

FMCSA Motor Carrier

USDOT Number: **3162223**
Docket Number: **MC112003**
Legal Name: **ACCREDITED AUTO TRANSPORT LLC**
DBA (Doing-Business-As) Name



Addresses

Business Address: **4450 BELDEN VILLAGE ST NW STE 208
CANTON, OH 44718**
Business Phone: **(800) 990-5818** Business Fax: **Fax: (330) 915-4849**
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: **#1 A BOC-3 FILING INC**

Comments:

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 08/14/2019
Policy/Surety Number: 615110490	Coverage From: \$0	To: \$75,000 *
Effective Date: 08/12/2019	Cancellation Date:	

Insurance Carrier: **UNITED STATES FIRE INSURANCE CO.**
Attn: **TO REPORT A CLAIM CALL 888-890-1500**
Address: **305 MADISON AVE.
MORRISTOWN, NJ 07962-1973 US**
Telephone: **(973) 490 - 6000** Fax: **(973) 490 - 6448**

* 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:					

Insurance History:

Form:	Type:	Coverage From:	\$0	To:	\$0
Policy/Surety Number:		Effective Date From:	To:	Disposition:	
Insurance Carrier:					
Attn:					
Address:					
Telephone:					
Fax:					

Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	PROPERTY BROKER	GRANTED	08/22/2019

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason