

FMCSA Motor Carrier

USDOT Number:
Docket Number: **MC393604**
Legal Name: **MID-X CORP.**
DBA (Doing-Business-As) Name



Rejected Insurances:

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

Insurance History:

Form: 84	Type: SURETY	Coverage From:	\$0	To:	\$10,000 *
Policy/Surety Number: NONE		To: 03/01/2000		Disposition: Replaced	
Effective Date From: 03/01/2000					

Insurance Carrier: THE CINCINNATI INSURANCE CO.
Attn: TIMOTHY W. SCHMITTOU
Address: P O BOX 145496
CINCINNATI, OH 45214 US
Telephone: (513) 870 - 2000 Fax: (513) 870 - 2980

* 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 and \$10,000 for bond/trust fund). The carrier may actually have higher levels of coverage.

Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	PROPERTY BROKER	GRANTED	03/29/2001

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason

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Addresses

Business Address: **13542 N.W. INDUSTRIAL DR
BRIDGETON, MO 63044**
Business Phone: **(314) 209-7333** Business Fax:
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: **MULTI-STATES AGENT FOR PROCESS, INC.**

Comments:

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 02/05/2001
Policy/Surety Number: NONE	Coverage From: \$0	To: \$10,000*
Effective Date: 03/01/2000	Cancellation Date:	

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Note:

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