

1

097 CONTINENTAL CASUALTY COMPANY

Name & Address of Issuer

Great Insurance Agency
11* 1 Waterside Crossing
Windsor, CT 06095

An authorized NEW YORK insurer filed a financial security bond with the Department of Motor Vehicles complying with Article 6 of the New York Vehicle and Traffic Law on behalf of:

ACORD;CLIENT
1 MAIN ST
BISBEE AZ 85603

12*

4

Bond Number
ALLAUTOS

Effective Date

Expiration Date

5

02/01/2024
12:01 a.m.
(Not acceptable to obtain registration after 45 days from effective date.)
Applicable with respect to the following Motor Vehicle:

6

02/01/2025
12:01 a.m.

7

1994
Year

8

JEEP
Make

10

1J4FY19P8RP423545
Vehicle Identification Number

THIS ID CARD MUST BE CARRIED IN THE INSURED VEHICLE FOR PRODUCTION UPON DEMAND

WARNING: Any person who issues or produces an ID card knowing that an Owner's Policy of insurance is not in effect may be committing a misdemeanor. In addition, a person who presents an ID card if insurance is not in effect may be committing a misdemeanor.

The name of the registrant and the name of the insured must coincide.

REPLACEMENT VEHICLE NOTATION: DMV WILL ONLY PROCESS A VEHICLE CHANGE (RE-REGISTRATION) USING THE REPLACED VEHICLE'S CURRENT REGISTRATION.

FS-83

Auto ID Card Creation

Create Forms

Adobe

Quit

Vehicles

Fleet

POLICY INFO:

ALLAUTOS

INSURED:

ACORD CLIENT

ITEM ID:

2901

Policy Seq	Insurer	Coverage	Policy Dates	Last Entry	Trans Effective	Last User	Chg#	Time
10902	CNA	CAU	02/01/2024-	02/01/2025				

BASIC

Company Number

COM1

Company Phone

860 602-2022

Company Name

CNA Insurance Company Ltd.

Policy Number

4

ALLAUTOS

Auto Claim Reporting Number

765 234-5678

NAIC Code

20435

Effective Date

5

02/01/2024

Expiration Date

6

02/01/2025

Endorsement Date

02/01/2024

NY Company Code

1

097

Continental Casualty Company

Policy Details

Save

Quit

Invoice

Delete

Redisplay

POLICY INFO:

ALLAUTOS

INSURED:

ACORD CLIENT

PRIOR TERM:

NEXT TERM:

ITEM ID:

10902

Last Entry	01/16/2024	Trans Effective	02/01/2024	Last User	JM	Chg#	1	Time	12:54:05
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Policy Number

ALLAUTOS

Effective Date

02/01/2024

Time

12:01am

Description

Expiration Date

02/01/2025

Time

12:01am

Division

11*

1

The First Sagitta Division

Original Effective Date

02/01/2024

Department

00

Commission %

State

CT

Audit Term

Client Code

ACORD123CLIENT

SIC Code

Bill To Code

ACORD123CLIENT

Type of Business

Named Insured

ACORD Client

12*

Policy Type

Insurer

CNA

Date Business Started

Years In Business

CNA Insurance Company Ltd.

Producers

JM

Jennifer M Salvini

Payee

CNA

Service

JM

Jennifer M Salvini

CNA Insurance Inc Company

Source

Coverage

CAU

Commercial Automobile

Carrier Producer Sub Code

Bill Method

A - Agency

Block Download

Term

A - Annual

Status

NEW

Payment Plan

