

PREPARED BY

DATE

8-7-17

Michael Brown / MIGO Transport

Docket # C-2017-261588

PAGE NO. 2

PROJECT ACTION NOTES

PROJECT PLANNING NOTES

Formal Response

1 I changed Insurance
 2 Companies and they sent
 3 a Cancellation notice to PUC.
 4 I still have Insurance but
 5 due to cost of adding
 6 * filings to insurance. I
 7 decided to wait until I
 8 have funds. I did not
 9 commit a violation. I still
 10 have Insurance, I switched
 11 to a new company & my
 12 old Insurance company sent
 13 a cancellation notice to
 14 the state PUC. With this
 15 response I will send a
 16 copy of Insurance to
 17 prove that my company is
 18 still under insurance. I
 19 will add filings when
 20 funds get available but
 21 I would appreciate if
 22 I wasn't charge \$500 for
 23 not having insurance when
 24 I do.

[Handwritten signature]
 MIGO Transport

RECEIVED

2017 AUG 10 AM 10:40

PA PUC SECRETARY'S BUREAU

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Agency Insurance Company of Maryland, Inc.
 1st 800, Ellicott, MD 21075-9800 (800)482-8829

** AMENDED ** 05/01/2017

COMMERCIAL AUTOMOBILE POLICY DECLARATION

POLICY NUMBER: CA 0008785

NAMED INSURED
 MICHAEL BROWN
 DBA: MGO TRANSPORT
 1165 WOODBINE ST
 PITTSBURGH, PA 15201

AGENT (724)774-8384
 USA INSURANCE BROKERS LLC
 304 PITTSBURGH MILLS CIR
 TARENTUM, PA 15084-0000

JE DATE	POLICY TERM	This policy begins the later of:
1/2017	05/08/2017 - 05/08/2018	A. 12:01 AM on the first day of the policy period; or B. the binding time on the signed application on the first day of the policy period. This policy shall expire at 12:01 AM on the last day of the policy period.

ADDITIONAL COVERAGE FOR RENTAL VEHICLES

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 B OF THIS POLICY.

ANNUAL POLICY PREMIUM
 \$4,848.00

KEY DISCOUNTS/CHARGES

DRIVERS

name	Driver Status	State	License #	DOB	Marital Status	FR	CDL
MICHAEL BROWN	Rated	PA	26178902	08/23/1975	Married	nr	9
MICHAEL BROWN	Excluded	nr	nr	05/14/1993	nr	nr	nr

DRIVER DETAILS - VIOLATIONS AND CLAIMS

Driver	Date	Violation
MICHAEL BROWN	07/30/2015	At Fault Accident
MICHAEL BROWN	04/08/2016	At Fault Accident
MICHAEL BROWN	03/12/2017	At Fault Accident
MICHAEL BROWN	03/27/2018	Improper Turn/U-Turn
MICHAEL BROWN	12/28/2018	Improper Turn/U-Turn

VEHICLE DETAILS AND PREMIUMS

VEHICLE 1: Premium: \$4,848.00

Year/Make/Model	VIN	Body Type	Garage
2000 INTERNATIONAL 99001	ZHTCHASTZYCO57861	Dump Truck	15201

Radius	Vehicle Use	*Stated Amount (including permanently attached equipment)
100 miles	N/A	\$30,000.00

Vehicle Coverage	Limits	Price
bodily Injury	\$1,000,000 Combined Single Limit	\$2.
Property Damage	Included with BI Combined Single Limit	\$1.
Uninsured Motorist - Nonstacked	\$15,000 each person/\$30,000 each accident	
Underinsured Motorist - Nonstacked	\$15,000 each person/\$30,000 each accident	

CA-024 (09/14)

INSURED COPY



Agency Insurance Company of Maryland, Inc.
 1 Box 8900, Ellicott, MD 21078-8900 (800)482-8829

** AMENDED ** 03/01/2017

COMMERCIAL AUTOMOBILE POLICY DECLARATION

POLICY NUMBER: CA 0008785

NAMED INSURED
 MICHAEL BROWN
 DBA: MGO TRANSPORT
 1188 WOODBINE ST
 PITTSBURGH, PA 15201

AGENT (724)274-6384
 USA INSURANCE BROKERS LLC
 304 PITTSBURGH MILLS CIR
 TARENTUM, PA 15084-0000

RUE DATE	POLICY TERM	This policy includes the later of:	
01/2017	05/08/2017 - 05/08/2018	A. 12:01 AM on the first day of the policy period; or	
		B. the binding time on the signed application on the first day of the policy period.	
		This policy shall expire at 12:01 AM on the last day of the policy period.	
Medical Expense Benefit Without Workers Comp	up to \$5,000 each person		\$28.0
Income Loss Benefit	Rejected		
Accidental Death Benefit	Rejected		
Funeral Expense Benefit	Rejected		
Comprehensive	\$500 deductible		\$201.0
Collision	\$500 deductible		\$1,027.0
		Vehicle 1:	\$4,846

SR PAYEE INFORMATION

Loss Payee Vehicle	Loss Payee Name	Loss Payee Address
2000 INTERNATIONAL 09001	FAIRVILLE PARTNERSHIP LP	4 HILLMAN DR #104
2HTCHASTZYC057881		CHADDAS FORD, PA 19317

HER INFORMATION

Is First Party Benefits
 Tort

REVIEWS

State or Federal Filings Required? No

FORMS AND ENDORSEMENTS

Forms or Endorsements listed here are available any time at www.MyAICPolicy.com. You may request, at no charge, for us to provide you a paper or electronic copy of these forms by either contacting your agent or us, at the numbers listed on these declarations.

