



ADMINISTRATIVE/BOOKKEEPING

PO BOX 151

WEISER, ID 83672-0151

(208) 549-2953 (877) 596-1171 FAX

jonna@actiontruckbrokerage.com and kimberley@actiontruckbrokerage.com

LAURA-MERIDIAN, ID

(208) 887-8565

(877)265-6816 FAX

laura@actiontruckbrokerage.com

JULIE-SPARKS, NV

(775) 673-1101

(775) 673-6216 FAX

julie@actiontruckbrokerage.com

BECKY-FILER, ID

(208) 944-2762

(877) 265-8018 FAX

becky@actiontruckbrokerage.com

Dear Valued Customer:

Thank you for choosing Action Truck Brokerage as your service provider. We realize that you have many choices and we truly appreciate your business.

At this time, we are sending out our new credit application and agreement for you to sign. Please note that in lieu of submitting your financial information, we are pleased to offer ACH debit, which is a dependable, hassle free method of payment. ACH Debit allows your bank and our bank to exchange funds electronically, according to a schedule agreeable to both parties. If you are interested in this form of payment in lieu of submitting your financial information, please fill out the authorization agreement and return the signed confirmation along with the application. To clarify, if you are setting up an ACH account, there is no need to update your financial information.

For your convenience, we also accept credit cards. You may pay by phone by calling our office at 208-549-2953 or you can go to our website www.actiontruckbrokerage.com, click on the customers tab, then the pay now link on the right hand side and enter your information. This is a quick and easy way to pay your invoices.

Other terms may be available upon request, kindly call our office to discuss.

Please return the signed application and agreement via fax, 877-596-1171, or via email to kimberley@actiontruckbrokerage.com. Thank you for your business.

Regards,

Action Truck Brokerage



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becky@actiontruckbrokerage.com

CREDIT APPLICATION

I hereby apply to Action Truck Brokerage for credit account and submit the following in consideration thereof, for the exclusive and confidential use of Action Truck Brokerage.

COMPANY INFO

Name: _____ Phone: _____
Address: _____ Fax: _____
City, State, Zip: _____ A/P Supervisor: _____

For more locations please use page a separate page.

Please indicate your choice of billing method; Fax or email: _____

What do you require for invoicing?

☐ Proof of Delivery ☐ Scale Tickets ☐ Hard Copy ☐ Other: _____

Principal owners, stockholders or officers:

Name	Address	Title
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Other _____

Social Security #, if not corporation: _____ If Corp., what state: _____ Federal ID# _____

Credit Limit Desired: \$ _____ Year Business Established: _____ Years at this location: _____

Bank name and account #: _____

Please complete and return by fax along with a list of credit references. Please attach any additional phone #'s, Extensions and email addresses that would assist us in servicing your needs.

Name Title Date



APPLICATION AND CREDIT AGREEMENT

In submitting this application dated _____, 20____, to Action Truck Brokerage hereinafter called "Action", the Customer, _____, hereinafter called "customer" agrees to the following terms:

To pay all undisputed charges billed by Action, so that payment in full is received by Action within 14 days of the invoice date.

Action may assess a late payment finance charge on any freight transportation charges paid delinquent, at a rate of one and a half percent (1.5%) per month, per annum, interest, on past due invoices. The late payment finance charge shall be assessed for each day beyond the credit period that payment is not made.

Failure to make timely payments to Action may result in the cancellation or suspension of any credit extended.

Customers who are frequently delinquent or remain delinquent for an extended period of time to Action, shall either have their extended credit cancelled, or will be required to enroll in automatic ACH Debit for continued service. Additionally, any account that is past due may be sent to collections and will be charged reasonable collection costs or attorney fees.

This Credit Agreement supersedes any and all other expressed or implied contracts with regards to credit terms, contains the entire understanding of both parties, has been executed by their duly authorized officers, and may only be waived or modified by a written amendment.

