	ACORD, CERTI	FIGATE OF LIABII	JTY INS	URANC	L-1 L-1	04/18/2017			
PR	RODUCER IVES GROUP OF COMPANIES 101 WEST BIG BEAVER RD, 1	Serial # 10425 6 USA INC.	THIS CER ONLY AN HOLDER.	TIFICATE IS ISSI D CONFERS N THIS CERTIFICA	JED AS A MATTER OF O RIGHTS UPON TH ATE DOES NOT AMEN	FINFORMATION E CERTIFICATE ID, EXTEND OR			
	TROY, MICHIGAN 48084		7.2.2.	ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. COMPANIES AFFORDING COVERAGE					
			COMPANY	COMPANY CHEROKEE INSURANCE COMPANY					
IN	SURED ASAP EXPRESS &	LOGISTICS INC.	COMPANY	The design of the second of th					
	28825 HIGHLAND I ROMULUS, MICHIO		COMPANY						
	48174		COMPANY						
CC	INDICATED, NOTWITHSTANDING CERTIFICATE MAY BE ISSUED O	POLICIES OF INSURANCE LISTED BELOW IS BANY REQUIREMENT, TERM OR CONDITION OR MAY PERTAIN, THE INSURANCE AFFOR OF SUCH POLICIES, LIMITS SHOWN MAY I	ON OF ANY CONTR	ACT OR OTHER DO	CUMENT WITH RESPECT T EREIN IS SUBJECT TO ALL	O WHICH THIS			
CO	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	rs			
	GENERAL LIABILITY			1	GENERAL AGGREGATE	\$			
	COMMERCIAL GENERAL LIABILITY	1			PRODUCTS - COMP/OP AGG	S			
	CLAIMS MADE OCCUR	1		1	PERSONAL & ADV INJURY	S			
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$			
	<u> </u>	1			FIRE DAMAGE (Any one fire)	\$			
-	AUTOMOBILE LIABILITY				MED EXP (Any one person)	s			
Α	ANY AUTO	CA170082	05/01/2017	05/01/2018	COMBINED SINGLE LIMIT	s 2,000,000			
	X ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	s			
	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	s			
	X TRAILER INTERCHANGE X \$30,000 LIM/\$1000 DED.				PROPERTY DAMAGE	s			
	GARAGE LIABILITY	100 to 10	1		AUTO ONLY - EA ACCIDENT	s			
	ANY AUTO		1000		OTHER THAN AUTO ONLY:				
					EACH ACCIDENT	s			
- 20					AGGREGATE	s			
	EXCESS LIABILITY		4		EACH OCCURRENCE	s			
	OTHER THAN UMBRELLA FORM				AGGREGATE	s s			
	WORKER'S COMPENSATION AND				WC STATU- TORY LIMITS ER				
	EMPLOYERS' LIABILITY	}			EL EACH ACCIDENT	s			
	PARTNERS/EXECUTIVE INCL	l i	ĺ		EL DISEASE - POLICY LIMIT	5			
	OFFICERS ARE: EXCL				EL DISEASE - EA EMPLOYEE	s			
A	OTHER MOTOR CARGO INCL REEFER PHYSICAL DAMAGE	MC170054 PD170056	05/94/2017 05/01/2017		\$250,000 LIMIT/ \$2,50 \$1,500 DEDUCTIBLE	0 DED.			
DESC	RIPTION OF OPERATIONS/LOCATIONS/VEI	HICLES/SPECIAL ITEMS		1		6			
CEI	RTIFICATE HOLDER		CANCELLATIO	M					
-	ASAP EXPRESS & L 28825 HIGHLAND RI ROMULUS, MICHIGA 48174	D	SHOULD ANY EXPIRATION I 15 DAYS V BUT FAILURE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.					
