

FMCSA Motor Carrier

USDOT Number: **1120230**
Docket Number: **MC664864**
Legal Name: **SFO EXPRESS, INC.**
DBA (Doing-Business-As) Name



Addresses

Business Address: **212 SHAW RD #4**
SOUTH SAN FRANCISCO, CA 94080
Business Phone: **(650) 866-4703** Business Fax: **Fax: (650) 866-4723**
Mail Address: **PO BOX 2352**
SOUTH SAN FRANCISCO, CA 94083
Mail Phone: Mail Fax: Undeliverable Mail: **NO**

Authorities:

Common Authority:	ACTIVE	Application Pending:	NO	
Contract Authority:	NONE	Application Pending:	NO	
Broker Authority:	NONE	Application Pending:	NO	
Property:	YES	Passenger:	NO	Household Goods: NO
Private:	NO	Enterprise:	NO	

Insurance Requirements:

BIPD Exempt:	NO	BIPD Waiver:	NO	BIPD Required:	\$750,000	BIPD on File:	\$1,000,000
Cargo Exempt:	NO			Cargo Required:	NO	Cargo on File:	NO
BOC-3:	YES			Bond Required:	NO	Bond on File:	NO

Blanket Company: **TRUCK PROCESS AGENTS OF AMERICA, INC**

Comments:

Active/Pending Insurance:

Form: 91X	Type: BIPD/Primary	Posted Date: 07/18/2011
Policy/Surety Number: BAP 165016	Coverage From: \$0	To: \$1,000,000
Effective Date: 11/14/2010	Cancellation Date:	

Insurance Carrier: **CENTURY NATIONAL INSURANCE COMPANY**
Attn: **JOYCE MCNEALY**
Address: **12200 SYLVAN ST.**
NORTH HOLLYWOOD, CA 91606 US
Telephone: **(818) 760 - 0880** Fax: **(818) 509 - 1526**

Rejected Insurances:

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

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Insurance History:

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: BAP165016	Coverage From	\$0	To: \$1,000,000
Effective Date From: 03/12/2010	To: 11/17/2010	Disposition: Cancelled	

Insurance Carrier: CENTURY NATIONAL INSURANCE COMPANY
 Attn: JOYCE MCNEALY
 Address: 12200 SYLVAN ST.
 NORTH HOLLYWOOD, CA 91606 US
 Telephone: (818) 760 - 0880 Fax: (818) 509 - 1526

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: BAP165016	Coverage From	\$0	To: \$1,000,000
Effective Date From: 11/14/2010	To: 07/18/2011	Disposition: Name Changed	

Insurance Carrier: CENTURY NATIONAL INSURANCE COMPANY
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 NORTH HOLLYWOOD, CA 91606 US
 Telephone: (818) 760 - 0880 Fax: (818) 509 - 1526

Form: 34	Type: CARGO		
Policy/Surety Number: 57 MS UO9940	Coverage From	\$0	To: \$5,000 *
Effective Date From: 11/14/2008	To: 07/18/2011	Disposition: Name Changed	

Insurance Carrier: HARTFORD FIRE INSURANCE COMPANY
 Attn: PLEASE CONTACT YOUR LOCAL AGENT
 Address: ONE HARTFORD PLAZA
 HARTFORD, CT 06115 US
 Telephone: (860) 547 - 5000 Fax:

* 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
	MOTOR PROPERTY COMMON CARRIER	REINSTATED	07/20/2011
	MOTOR PROPERTY COMMON CARRIER	REINSTATED	07/28/2010 REVOKED 07/18/2011

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Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	MOTOR PROPERTY COMMON CARRIER	GRANTED	03/19/2010 REVOKED 07/26/2010

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason
COMMON	06/13/2011	07/18/2011	INVOLUNTARY REVOCATION
COMMON	06/25/2010	07/26/2010	INVOLUNTARY REVOCATION