Accepted and Agreed

Action Truck Brokerage

Customer

By _____ Date _____

By _____ Date _____

Print Name _____

Print Name _____

Title _____

Title _____



AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Customer Name, _____
("Customer") hereby authorizes Action Truck Brokerage, hereinafter called "Action" to initiate debit entries to its

(select one)

☐ Checking Account

☐ Savings Account

indicated below at the depository financial institution named below, hereinafter called "depository," and to debit the same to such account, Customer acknowledges that the origination of ACH transactions to its account must comply with the provisions of U.S. Law,

Depository Name: _____

Branch: _____

City: _____

State: _____ Zip: _____

Routing #: _____

Account #: _____

This authorization is to remain in full force and effect until Action has received written confirmation from Customer of its termination in such time and in such manner as to afford Customer and Action a reasonable opportunity to act on it,

By: _____

Name: _____

Title: _____

Date: _____

SHIPPER-BROKER AGREEMENT

This Shipper-Broker Agreement (herein referred to as "Agreement") is made and entered into between:

Action Truck Brokerage, an Idaho business, whose address is 194 E. Commercial, PO Box 151, Weiser, Idaho 83672 (hereinafter referred to as "Broker"), is a licensed property broker pursuant to USDOT # 2213195 and Docket No. MC-184555; and

_____, whose address is _____, (hereinafter referred to as "Shipper").

WHEREAS, Action Truck Brokerage, as a property broker, arranges for transportation of general commodities ("Goods");

WHEREAS, Shipper, to satisfy some of its transportation needs, desires Action Truck Brokerage to arrange for transportation of Shipper's Goods; and

WHEREAS, it is the intent of the parties that Broker provide the services described in this Agreement to Shipper as a property broker;

NOW THEREFORE, in consideration of the foregoing premises and of the mutual promises herein contained, the Broker and the Shipper hereby agree as follows:

1. Services. Broker agrees to arrange for transportation by motor carriers (the "Motor Carriers") for Shipper pursuant to the terms and conditions of this Agreement. Broker's responsibility under this Agreement will be limited to arranging for, but not actually performing, transportation.

1.1. Selection of Carriers. Broker agrees and warrants that in the selection of Motor Carriers to transport Shipper's Goods, it will observe and enforce the following procedure:

1.1.1. Federal and State Regulatory Agencies. The Motor Carrier shall have registered with the federal and state regulatory agencies as required by applicable federal or state law, and such authority shall cover the commodities and geographical scope of all transportation provided under this Agreement.

1.1.2. Insurance. The Motor Carrier shall carry public liability, property damage and in such minimum amounts as may be required by law, cargo insurance in an amount not less than \$100,000 or such higher amount as requested by the Shipper, and worker's compensation insurance as may be required under state law unless otherwise exempted.

1.1.3. Liability. The Motor Carrier shall be required to assume the liability of a

motor carrier pursuant to the provisions of 49 USC §14706 (the "Carmack Amendment") for loss or damage to Goods and the claim regulations in 49 C.F.R. §370 for any loss, damage or delay to Shipper's Goods while in its possession. Broker shall not agree to any limitation of liability for loss, damage or delay without the advance written authorization of Shipper. It is also agreed that any limitations of liability which may be incorporated by reference in a Bill of Lading without the Shipper's knowledge or written consent are null and void.

2. Independent Contractor Relationship. It is understood and agreed that the relationship between Broker and the Shipper is and will remain that of independent contractor and that no employer/employee relationship between them exists or is intended.

3. No Exclusivity. Shipper is not restricted from tendering shipments to other brokers or directly to motor carriers. Broker is not restricted from arranging transportation for entities other than Shipper.

4. Compensation.

A. Broker will invoice Shipper for its services based on this Agreement and negotiated rates and charges as set forth in the Transportation Agreement(s) included herewith or subsequently incorporated herein by this reference. See Schedule A annexed hereto. Each such Transportation Agreement shall be incorporated into this Agreement.

B. Shipper agrees to pay Broker within 14 days of invoice date. Broker shall charge interest of 0% per year (or the highest lawful rate, if less) for any delayed payment.

C. If either party has a claim against the other relating to the amount invoiced and/or collected, notice of such claim must be given to the other party within Ten (10) days of receipt of the invoice. Under no circumstances will either Broker or Shipper be liable for any consequential, indirect, incidental, or punitive damages of any kind of the other party unless otherwise agreed in writing.

5. Bills of Lading, Documentation. Broker will provide Shipper with proof of acceptance and delivery of shipments in the form of a signed Bill of Lading or Proof of Delivery. Shipper's insertion of Action Truck Broker's name on any bill of lading or shipping document will be for Shipper's convenience only and will not change Broker's status as a property broker. The terms and conditions of any documentation used by Shipper or a Motor Carrier will not supplement, alter, or modify the terms of this Agreement.

