

CALIFORNIA FLEET AUTO INSURANCE IDENTIFICATION CARD

COMPANY NUMBER
10200

COMPANY NAME AND ADDRESS
**Hiscox Insurance Company Inc.
233 N Michigan Ave., Suite 1840
Chicago, IL 60601**

POLICY NUMBER
US UAE 2725688.25

EFFECTIVE DATE EXPIRATION DATE
09/10/2025 09/10/2026

**THIS POLICY MEETS THE REQUIREMENTS OF § 16056 OR § 16500.5 OF THE
CALIFORNIA VEHICLE CODE AND IS A COMMERCIAL OR FLEET POLICY**

YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
2021	RSRCT T40 3RM	1R9BC4030MR772092

AGENCY/COMPANY ISSUING CARD
**NFP Property & Casualty Services, Inc.
2450 Tapo Street
Simi Valley, CA 93063**

INSURED

┌ **Three Amigos Studio Transportation, LLC
28523 Shana Place
Santa Clarita, CA 91350**

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SEE IMPORTANT NOTICE ON REVERSE SIDE

**THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND**

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

3 Room #303



PERMANENT TRAILER IDENTIFICATION CARD

MAKE	YR MODEL	YR 1ST SOLD	VLF CLASS	TYPE VEH	TYPE LIC	LICENSE NUMBER
RSRC	2021	2021	WB	42F	PA	4UB1823
BODY TYPE MODEL	MP	MO	AX	WC	UNLADEN WT	VEHICLE ID NUMBER
UTIL		CG	2	A	01008	1R9BC4030MR772092
TYPE VEHICLE USE		DATE ISSUED	CC/ALCO	DT FEE RECVD	PIC	
TRAILER		07/12/21	19	07/09/21	5	

EXP DATE: PERM

REGISTERED OWNER

THREE AMIGOS STUDIO
TRNSPRTN LLC
23523 SHANA PL

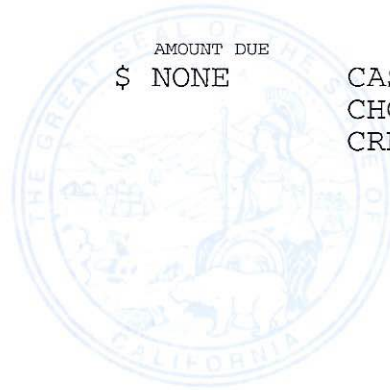
AMOUNT PAID
\$NFEE

SAUGUS
CA

91350

AMOUNT DUE
\$ NONE

AMOUNT RECVD
CASH :
CHCK :
CRDT :



LIEN HOLDER

K00 659 28 0000000 0016 CB K00 070921 PA 4UB1823 092