2012			AUTHORIZED REPR	AUTHORIZED REPRESENTATIVE					

ACORD 25-S (1/95)

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PRODUCER Serial # 104255 IVES GROUP OF COMPANIES USA INC. 101 WEST BIG BEAVER RD, 10TH FLOOR TROY, MICHIGAN 48084			TY INSURANCE 02/02/2018 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. COMPANIES AFFORDING COVERAGE					
7110 17 1110 1110 7111 40004		COMPANY	COMPANY CHEROKEE INSURANCE COMPANY					
SURED		COMPANY	A					
ASAP EXPRESS	В	B COMPANY C COMPANY						
28825 HIGHLAND ROMULUS, MICH								
48174	COMPANY							
OVERAGES		TO THE STATE OF TH	engyyddianaengastistik					
INDICATED, NOTWITHSTANDI CERTIFICATE MAY BE ISSUED	E POLICIES OF INSURANCE LISTED BEI NG ANY REQUIREMENT, TERM OR CON OOR MAY PERTAIN, THE INSURANCE A NS OF SUCH POLICIES, LIMITS SHOWN	IDITION OF ANY CONTRA FFORDED BY THE POLICE	ACT OR OTHER DOC DIES DESCRIBED HE	CUMENT WITH RESPECT TO EREIN IS SUBJECT TO ALL	O WHICH THIS			
TYPE OF INSURANCE	TYPE OF INSURANCE POLICY NUMBER		POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS				
GENERAL LIABILITY				GENERAL AGGREGATE	\$			
COMMERCIAL GENERAL LIABILIT	~			PRODUCTS - COMP/OP AGG	s			
CLAIMS MADE OCC	UR			PERSONAL & ADV INJURY	s			
OWNER'S & CONTRACTOR'S PR	от			EACH OCCURRENCE	\$			
		. 1		FIRE DAMAGE (Any one fire)	\$			
				MED EXP (Any one person)	\$			
AUTOMOBILE LIABILITY ANY AUTO	CA170082	05/01/2017	05/01/2018	COMBINED SINGLE LIMIT	s 2,000,000			
X ALL OWNED AUTOS X SCHEDULED AUTOS				BODILY INJURY (Per person)	s			
X HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$			
X TRAILER INTERCHANGE X \$30,000 LIM/\$1000 DED.	-			PROPERTY DAMAGE	s			
GARAGE LIABILITY	20 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THOUSAND DATE	- 2709	AUTO ONLY - EA ACCIDENT	\$			
ANY AUTO				OTHER THAN AUTO ONLY:				
				EACH ACCIDENT	\$			
				AGGREGATE	s			
EXCESS LIABILITY			12 008.71	EACH OCCURRENCE	\$			
UMBRELLA FORM	4			AGGREGATE	\$			
OTHER THAN UMBRELLA FORM					\$			
WORKER'S COMPENSATION AND			SHE SHE	WC STATU- TORY LIMITS ER	1			
EMPLOYERS' LIABILITY			la de	EL EACH ACCIDENT	s			
THE PROPRIETOR/ PARTNERS/EXECUTIVE	CL			EL DISEASE - POLICY LIMIT	\$			
	KCL	17571271111		EL DISEASE - EA EMPLOYEE	\$			
OTHER		W. W						
MOTOR CARGO INCL REEFER PHYSICAL DAMAGE	MC170054 PD170056	05/01/2017 05/01/2017	05/01/2018 05/01/2018	\$250,000 LIMIT/ \$2,5 \$1,500 DEDUCTIBLE				
SCRIPTION OF OPERATIONS/LOCATIO	NSA/ENICI ESISPECIAL ITEMS			1	100000000000000000000000000000000000000			
NIT# 2031TN - 2012 FREITH	ILINER, VIN# 1FUJGLBG5C5BL		λ	arris 22				
ASAP EXPRESS & LOGISTICS INC. 28825 HIGHLAND RD ROMULUS, MICHIGAN 48174			CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.					