6. Cargo Loss, Damage, and Delay.

A. It is understood and agreed that Broker is not a motor carrier or freight forwarder, and Broker will not be liable for loss, damage, or delay in the transportation of the Goods. If requested by Shipper and agreed to by Broker, Broker may assist Shipper in the filing and/or

processing of claims with Motor Carriers.

7. Shipper's Obligations.

A. Shipper shall provide Broker with the following information and/or specifications, which include but may not be limited to: (a) accurate description of freight and its value, (b) accurate delivery instructions, (c) special handling instructions, (d) proper design, performance and maintenance of equipment, (e) cargo insurance limits, and (f) information as may be required by any and all governmental regulatory bodies having jurisdiction over the services herein contemplated.

B. Shipper will not tender any restricted commodities, including but not limited to hazardous materials and waste, oversize or overweight shipments, coiled or rolled products or commodities requiring protection from heat or cold, without properly identifying such shipments and making necessary prior arrangements for transportation.

C. Shipper is responsible for checking all trailers tendered for loading and to reject any equipment that is not in apparent suitable condition to protect and preserve the Goods during transportation.

8. Indemnification.

Broker will defend, indemnify and hold Shipper and its employees and agents harmless against any losses caused by or resulting from (i) Broker's or Broker's employee's or agent's negligence or intentional misconduct, (ii) Broker's breach of this Agreement, or (iii) Broker's or Broker's employee's or agent's violation of applicable laws or regulations. The obligation to defend includes payment of all reasonable costs of defense as they accrue.

Shipper will defend, indemnify and hold Broker and its employees and agents harmless against any losses caused by or resulting from (i) Shipper's or Shipper's employee's or agent's negligence or intentional misconduct, (ii) Shipper's breach of this Agreement, or (iii) Shipper's or Shipper's employee's or agent's violation of applicable laws or regulations. The obligation to defend includes payment of all reasonable costs of defense as they accrue.

9. Compliance. Broker, at Broker's expense, will at all times during this Agreement, maintain in full force and effect any and all licenses, permits, certificates, surety bonds and insurance which are, or may be required by any and all governmental regulatory bodies having jurisdiction over the services herein contemplated.

10. Governing Law; Consent to Jurisdiction and Integration. This Agreement shall be deemed to have been made within Washington County, Idaho and will be construed, to the extent not preempted by applicable federal law, under the laws of the State of Idaho, without giving effect to any choice or conflict of law rules. Broker and Shipper waive all right to trial by

jury in any action, suit or proceeding brought to enforce or defend any rights or remedies under this Agreement. Each of the parties hereby irrevocably and unconditionally: (i) submits to the exclusive jurisdiction of any federal court sitting in Idaho or state court sitting in Washington County, Idaho in any suit, action or arising out of, connected with, related to, or incidental to the relationship established among them in connection with this Agreement; and, (ii) waives, to the fullest extent permitted by law, any objection to venue or any defense of inconvenient forum in connection with any such court; provided however that jurisdiction for disputes regarding claims brought by third parties requiring Broker's or Shipper's indemnification under Section 8, above, may be effected in the courts where third party claims are filed.

This written Agreement, together with any Transportation Agreements attached hereto at Schedule A, contain the entire agreement between the parties and may only be modified by signed written agreement by the parties.

11. Savings Clause. If any provision of this Agreement is held to be invalid, the remainder of the Agreement shall remain in force and effect with the offensive term or condition being stricken to the extent necessary to comply with any conflicting law.

12. Term. This Agreement shall be for the period of one (1) year and shall be automatically renewed thereafter on a yearly basis unless cancelled. Either party may terminate this Agreement upon fifteen (15) days written notice to the other party. By signing below, Shipper represents that it has the authority and ability to enter into legally binding contracts and that Shipper agrees to be bound by the terms and conditions of this Agreement effective immediately.

13. Notices. Any written notice herein provided for shall be sent by certified mail, return receipt requested, to the party to be notified at the address shown below, or to such other addresses as shall have been designated in writing by such party for this purpose.

14. Binding, Etc. This Agreement shall be binding upon the respective heirs, executors, personal representatives, successors and assigns of the parties hereto.

15. No Assignment. Neither Shipper nor Broker may assign or transfer any rights under this Agreement, in whole or in part, without the prior written consent of the other party.

