

FMCSA Motor Carrier

USDOT Number: **2245425**
Docket Number: **MC693621**
Legal Name: **SOUTHEAST STREAMLINE INC**
DBA (Doing-Business-As) Name



Addresses

Business Address: **103 N. MONROE STREET
GALAX, VA 24333**
Business Phone: **(540) 320-3277** Business Fax: **Fax: (800) 758-6220**
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: **TRUCK PROCESS AGENTS OF AMERICA, INC**

Comments:

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 11/25/2013
Policy/Surety Number: 2410368	Coverage From: \$0	To: \$75,000 *
Effective Date: 10/01/2013	Cancellation Date:	

Insurance Carrier: **GREAT AMERICAN INSURANCE CO.**
Attn: **PROPERTY & INLAND MARINE DIVISION**
Address: **580 WALNUT ST.
CINCINNATI, OH 45202 US**
Telephone: **(800) 858 - 8335** Fax: **(513) 287 - 8230**

* 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.

FMCSA Motor Carrier

USDOT Number: **2245425**

Docket Number: **MC693621**

Legal Name: **SOUTHEAST STREAMLINE INC**

DBA (Doing-Business-As) Name



Rejected Insurances:

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

Insurance History:

Form: 84	Type: SURETY	Coverage From:	\$0	To:	\$10,000 *
Policy/Surety Number: 14BSBFC8494		Effective Date From: 10/23/2009	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	Coverage From:	\$0	To:	\$75,000 *
Policy/Surety Number: 14BSBFC8494		Effective Date From: 10/01/2013	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	Coverage From:	\$0	To:	\$75,000 *
Policy/Surety Number: 2410368		Effective Date From: 10/01/2013	To: 10/01/2013	Disposition: Replaced	

Insurance Carrier GREAT AMERICAN INSURANCE CO.
Attn: PROPERTY & INLAND MARINE DIVISION
Address: 580 WALNUT ST.
CINCINNATI, OH 45202 US
Telephone: (800) 858 - 8335 Fax: (513) 287 - 8230

* 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.

FMCSA Motor Carrier

USDOT Number: 2245425

Docket Number: MC693621

Legal Name: SOUTHEAST STREAMLINE INC

DBA (Doing-Business-As) Name



Authority History:			
Sub No.	Authority Type	Original Action	Disposition Action
	PROPERTY BROKER	GRANTED	10/30/2009

Pending Application:				
Authority Type	Filed	Status	Insurance	BOC-3

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