

RECEIVED

2018 SEP 12 AM 10:42

PA PUC
SECRETARY'S BUREAU

Emmett St.Clair
2220 Kirkwood Pike
Kirkwood, PA 17536
September 10, 2018

RE: Emmett J St Clair Kathryn St Clair

Docket No. ~~C-2018-3004228~~
C-2018-3004228

Dear David Loucks;

I am writing to clear up the Complaint against me. I had changed insurance carriers as of August 5th, 2018. I have attached the new insurance Info for your review. By the time you receive this letter you should have the **Form E** from my new insurance carrier which is Simperts Insurance Company.

I also request after you are satisfied of the new coverage that you would remove the \$500.00 penalty for me as I did have insurance as of 8/12/2018.

I am sorry for the misunderstanding and my insurance carrier not getting the **Form E** to you, I just did not have control over that, nor knew of it not getting to you.

Have a wonderful day!



Emmett St.Clair

CC Rosemary Chiavetta, Michael L Swindler and Compliance Office



TO: Emmett St. Clair

Attn:

FAX: (717) 529-2372

PHONE:

DATE: 09/10/2018



Jack Henderson

Agency Owner

Simpers Insurance

224 E Street Rd

Kennett Sq, PA 19348

Phone: 610-444-2610 x19

Fax phone: 610-444-9629

Email: hendej17@nationwide.com

Pages:

Please notify sender if any pages missing

REMARKS: Urgent For your review Reply ASAP Please comment

Emmett,

I was able to locate the USDOT#. Our original search under your full name provided no results because for some reason it under only Emmett. Here is a copy. I will look into this and let you know what we need to do.

If you have any questions please feel free to contact me at our office

Thanks,

Jack Henderson

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Policy Number: FPKN BAN 30-0-8872389

Item Three - Schedule of Covered Autos You Own

Vehicle 001	Description 2018 DODGE RAM 2500 TRADESMAN	VIN Number 3C6UR5HL1JG127348	Class Code 0846900	Original Cost 48,345	New
	Garaging Location 2220 KIRKWOOD PIKE KIRKWOOD, PA 17536-9551		Premises ID	Territory 0123	

Coverage	Limit of Insurance	Deductible
LIABILITY	See Item Two	
FIRST PARTY BENEFITS	See Endorsement	
COMPREHENSIVE		500
COLLISION		500

Estimated Vehicle Premium

Additional Interest: Loss Payee
CITIZENS BANK
PO BOX 255587
SACRAMENTO, CA 95865-5587

Vehicle 002	Description 1996 FORD CLUBWAGON SCLUB 35	VIN Number 1FBJS31H1THA77467	Class Code 0846900	Original Cost 23,280	New
	Garaging Location 2220 KIRKWOOD PIKE KIRKWOOD, PA 17536-9551		Premises ID	Territory 0123	

Coverage	Limit of Insurance	Deductible
LIABILITY	See Item Two	
FIRST PARTY BENEFITS	See Endorsement	
COMPREHENSIVE		
COLLISION		

Estimated Vehicle Premium

Vehicle 003	Description 2015 DODGE GRAND CARAVAN SXT	VIN Number 2C4RDGCG9FR641918	Class Code 7382400	Original Cost 27,185	New
	Garaging Location 2220 KIRKWOOD PIKE KIRKWOOD, PA 17536-9551		Premises ID	Territory 0123	

Coverage	Limit of Insurance	Deductible
LIABILITY	See Item Two	
FIRST PARTY BENEFITS	See Endorsement	
COMPREHENSIVE		500
COLLISION		500

Estimated Vehicle Premium

Additional Interest: Loss Payee
CITADEL FED CU
PO BOX 72147
EXTON, PA 18341

**BUSINESS AUTO
DECLARATIONS**

55859

NATIONWIDE AGRIBUSINESS INS.-NAIC
1100 LOCUST ST DEPT 3000
DES MOINES, IA 50301-3000

Policy Number: **FPMN BAN 3008872399**

Item One

Policy Period From **07/05/2018** To **07/05/2019** 12:01 AM Standard Time at the mailing address below

Named Insured: **EMMETT J ST. CLAIR**
See Schedule

Mailing Address: **2220 KIRKWOOD PIKE**
KIRKWOOD, PA 17536-9551

Agency Name: **Stimpers Insurance**
Agency Address: **KENNETT SQUARE PA 19348**

37 55859-001 000 34 CSC
(610)444-2610

Form of Business **See Schedule**

In return for the payment of the premium, and subject to the terms of this policy, we agree with you to provide the insurance stated in this policy.

Item Two

Schedule of Coverages and Covered Autos

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS section of the Business Auto or Motor Carrier Coverage Form next to the name of the coverage.

Coverage	Covered Autos	Limit and Deductible - the most we will pay for any one accident or loss
LIABILITY	7 19	300,000
PERSONAL INJURY PROTECTION	5	See State Schedule
UNINSURED MOTORISTS	2	See State Schedule
UNINSURED MOTORISTS (WHEN NOT INCL IN UNINSURED MOTORISTS)	2	See State Schedule

COMPREHENSIVE COLLISION	7	Actual Cash Value or Cost of Repair Minus the Deductible In Item Three or Item Four

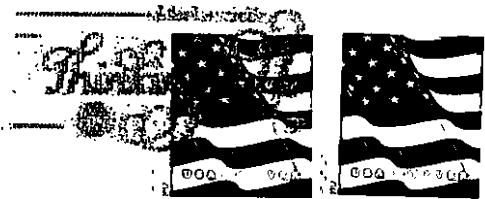
OTHER COVERAGES		See Schedule

THIS POLICY COVERS COLLISION DAMAGE TO RENTAL VEHICLES

Emmett St. Clair
2220 Kirkwood Pike
Kirkwood, PA 17536

HARRISBURG PA 171

10 SEP 2018 PM 8 L



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

God Bless America

17105X3265

