Form H **Uniform Motor Carrier Cargo Certificate of Insurance**

Filed with Washington Utilitie	es & Transportation Commission	_(hereinafter called
Commission)	(Name of Commission)	
This is to certify that the <u>Name</u>	of Company (Name of Company)	
(herein after called Company) c (H	of <u>Home Office Address of Company</u> Home Address of Company)	
has issued to Name of Motor	Carrier	
(Name of Motor Carrier)	
of Address of Motor Carrier		
	(Address of Motor Carrier)	
	e effective from <u>Effective Date 12:01</u> A.M. standard time at t and continuing until cancelled as provided herein, which, by attachmer sement has or have been amended to provide cargo insurance coverin	nt of the Uniform Motor

upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein, may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effective by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at Street Address, City, State Zip Code

this Day day of Month, Year

Insurance Company File No. Policy Number (Policy Number)

Authorized Company Representative (Authorized Company Representative)

Coverage Amount \$Amount