- ACA-001 (09/14) Commercial Auto Policy
- ACA-003 (09/14) Mobile Equipment as Insured Auto Endorsement
- ACA-004 (09/14) Uninsured/ Underinsured Motorists Coverage Endorsement
- ACA-005 (09/14) First Party Benefits Coverage Endorsement
- ACA-012 (09/14) Cancellation and Nonrenewal Endorsement
- ACA-018 (09/14) Named Driver Exclusion
- Policy Policy (ver 6/2010)

ACA-024 (09/14)

INSURED COPY

2 of 3



Agency Insurance Company of Maryland, Inc.
 Box 6600, Ellicott City, MD 21075-6600 (800)482-6829

** AMENDED ** 08/01/2017

COMMERCIAL AUTOMOBILE POLICY DECLARATION

POLICY NUMBER: CA 0008785

NAMED INSURED
 MICHAEL BROWN
 DBA: MGO TRANSPORT
 1185 WOODBINE ST
 PITTSBURGH, PA 15201

AGENT (724)274-6384
 USA INSURANCE BROKERS LLC
 304 PITTSBURGH HILLS CTR
 TARENTUM, PA 15064-0000

EFF DATE	POLICY TERM	This policy inception the later of:
11/20/17	05/08/2017 - 05/08/2018	A. 12:01 AM on the first day of the policy period; or B. the binding time on the signed application on the first day of the policy period. This policy shall expire at 12:01 AM on the last day of the policy period.

which'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. The actual stated amount at every renewal in order to receive the best value from your Agency Insurance Company Commercial Auto Policy.

Anti-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, or in connection with any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Filing Notice

Issuance of federal and state filings may be delayed if a payment is made with a payment source that is not certified. Payments made by a check, may cause a delay in a filing issuance of up to 7 days. PACA-030 (08/14)

Authorized Officers

E. Scott Feltz *Bryan Johnson*
 President Secretary

MINIMUM FINANCIAL RESPONSIBILITY IDENTIFICATION CARD
It and must be shown to any Law Enforcement Officer upon request.
4175 AGENCY INSURANCE COMPANY OF MARYLAND, INC.
1 a vehicle with (800) 841-4261
LEAD MORE THAN 1 YEAR FROM EFFECTIVE DATE
CA 0008783 Policy Period: 05/08/2017 - 05/08/2018
JL BROWN
800 TRANSPORT
OODBONE ST
URIGH, PA 15281

Ins: USA INSURANCE BROKERS LLC at (714) 774-6364

As with respect to the following motor vehicle:

Make	Model	Vehicle Identification
INTERNATIONAL	99001	2HTCHAS1Z7C037861

THIS CARD MUST BE CARRIED FOR PRODUCTION UPON DEMAND.
IT IS SUGGESTED THAT YOU CARRY THIS CARD IN THE
DESIGNEE VEHICLE.

WARNING: Any owner or registrant of a motor vehicle who does
or permits a motor vehicle to be driven in this State without the
required financial responsibility may have his registration suspended
or revoked.

NOTE: THIS CARD IS REQUIRED WHEN:

- (1) You are involved in an auto accident.
- (2) You are involved in a traffic accident other than
a parking accident that requires a street stoppage.
- (3) You are stopped for violating any provision of
TITLE 17 (relating to the Vehicle Code) and requested
to produce it by a police officer.

You must provide a copy of this card to the Department of Transportation
when you request restoration of your operating privilege under registration
privilege which has been previously suspended or revoked.

SEE IMPORTANT MESSAGE ON REVERSE SIDE

IMPORTANT NOTICE Regarding your Financial Responsibility Insurance Identification Card.

Insurance Company of MD, Inc. is required by Pennsylvania law to send you an I. D. card. The card shows that
since policy has been issued for the vehicle(s) described satisfying the financial responsibility requirements of the

see the card, contact your insurance company or agent for a replacement.

card information may be used for vehicle registration and replacing license plates. If your liability insurance policy
the I. D. card is no longer valid.

required to maintain financial responsibility on your vehicle. It is against Pennsylvania law to use the I. D. card
only such as using the card as proof of financial responsibility after the insurance policy is terminated.

Michael Brown
MIGRO Transport LLC
1165 Woodlane St
Pittsburgh PA 15201

412-735-8256

PITTSBURGH PA 150
08 AUG 2017 PM 2 1



Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105

17105-326565

