





# ADDITIONAL REMARKS SCHEDULE

<b>AGENCY</b> Hylant Group Inc.		<b>NAMED INSURED</b> CRIBBS TRUCKING LLC 9333 W Hampton Dr N. Royalton, OH 44133	
<b>POLICY NUMBER</b> 977419836		<b>EFFECTIVE DATE:</b> 02/12/2024	
<b>CARRIER</b> Progressive Preferred Insurance Company	<b>NAIC CODE</b> 37834		

**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	\$100,000 w/\$1,000 Ded
Uninsured/Underinsured Motorist	\$1,000,000 Combined Single Limit

**Description of Location/Vehicles/Special Items**

**Scheduled autos only**

2014 FREIGHTLINER M2 1FVACWDT0EHFW3584		Stated Amount	\$39,014
Comprehensive	\$1,000 Ded		
Collision	\$1,000 Ded		
Roadside Assistance	Selected w/\$250 Ded		
Downtime	\$100 Per Day (\$3,000 Max)		
Medical Payments	\$5,000		
2016 FREIGHTLINER M2 3ALACWDT0GDHF7312		Stated Amount	\$39,896
Comprehensive	\$1,000 Ded		
Collision	\$1,000 Ded		
Roadside Assistance	Selected w/\$250 Ded		
Downtime	\$100 Per Day (\$3,000 Max)		
Medical Payments	\$5,000		

**Liability coverage may not apply to all scheduled vehicles.**