

KEY ADVANTAGES OF OFFERING FULL VALUE PROTECTION

There's no better way to cover your customers' goods, comply with new FVP requirements, and protect your profit. This innovative policy is designed to insure YOU — the mover — when your shipper purchases valuation or chooses the basic liability coverage from you. It saves you time and shields your other business policies from FVP claims. Read the long list of additional advantages below:

- Comply with the states' DOT, US DOT and STB requirements
- Compete against the major van lines coverage
- Cover customer's goods while in your possession
- (Particle board, MDF or similar are specifically excluded from coverage.)
- Offer coverage in the continental 48 states
- Eliminate the hassle of subrogation
- Enjoy no cost claims handling by our expert, in-house adjusters
- Offer protection with deductibles as low as \$250 and coverage limits as high as \$500,000
- Enjoy simple monthly billing with no annual premium

HOW IT WORKS

- Your customer declares the replacement value of their shipment on the Bill of Lading (Minimum of \$6 per pound per article).
- The shipper lists High Value items on the High Value Declaration Form. (Items valued at \$100 per pound per article, and items valued at \$2,000 or higher.)

READY TO GET STARTED?

Complete the application on the next page or contact Jane McCarthy at 314-832-6801.

CHECK OUT OUR NEWLY-NEGOTIATED, SUPER LOW RATES!

Deductible Tiers	\$250.00	\$500.00	\$750.00	\$1,000.00	\$1,500.00
Based on Value					
\$0 to \$6,000	\$12.00	\$11.00	\$10.00	\$9.00	\$8.00
\$6,001 to \$10,000	\$11.85	\$10.85	\$9.85	\$8.85	\$7.85
\$10,001 to \$15,000	\$11.70	\$10.70	\$9.70	\$8.70	\$7.70
\$15,001 to \$20,000	\$11.55	\$10.55	\$9.55	\$8.55	\$7.55
\$20,001 to \$25,000	\$11.40	\$10.40	\$9.40	\$8.40	\$7.40
\$25,001 to \$30,000	\$10.50	\$9.50	\$8.50	\$7.50	\$6.50
\$30,001 to \$35,000	\$9.80	\$8.80	\$7.80	\$6.80	\$5.80
\$35,001 to \$40,000	\$9.25	\$8.25	\$7.25	\$6.25	\$5.25
\$40,001 to \$50,000	\$8.50	\$7.50	\$6.50	\$5.40	\$4.50
\$50,001 to \$60,000	\$8.00	\$7.00	\$6.00	\$5.00	\$4.00
\$60,001 to \$75,000	\$7.50	\$6.50	\$5.50	\$4.50	\$3.50
\$75,001 to \$100,000	\$7.00	\$6.00	\$5.00	\$4.00	\$3.00
\$100,001 to \$125,000	\$6.75	\$5.75	\$4.75	\$3.75	\$2.75
\$125,001 to \$150,000	\$6.50	\$5.50	\$4.50	\$3.50	\$2.50
\$150,001 to \$175,000	\$6.35	\$5.35	\$4.35	\$3.35	\$2.35
\$175,001 to \$200,000	\$6.25	\$5.25	\$4.25	\$3.25	\$2.25
\$200,001 to \$225,000	\$6.20	\$5.20	\$4.20	\$3.20	\$2.20
\$225,001 to \$250,000	\$6.10	\$5.10	\$4.10	\$3.10	\$2.10
Over \$250,000	\$6.10				

Coverage up to \$500,000 per shipment. *Minimum charge starts at \$6,000

FULL VALUE PROTECTION INSURANCE APPLICATION

Company legal name _____

DBA (if applicable) _____

Date Established _____

Address: Street _____

City _____ State _____ Zip _____

Website URL _____

Contact Person's name _____ Job Title _____

Email _____ Tel _____ ext. _____ Mobile _____

Licenses:

State License # _____ Effective date _____

Federal License # _____ Effective date _____

ICC MC License # _____ Effective date _____

NVOCC License # _____ Effective date _____

FMC License # _____ Effective date _____

Other License # _____ Effective date _____

Affiliation: Please indicate any moving organizations you are affiliated with:

AMSA ERC IAM Other _____

What arbitration program you are part of? _____

***Please attach current Certificate of Insurance naming Moving Insurance, LLC as CERTIFICATE HOLDER. This must include Auto, Liability, Cargo and Warehousemen insurance coverage.**

Statement:

I, _____ hereby certify that I am authorized by the above company to apply for the Full Value Protection Insurance policy on its behalf. I further certify that the above information is correct and accurate.

Please provide us with your credit card information. It will be kept confidentially on file. We will only charge your account in the unlikely event of a late premium payment.

Name on card _____ Type of card _____

Billing address _____

Card number _____ Exp.date _____ Security code _____

Signature: _____ Date: _____

SUBMIT THIS APPLICATION TO THE FULL VALUE PROTECTION PROGRAM AT:

Email: fvp-doc@RelocationInsurance.com or Fax: 636-287-1384