

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Morris Insurance Agency, LLC		NAMED INSURED R&R AUTOHAUL LLC 10037 S WALNUT TER APT 311 Palos Hills, IL 60465	
POLICY NUMBER 997806144		EFFECTIVE DATE: 05/22/2025	
CARRIER Artisan and Truckers Casualty Company	NAIC CODE 10194		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance

Additional Coverages

Insurance coverage(s)	Limits
Motor Truck Cargo	\$150,000 w/\$1,000 Ded
Uninsured Motorist Bodily Injury	\$100,000 Combined Single Limit
Underinsured Motorist Bodily Injury	\$100,000 Combined Single Limit

Description of Location/Vehicles/Special Items

Scheduled autos only		Stated Amount	\$
2024 RAM 3500 3C7WRTCL0RG138494		\$30,000	
Comprehensive	\$2,500 Ded		
Collision	\$2,500 Ded		
2010 Kaufman Trailer 5SHFE4734PB000069			