

REGULATORY FILING REQUEST

POLICY NUMBER: LIABILITY _____
 CARGO _____

POLICY LIMITS: LIABILITY _____
 CARGO _____

EFFECTIVE DATE: LIABILITY _____
 CARGO _____

EXPIRATION DATE: LIABILITY _____
 CARGO _____

INSURED: _____

ADDRESS: _____

SINGLE STATE REGISTRATION BASE STATE: _____

UNDERWRITER:

CHECK (v) "E" for Liability. "H" for Cargo and "HWY" for Highway (Oversize – Overweight) Filings.

ATTACH APPLICATIONS & FEES FOR ANY STATE WHERE REGISTERING AUTHORITY.

PERMIT #	E	HWY	H	PERMIT #	E	HWY	H	PERMIT #	E	HWY	H	CANADIAN PROVINCES	
FHWA (60) <small>required</small>		NR		LA				OH			HM		
AL			*	MA			NR	OK	<small>required</small>		NR	NR	AL (61) LIAB. NR CARGO NR permit no.
AR	<small>required</small>	MH	*	>MD		HZ MT*	NR	>OR			*	BC (62) bus only	
>AZ	<small>residents only</small>		NR	ME			NR	>PA	*		*	NB (63) NF (64) OT (66)	NR NR NR NR
CA	<small>specify type</small>		NR	MI		*	NR	RI	*		*	PE (67) SK (68) QB (69)	NR NR NR NR NR NR
CO	<small>required</small>		NR	MN			NR	SC			NR	*	
CT			NR	MS	<small>required</small>		*	SD			NR	NR	
>DE		NR		MO			NR	TN			NR	*	
>FL	<small>required</small>		NR	MT		*	NR	TX			NR	HM	
GA			HM	NE			MH	UT				NR	
ID	<small>residents only</small>	*	NR	>NV	<small>bus only</small>		MH	>VT			NR	NR	
>IL	<small>required</small>		NR	>NJ		*	NR	VA		*	NR	*	INTMOD (70)
IN		ICC NR	ICC NR	NM	<small>required</small>		ICC NR*	WA	<small>required</small>		NR	NR	COVERAGES
IA			NR	NY	<small>required</small>		*	WV			NR	*	AL <input type="checkbox"/>
KS	<small>permit no.</small>		NR	NC				WI		ICC NR		NR	GL <input type="checkbox"/>
KY			NR	ND		NR	NR	>WY		*	NR	*	TI & DED <input type="checkbox"/>

FHWA Docket No. _____ Old Policy No. _____ Date Mailed _____
NR:Not Required *Intrastate Only >Non-Participating State HM:Household Movers Only MH:Mobile Homes Only

SPECIAL INSTRUCTIONS _____

AGENT: _____ (Underwriter's Name & Date)