

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
400 North Street
Harrisburg, PA 17120

May 24, 2019

Docket No. C-2019-3009854

Ms. Chiavetta,

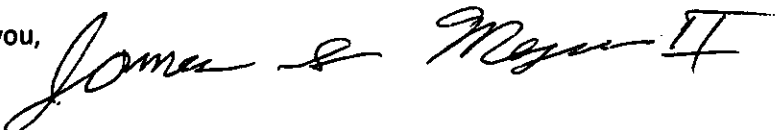
My commercial trucking policy was non-renewed by Harleysville/Nationwide Insurance Company on May 3, 2019. Harleysville/Nationwide said they were no longer interested in writing trucking policies.

I purchased Progressive policy 00669838-0 which was effective May 3, 2019. I have enclosed a copy of the declaration pages of the Progressive policy. I did not realize I needed to ask for a form E to be attached to the policy. I would have asked because there is no cost to add this form.

When I received the complaint, I requested my agent to add the form E to my policy. Progressive did add form E but made it effective as of the date of the request rather than the effective date of my policy. Progressive was told that the form had to be attached and effective as of the date of the policy. Progressive has repeatedly refused saying they would not back date forms. I think if Progressive writes a policy classified as a trucking risk, they should automatically add the required state forms.

My business address is still 4315 Forks Church Road in Easton, PA. I have maintained \$1,000,000 of commercial trucking and general liability insurance with no gap in coverage.

Thank you,



James S. Meyers II

cc: Michael L. Swindler, Deputy Chief Prosecutor
Pennsylvania Public Utility Commission
Bureau of Investigation and Enforcement
400 North Harrisburg, PA 17120

PA P.U.C.
SECRETARY'S BUREAU

2019 MAY 28 AM 10:52

RECEIVED

HUTH FRANK SONS INC
16 BELVIDERE ST
NAZARETH, PA 18064

PROGRESSIVE
COMMERCIAL

Named insured

JIM MEYERS II HAULING, LLC
4315 FORKS CHURCH RD
EASTON, PA 18040

Policy number: 00666938-0

Underwritten by:
United Financial Casualty Company
May 4, 2019
Policy Period: May 3, 2019 - May 3, 2020
Page 1 of 3

progressiveagent.com

Online Service

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

1-610-759-4900

HUTH FRANK SONS INC

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 May 3, 2019 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 May 3, 2020 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), 2433PA (03/11), 2371 (06/10), 4881PA (03/11), 4852PA (10/04) and Z228 (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.

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Outline of coverage

Auto coverage part

Description	Limits	Deductible	Premium
Liability To Others			\$3,201
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured Motorist - Nonstacked	\$100,000 combined single limit		22
Underinsured Motorist - Nonstacked	\$100,000 combined single limit		43
Basic First Party Benefit - Full Tort			21
Medical Expense Benefit Without Workers Comp	up to \$5,000		
Extraordinary Medical Benefits	Rejected		--
Income Loss Benefit Without Workers Comp	up to \$1,000 each month/\$15,000 maximum		12
Funeral Expense Benefit Without Workers Comp	up to \$2,500		4
Accidental Death Benefits	Rejected		--
Comprehensive			291
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			847
See Auto Coverage Schedule	Limit of liability less deductible		
Subtotal policy premium			\$4,441

Commercial General Liability coverage part

Description	Limits	Premium
Limited General Liability - Trucking Operations	\$1,000,000/\$1,000,000	\$365
Each Occurrence	\$1,000,000	
General Aggregate	\$1,000,000	
Products/Completed Operations Aggregate	\$1,000,000	included
Personal and Advertising Injury	\$1,000,000/any one person or organization	included
Damage to Premises Rented to You	\$100,000/any one premises	included
Medical Expense	\$5,000/any one person	included
Subtotal policy premium		\$365
Total 12 month policy premium		\$4,806

Rated driver

- JAMES MEYERS

Auto coverage schedule

- 1999 KW T80** Stated Amount: *\$80,000 (including Permanently Attached Equip)
 VIN: 1NKDLB0X6XJ819700 Garaging Zip Code: 18040 Radius: 100

Liability Premium	Liability	UM BI	UIM BI	PIP	Income Loss	Funeral Exp	
	\$3,201	\$22	\$43	\$21	\$12	\$4	
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium			Auto Total
	\$1,000	\$291	\$1,000	\$847			\$4,441

*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.

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

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE

DOT# NONE

Filed with the PENNSYLVANIA PUBLIC UTILITIES COMMISSION (hereinafter called Commission) of PO BOX 3265, HARRISBURG, PA 17105

This is to certify, that the United Financial Cas Co (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to JIM MEYERS II HAULING, LLC of 4315 FORKS CHURCH RD, EASTON, PA 18040-0000 a policy or policies of insurance effective from 05/23/2019 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State Commission, such thirty (30) days notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143

this 23rd day of May, 2019

Insurance Company File No. CA 00666938
(Policy Number)



(Authorized Company Representative)

MC1633a(08/99)

IR83539B

Jim Meyers
4315 Forks Church Road
Easton, PA 18040

LEHIGH VALLEY PA 180

25 MAY 2019 PM 3.1



Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
400 North St.
Harrisburg, PA 17120

17120-007999

