDNEY C BARDWELL
2. NAOMI HORTON

**Auto coverage schedule**

1. **2010 Chevrolet Express Curtaway**      Stated Amount:    \*\$20,000 (including Permanently Attached Equip)  
 VIN: 1GB6G3A6XA1109673      Garaging Zip Code: 19050      Radius: 100

Liability Premium	Liability	UM BI	UM BI	PIP	
	\$1,742	\$35	\$69	\$142	
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$1,000	\$185	\$1,000	\$323	<b>\$2,496</b>

\*A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.


**Premium discounts**

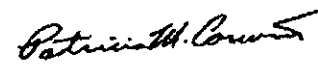
Policy: 05978728-0      Business Experience and Package

**Penalty for Insurance Fraud**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

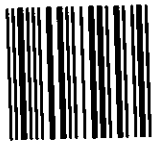
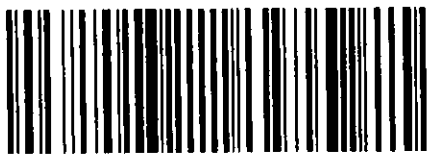
**Company officers**

  
 President

  
 Secretary

807 SERRILL AV  
YEADON, PA 19050

CERTIFIED MAIL



1000

17105

7007 2560 0002 6351 3791

PUC / SECRETARY

P.O. BOX 3265

HARRISBURG, PA 17105-3265

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