



You have submitted the following motor carrier insurance filings. Your application will be sent to the corresponding state agency automatically and **your account will be billed \$5.50**.

If you filed a paper filing, please print out the form now and either mail or fax it to the state. *Paper filings are not submitted to states via the system.*

Filing Summary

Insurance Information

Insurance Company

THE CINCINNATI INDEMNITY COMPANY

Authorized Signature LINDA JONES**Insurance Agent Id****Form Type** Form E**Reinstate** No

Certificate of Insurance

Policy Number EBA 050 54 17**USDOT #****FMCSA #****Underlying Limit** 0**Liability Limit** 1,000,000.00**Effective Date** 09/20/2018

Motor Carrier Information - Electronic Filing States

Pennsylvania

Insurer #**State MC ID** A-8919168**Legal Name** PRIME MOVING CENTER INC**DBA****Address** 1320 GREENVALLEY DR #11**City** PITTSBURGH**State** PA**Zip** 15220**Country****Notes**

Motor Carrier Information - Non-Electronic Filing States

No non-electronic filing states submitted.