## CALIFORNIA FLEET AUTO INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

COMPANY NAME AND ADDRESS

10200

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

1996

Dorsev Trailer

1DTV11Z27TA247986

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.

ACORD 52 CA (2007/07)

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THIS VALIDATED PERMANENT TRAILER IDENTIFICATION (PTI) CARD OR A FACSIMILE COPY IS TO BE KEPT WITH THE VEHICLE FOR WHICH IT IS ISSUED. THIS REQUIREMENT DOES NOT APPLY WHEN THE VEHICLE IS LEFT UNATTENDED. IT NEED NOT BE DISPLAYED. PRESENT IT TO ANY PEACE OFFICER UPON DEMAND. PTI IS VALID FOR FIVE (5) YEARS FROM THE DATE OF CONVERSION OR FIRST OPERATION. IF YOU DO NOT RECEIVE A RENEWAL NOTICE, USE A FACSIMILE COPY OF THIS FORM TO PAY YOUR RENEWAL FEES OR NOTIFY THE DEPARTMENT OF MOTOR VEHICLES OF THE NON-OPERATIONAL (PNO) STATUS OF A STORED VEHICLE.

IMMEDIATELY NOTIFY DMV IN PERSON OR BY MAIL ON THE PROPER DMV FORMS WHEN:

- \* YOU CHANGE YOUR ADDRESS.
- \* YOU SELL YOUR TRAILER.
- \* YOU ARE INVOLVED IN AN ACCIDENT (WHETHER OR NOT IT WAS YOUR FAULT) WHEN THERE WAS OVER \$750 DAMAGE OR ANY BODILY INJURY OR DEATH.

WHEN WRITING TO DMV, ALWAYS GIVE YOUR FULL NAME, PRESENT ADDRESS, AND THE VEHICLE MAKE, LICENSE, AND IDENTIFICATION NUMBERS.

\*\*\*\*\*\*\*\*\*\* DO NOT DETACH - PTI OWNER INFORMATION \*\*\*\*\*\*\*\*\*\*\*\*



PERMANENT TRAILER IDENTIFICATION CARD

YR 1ST SOLD VLF CLASS \*YR TYPE VEH TYPE LIC LICENSE NUMBER 1996 1996 CV 2012 42V PA BODY TYPE MODEL MP MO AX WC UNLADEN WT VEHICLE ID NUMBER VAN 2 CD P 14160 1DTV11Z27TA247986 TYPE VEHICLE USE DATE ISSUED CC/ALCO DT FEE RECVD TRAILER 04/21/21 19 04/21/21

REGISTERED OWNER

TRHEE AMIGOS STUDIO TRANSPORTATION LLC 28523 SHANA PL

SAUGUS CA

91350

LIENHOLDER

AMOUNT DUE AMOUNT RECVD 7.00 CASH:

CHCK: 7.00
CRDT:

EXP DATE: PERM

AMOUNT PAID

7.00