			AUTHORIZED REPRESENTATIVE © ACORD CORPORATION 1					

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CERTIFICATE OF LIABILITY INSURANCE

6/12/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRO	DDUCER			NAME: D		auner			
VTC Insurance Group				PHONE (A/C, No. Ext): (248) 828-3377 FAX (A/C, No): (248) 828-3741					
Tr	oy Office			E-MAIL ADDRESS: dzauner@vtcins.com					
1175 W. Long Lake Ste. 200								NAIC#	
Tr	oy MI 480	98-496	50	INSURER A :	William result 1			**	23620
INSL	URED			INSURER & Burlington Insurance Company 23620 INSURER & Hallmark Specialty Insurance				20020	
AS	AP Express & Logistics Inc.			INSURER C Travelers					
28	825 Highland Bldg. 7								25895
				INSURER E:				20050	
Ro	mulus MI 481	.74		INSURER F:					
co	VERAGES CFR	TIFICAT	ENUMBER:17/18 Rev		ter		REVISION NUMBER:	10000	
C	HIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY REERTIFICATE MAY BE ISSUED OR MAY INCLUSIONS AND CONDITIONS OF SUCH	QUIREME PERTAIN, POLICIES	ENT, TERM OR CONDITION THE INSURANCE AFFORD S. LIMITS SHOWN MAY HAVE	OF ANY CO DED BY THE BEEN REDI	NTRACT POLICIE UCED BY	THE INSUR OR OTHER S DESCRIBE	ED NAMED ABOVE FOR DOCUMENT WITH RESP D HEREIN IS SUBJECT	ECT TO	WHICH THIS
VSR TR	TYPE OF INSURANCE	ADDL SUBI	POLICY NUMBER	POL (MM/I	JCY EFF DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS	
ADD I	COMMERCIAL GENERAL LIABILITY			1			EACH OCCURRENCE	5	1,000,000
A	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	s	100,000
-03.	and the second of the second		457B004144	6/1	1/2017	5/11/2018	MED EXP (Any one person)	\$	5,000
				[S 1]			PERSONAL & ADV INJURY	s	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	s	2,000,000
	X POLICY PRO- LOC			1	- 1		PRODUCTS - COMP/OP AGG	s	2,000,000
	OTHER:				1		PRODUCTS - COMPIOP AGG	\$	
_	AUTOMOBILE LIABILITY	_		-			COMBINED SINGLE LIMIT (Ea accident)	s	
	ANY AUTO						(Ea accident) BODILY INJURY (Per person)	s	
	ALL OWNED SCHEDULED			- 1	- 1		BODILY INJURY (Per accident	_	
	NON-OWNED							\$	
	HIRED AUTOS AUTOS			L			PROPERTY DAMAGE (Per accident)	-	
_	UMBRELLA LIAB X OCCUP							\$	
	- OCCUR			1	Į.		EACH OCCURRENCE	\$	1,000,000
В	L CONMS-MADE						AGGREGATE	s	1,000,000
-	DED RETENTIONS WORKERS COMPENSATION		77HX1741B0 - All Lines	6/1:	1/2017	6/11/2018	DEP LOTH	s	
	AND EMPLOYERS' LIABILITY YIN	N/A					X PER OTH-	-	
	I ANY PROPRIETOR/PARTNER/EXECUTIVE				- 1		E.L. EACH ACCIDENT	s	1,000,000
C	(Mandatory in NH)		UB0G118658	6/2	3/2017	6/23/2018	E.L. DISEASE - EA EMPLOYE	5	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
D	Excess Liability		XL1566983B - GL Only	6/1:	1/2017	6/11/2018	Each Occurrence Limit		\$1,000,000
				1			General Aggregatge Limit		\$1,000,000
ES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACOR	 ID 101, Additional Remarks Sched	lule, may be atta	ached if mo	ore space is requ	uired)	***************************************	
CEI	RTIFICATE HOLDER		2000	CANCELL	ATION	-	-	13.0	
****For Informational Purposes Only****				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
				AUTHORIZED	REPRESEN	NTATIVE			
				Alan Cha			alant. Ch	Pand	a
					@ 100	8-2014 ACC	DD COPPODATION	A II -: L	40 2000