M-5446 (01/2010)

FORM H **UNIFORM MOTOR CARRIER CARGO** CERTIFICATE OF INSURANCE

(EXECUTED IN TRIPLICATE)

| | | (hereinafter called Commission) | |
|---------------|-------------------------------------|---|--|
| (1 | Name of Commission) | | |
| at the | National Indemnity Cor | mpany | |
| | (Name of Company) | | |
| pany) of | 3024 Harney Street, Omaha, NE 68131 | | |
| | (Home Office Address of Com | ipany) | |
| has issued to | B & Z MOVING LLC | , | |
| | (Name of Motor Carrier) | | |
| | 107 134TH ST E, TACOMA, WA | A 98445 | |
| | (Address of Motor Carrier | r) | |
| | nat the | (Name of Company) npany) of <u>3024 Harney Street, O</u> (Home Office Address of Com <u>B & Z MOVING LLC</u> (Name of Motor Carrier) 107 134TH ST E, TACOMA, W | |

_12:01 A.M. standard time at the address of a policy or policies of insurance effective from 03/23/2013 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 effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to confinence to run from the date notice is actually received in the office of the Commissioner.

| Countersigned at | 3024 Harney Street | · · · · · · · · · · · · · · · · · · · | Omaha | | <u>68131</u> | <u> </u> |
|------------------|--------------------|---------------------------------------|-------|------------------|--------------|----------|
| | (Street Address) | (City) | | (State) | (ZIP Code) | |
| this | 27th | day of | March | , 20 <u></u> 13 | | |
| | | | | Ton Baller | | |
| | | | | Authorized Repre | esentative | |
| | | | | | | |
| Insurance Compar | v File No. | 70MTS010412 | | | | |

Insurance Company File No.

(Policy Number)

This form determined by the National Association of Regulatory Utilities Commissioners and promulgated pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C. § 302[b][2]) and 49 CFR § 387.301