

Form H
Uniform Motor Carrier Cargo
Certificate of Insurance

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DEC 13 2011

WASH. UT. & TR. COMM

Filed with Washington Utilities & Transportation Commission (hereinafter called Commission)
(Name of Commission)

This is to certify that the AGCS Marine Insurance Company
(Name of Company)

Docket TV-112194
Exhibit No. (TL-9)
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(herein after called Company) of 33 West Monroe Street, Chicago, IL, 60603
(Home Address of Company)

has issued to ASM LLC (DBA) All Service Moving
(Name of Motor Carrier)

of 6312 Southeast 14th Avenue, Portland, OR, 97202
(Address of Motor Carrier)

A policy or policies of insurance effective from 12/01/2011 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 Cargo Insurance Endorsement has or have been amended to provide cargo 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 effective 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 500 N. Akard, Suite 500 Dallas TX 75201 this 07th day of
(STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

Dec 20 11

Insurance Company File No. MX193026575
(Policy Number)

John Quinn
(Authorized Company Representative)

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

Docket TV-112194
Exhibit No. ____ (TL-9)
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(EXECUTED IN TRIPLICATE)

Filed with WUTC _____ (hereinafter called Commission)
(Name of Commission)

This is to certify, that the ZURICH AMERICAN INSURANCE COMPANY OF ILLINOIS
(Name of Company)

(hereinafter called Company) of SCHAUMBURG IL
(Home Office Address of Company)

has issued to ASM LLC DBA: ALL SERVICE MOVING of 6312 SE 14TH AVE PORTLAND OR 97202
(Name of Motor Carrier) (Address of Motor Carrier)

a policy or policies of insurance effective from December 6, 2011 12:01 A.M., standard time at the address of the insured stated in said policy or policies and continuing until canceled 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 canceled 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 1333 S RUSTLE RD SPOKANE WA 99224
(STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

this 6TH day of DECEMBER 2011

INS. CO. ID# _____

Thomas E. Cochran (DE)
(Authorized Company Representative)

Insurance Company File No TRK-9194573-01
(POLICY NUMBER)

PO Box 19150, Spokane WA 99219
(Address of Authorized Company Representative)