16. ATTORNEY'S FEES. In the event it becomes necessary to enforce any of the terms or conditions of this Agreement through a legal action, the prevailing party shall be awarded a reasonable attorney's fee in addition to any costs allowed by law.

17. Disclosure. Neither Broker nor Shipper shall make any disclosure of the material terms of this Agreement to any third party except to the extent that such disclosure is required by law. Either party may make such disclosure to its auditors.

18. Legal Counsel. Shipper has been advised to seek the assistance of legal counsel and has had the opportunity to seek the assistance of legal counsel on its behalf in connection with this Agreement and the execution thereof and that Shipper agrees and acknowledges that it enters into this Agreement upon its own decision to do so voluntarily with or without the assistance of legal counsel and without reliance upon Broker or legal counsel for Broker.

19. Effective Date. This Agreement shall become effective when both parties have signed it. The date this Agreement is signed by the last party to sign it (as indicated by the date stated opposite that party's signature) will be deemed the date of this Agreement.

Shipper: _____

DATE: _____, 20__

By _____, Its _____

Witness:

Date: _____

Action Truck Brokerage

DATE: _____, 20__

By _____, Is _____

Witness:

Date: _____

Schedule A
Transport Agreement



Action Truck Brokerage
PO Box 151
Weiser, ID 83672
MC: 184555 P: 888-433-8439 F: 877-265-6816

LOAD NUMBER

Load #

Date

TRANSPORT AGREEMENT

To: Customer Information

Attn:

Phone:

Fax:

Your Reference:

Customer Information

Customer name agrees to pay Action Truck Brokerage for transport services as follows:

Stop	From	To	Company Address	City Phone	St	Ref Contact	Appt Appt Ref
------	------	----	--------------------	---------------	----	----------------	------------------

Pickup and stop details

Commodity	Description Reference	Seats	Pieces Space	Weight Tar Wgt	Bill Wgt
-----------	--------------------------	-------	-----------------	-------------------	----------

Commodity details

no tarp

Totals

Totals

Freight Charges

Accessorials

Total Charges

Totals

Sample

Agreement:

This individual Transport Agreement is governed by that Shipper-Broker Agreement between Action Truck Brokerage and Shipper in effect as of the date of this Transport Agreement. In the event that any term or condition in this Transport Agreement conflicts with any term or condition in the Shipper-Broker Agreement, the Shipper-Broker Agreement shall control.

Customer name agrees to pay amounts billed on this agreement within 14 days of the date invoiced.

Amounts not paid within terms will be charged interest in the amount of 0 percent per annum. This agreement shall be governed by the laws of the state of Idaho and all parties to this agreement waive objections on the grounds of improper jurisdiction or venue of any action brought in the County of , in the state of Idaho

In the event a suit is commenced to enforce the payment of this agreed amount, debtor agrees to pay all costs, expenses and actual attorney fees incurred by creditor in connection with same.

Action Truck Brokerage

Dispatcher Signature

Customer Signature



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE
January 24, 2018

DECISION
MC-184555
JOHN B. DUVALL
D/B/A ACTION TRUCK BROKERAGE
WEISER, ID
REENTITLED
ACTION TRUCK BROKERAGE, LLC
D/B/A ACTION TRUCK BROKERAGE

On January 18, 2018, applicant filed a request to have the Federal Motor Carrier Safety Administration's records changed to reflect a name change.

It is ordered:

The Federal Motor Carrier Safety Administration's records are amended to reflect the carrier's name as ACTION TRUCK BROKERAGE, LLC, D/B/A ACTION TRUCK BROKERAGE.

Within 30 days after this decision is served, the applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for broker security and BOC-3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-90 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to Federal Motor Carrier Safety Administration, 1200 New Jersey Ave., S.E., Washington, DC 20590.

The applicant is notified that failure to comply with the terms of this decision shall result in revocation of its operating rights registration, effective 30 days from the service date of this decision.

To verify that the applicant is in full compliance, call (202)358-7000 or visit our web site at: <http://li-public.fmcsa.dot.gov>. Any other questions regarding the action taken should be directed to (202)366-9805.

