

FMCSA Motor Carrier

USDOT Number: **2215486**
Docket Number: **MC247841**
Legal Name: **PARTNERSHIP LLC**
DBA (Doing-Business-As) Name



Addresses

Business Address: **500 EAST LORAIN STREET
OBERLIN, OH 44074**
Business Phone: **(800) 599-2902** Business Fax:
Mail Address:
Mail Phone: Mail Fax: Undeliverable Mail: **NO**

Authorities:

Common Authority:	NONE	Application Pending:	NO	
Contract Authority:	NONE	Application Pending:	NO	
Broker Authority:	ACTIVE	Application Pending:	NO	
Property:	YES	Passenger:	NO	Household Goods: NO
Private:	NO	Enterprise:	NO	

Insurance Requirements:

BIPD Exempt:	NO	BIPD Waiver:	NO	BIPD Required:	\$0	BIPD on File:	\$0
Cargo Exempt:	NO			Cargo Required:	NO	Cargo on File:	NO
BOC-3:	YES			Bond Required:	YES	Bond on File:	YES

Blanket Company: **ACE LICENSING & PERMITS INC**

Comments: **1/27/04 TRANSFER FILED; CONSUMMATION DUE 2/6/04/**

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 12/11/2015
Policy/Surety Number: 2015120191	Coverage From: \$0	To: \$75,000 *
Effective Date: 12/08/2015	Cancellation Date:	

Insurance Carrier: **AMERICAN ALTERNATIVE INSURANCE CORPORATION**
Attn: **TO REPORT A CLAIM CALL 800-305-4954**
Address: **555 COLLEGE RD E
PRINCETON, NJ 08540 US**
Telephone: Fax:

* If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

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Rejected Insurances:

Form:	Type:	Coverage From:	\$0	To:	\$0
Policy/Surety Number:		Received:	Rejected:		
Rejected Reason:					

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Insurance History:

Form: 84	Type: SURETY				
Policy/Surety Number: RN 4655489	Coverage From	\$0	To:	\$10,000 *	
Effective Date From: 02/21/1992	To: 05/10/2004	Disposition: Transferred			

Insurance Carrier: HARTFORD FIRE INSURANCE COMPANY
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: ONE HARTFORD PLAZA
HARTFORD, CT 06115 US
Telephone: (860) 547 - 5000 Fax:

Form: 84	Type: SURETY				
Policy/Surety Number: RN 4655489	Coverage From	\$0	To:	\$10,000 *	
Effective Date From: 02/21/1992	To: 02/21/2004	Disposition: Replaced			

Insurance Carrier: HARTFORD FIRE INSURANCE COMPANY
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: ONE HARTFORD PLAZA
HARTFORD, CT 06115 US
Telephone: (860) 547 - 5000 Fax:

Form: 84	Type: SURETY				
Policy/Surety Number: 45BSBCU5639	Coverage From	\$0	To:	\$10,000 *	
Effective Date From: 02/21/2004	To: 10/01/2013	Disposition: Replaced			

Insurance Carrier: HARTFORD FIRE INSURANCE COMPANY
Attn: PLEASE CONTACT YOUR LOCAL AGENT
Address: ONE HARTFORD PLAZA
HARTFORD, CT 06115 US
Telephone: (860) 547 - 5000 Fax:

Form: 84	Type: SURETY				
Policy/Surety Number: 1203404	Coverage From	\$0	To:	\$75,000 *	
Effective Date From: 10/01/2013	To: 12/08/2015	Disposition: Replaced			

Insurance Carrier: THE CINCINNATI INSURANCE CO.
Attn: TIMOTHY W. SCHMITTOU
Address: P O BOX 145496
CINCINNATI, OH 45214 US
Telephone: (513) 870 - 2000 Fax: (513) 870 - 2980

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Authority History:				
Sub No.	Authority Type	Original Action	Disposition Action	
	PROPERTY BROKER	GRANTED	04/05/2004	
0	PROPERTY BROKER	GRANTED	04/28/1992	TRANSFERRED 04/05/2004

Pending Application:				
Authority Type	Filed	Status	Insurance	BOC-3

Revocation History:			
Authority Type	1st Serve Date	2nd Serve Date	Reason