Decided: January 19, 2018

By the Federal Motor Carrier Safety Administration

Jeffrey L. Secrist, Chief
Information Technology Operations Division
NCA



ACT10-4

OP ID: LL

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/18/2020

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER The Insurance Group, Inc. 404 East 7th Street Weiser, ID 83672 Larry Lee, CIC		208-549-0924		CONTACT NAME: Larry Lee, CIC		PHONE (A/C, No, Ext): 208-549-0924		FAX (A/C, No): 208-549-3261	
INSURED Action Truck Brokerage Llc PO Box 151 Weiser, ID 83672				INSURER(S) AFFORDING COVERAGE		NAIC #			
				INSURER A: Mutual Of Enumclaw				14761	
				INSURER B: State Insurance Fund				36129	
				INSURER C:					
				INSURER D:					
				INSURER E:					
				INSURER F:					

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY						
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR			BOP0002436	05/12/2020	05/12/2021	EACH OCCURRENCE \$ 1,000,000
X	Business Owners						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 1,000,000
	OTHER						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		N/A	565861	01/01/2020	01/01/2021	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	If yes, describe under DESCRIPTION OF OPERATIONS below						E L EACH ACCIDENT \$ 1,000,000
							E L DISEASE - EA EMPLOYEE \$ 1,000,000
							E L DISEASE - POLICY LIMIT \$ 1,000,000
							PROPERTY 35,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Truck Brokerage Office

CERTIFICATE HOLDER

CANCELLATION

SAMPLE

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 REPRESENTATIVE



ACTITRU-02

CPHILLIPS1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/18/2020

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PRODUCER Idaho-Hub International Transportation Insurance Services Inc. 2600 Rose Hill. Suite 101 Boise, ID 83705	CONTACT NAME: Casey Phillips PHONE (A/C, No, Ext): (800) 373-1711 FAX (A/C, No): (866) 308-8825 E-MAIL ADDRESS: casey.phillips@hubinternational.com
	INSURER(S) AFFORDING COVERAGE INSURER A: Great American Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Action Truck Brokerage PO Box 151 Weiser, ID 83672-0151	NAIC # 16691

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Contingent Cargo			IMP8931192-22	11/30/2019	11/30/2020	100,000
A	Cargo Deductible			IMP8931192-22	11/30/2019	11/30/2020	1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Action Truck Brokerage
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 REPRESENTATIVE

Rene LeBeau



June 23, 2020

JONNA DUVAL
ACTION TRUCK BROKERAGE
194 E COMMERCIAL ST.
PO BOX 151
WEISER, ID 83672-0151

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) RENEWAL

The Standard Carrier Alpha Code of **ACKB** has been renewed for:

ACTION TRUCK BROKERAGE
194 E COMMERCIAL ST.
PO BOX 151
WEISER, ID 83672-0151
MC-184555
US DOT-2213195

This Alpha Code will apply only to the company name shown above through June 30, 2021. Approximately two months prior to expiration of this SCAC, NMFTA will provide a renewal notice which must be promptly returned together with payment to ensure its continued validity. Should the company name, address or contact information need an update, please notify the National Motor Freight Association, Inc. at customerservice@nmfta.org.

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

If you participate in the Customs & Border Protection (CBP) ACE program and you have any issue with ACE and your SCAC, please contact CBP at the following address:

AMSSCAC@cbp.dhs.gov
Customs and Border Protection
Attention: SCAC Beauregard, Cube: A-105-3
1801 N. Beauregard Street
Alexandria, VA 20598-1350

If you would also like to participate in the Automated Export System (AES) program, please email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request to enable your SCAC for AES.

All SCACs are automatically uploaded to ACE within 24 hours.

NOTICE: Renewal of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810.

**UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION**



**HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR(S) 2020-2022**

Registrant: ACTION TRUCK BROKERAGE

ATTN: Jonna Duvall
PO BOX 151
WEISER, ID 83672-0151

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 081820550033CD Effective: July 1, 2020 Expires: June 30, 2022

HM Company ID: 18545

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-52, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

◆ Diamond Broker Program



ITS
*Financial
Services*

Action Truck Brokerage LLC

Is a participating member of the

Truckstop.com Diamond Broker Program

Meeting all performance, credit and bonding requirements



Valid through August 2021 – MC 184555

**Request for Taxpayer
Identification Number and Certification**

**Give Form to the
requester. Do not
send to the IRS.**

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Action Truck Brokerage LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☒ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► **S**
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

194 E Commercial St / PO Box 151

6 City, state, and ZIP code

Weiser, ID 83672

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

9 0 - 1 1 8 8 6 9 5

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign
Here**

Signature of
U.S. person ►

[Signature]

Date ► **1-07-2020**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.