

# FMCSA Motor Carrier

USDOT Number: **2028242**  
Docket Number: **MC712696**  
Legal Name: **NATIONAL TRUCKLOAD INC**  
DBA (Doing-Business-As) Name **NTL**



## Addresses

Business Address: **2311 WEST 15TH STREET**  
**ERIE, PA 16505**  
Business Phone: **(814) 806-2000** Business Fax: **Fax: (814) 833-2779**  
Mail Address:  
Mail Phone: Mail Fax: Undeliverable Mail: **NO**

## Authorities:

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

## Insurance Requirements:

BIPD Exempt:	<b>NO</b>	BIPD Waiver:	<b>NO</b>	BIPD Required:	<b>\$750,000</b>	BIPD on File:	<b>\$750,000</b>
Cargo Exempt:	<b>NO</b>	Cargo Required:	<b>NO</b>	Cargo on File:	<b>NO</b>		
BOC-3:	<b>NO</b>	Bond Required:	<b>NO</b>	Bond on File:	<b>NO</b>		

**Older process agent filings may not be shown in the database. To inquire if a carrier has process agents, even if they are not shown here, please call (202)358-7069.**

## Comments:

## Active/Pending Insurance:

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>	Posted Date: <b>06/27/2013</b>
Policy/Surety Number: <b>PRA9338983</b>	Coverage From: <b>\$0</b>	To: <b>\$750,000</b>
Effective Date: <b>06/27/2013</b>	Cancellation Date:	

Insurance Carrier: **ZURICH AMERICAN INSURANCE COMPANY**  
Attn: **MARIA ADAMSKI**  
Address: **1400 AMERICAN LANE**  
**SCHAUMBURG, IL 60196-1056 US**  
Telephone: **(800) 821 - 4635** Fax: **(410) 261 - 7955**

## Rejected Insurances:

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

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## Insurance History:

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>S1945069</b>	Coverage From	<b>\$0</b>	To:	<b>\$750,000</b>	
Effective Date From: <b>05/15/2010</b>	To: <b>08/05/2010</b>	Disposition: <b>Replaced</b>			

Insurance Carrier: **SELECTIVE INSURANCE COMPANY OF SOUTH CAROLINA**  
Attn: **SHERRI BATKO**  
Address: **40 WANTAGA AVE.**  
**BRANCHVILLE, NJ 07890 US**  
Telephone: **(973) 948 - 3000** Fax: **(973) 948 - 4538**

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>FBCAT0155200</b>	Coverage From	<b>\$0</b>	To:	<b>\$1,000,000</b>	
Effective Date From: <b>08/05/2010</b>	To: <b>11/19/2011</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: **ARCH INSURANCE COMPANY**  
Attn: **SERENA BATEMAN/ARCH INSURANCE GROUP, INC.**  
Address: **30 EAST 7TH STREET, STE: 2200**  
**ST. PAUL, MN 55101 US**  
Telephone: **(651) 855 - 4504** Fax: **(203) 388 - 3301**

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>FBCAT0155200</b>	Coverage From	<b>\$0</b>	To:	<b>\$1,000,000</b>	
Effective Date From: <b>11/19/2011</b>	To: <b>04/30/2012</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: **ARCH INSURANCE COMPANY**  
Attn: **SERENA BATEMAN/ARCH INSURANCE GROUP, INC.**  
Address: **30 EAST 7TH STREET, STE: 2200**  
**ST. PAUL, MN 55101 US**  
Telephone: **(651) 855 - 4504** Fax: **(203) 388 - 3301**

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>FBCAT0155201</b>	Coverage From	<b>\$0</b>	To:	<b>\$1,000,000</b>	
Effective Date From: <b>04/30/2012</b>	To: <b>05/15/2012</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: **ARCH INSURANCE COMPANY**  
Attn: **SERENA BATEMAN/ARCH INSURANCE GROUP, INC.**  
Address: **30 EAST 7TH STREET, STE: 2200**  
**ST. PAUL, MN 55101 US**  
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## Insurance History:

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>FBCAT0155201</b>	Coverage From	<b>\$0</b>	To:	<b>\$1,000,000</b>	
Effective Date From: <b>05/15/2012</b>	To: <b>06/06/2012</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: ARCH INSURANCE COMPANY  
Attn: SERENA BATEMAN/ARCH INSURANCE GROUP, INC.  
Address: 30 EAST 7TH STREET, STE: 2200  
ST. PAUL, MN 55101 US  
Telephone: (651) 855 - 4504 Fax: (203) 388 - 3301

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>TRK933898300</b>	Coverage From	<b>\$0</b>	To:	<b>\$750,000</b>	
Effective Date From: <b>06/06/2012</b>	To: <b>08/05/2013</b>	Disposition: <b>Name Changed</b>			

Insurance Carrier: ZURICH AMERICAN INSURANCE COMPANY  
Attn: MARIA ADAMSKI  
Address: 1400 AMERICAN LANE  
SCHAUMBURG, IL 60196-1056 US  
Telephone: (800) 821 - 4635 Fax: (410) 261 - 7955

Form: <b>91X</b>	Type: <b>BIPD/Primary</b>				
Policy/Surety Number: <b>TRK933898300</b>	Coverage From	<b>\$0</b>	To:	<b>\$750,000</b>	
Effective Date From: <b>06/06/2012</b>	To: <b>06/27/2013</b>	Disposition: <b>Replaced</b>			

Insurance Carrier: ZURICH AMERICAN INSURANCE COMPANY  
Attn: MARIA ADAMSKI  
Address: 1400 AMERICAN LANE  
SCHAUMBURG, IL 60196-1056 US  
Telephone: (800) 821 - 4635 Fax: (410) 261 - 7955

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>S1945069</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>05/15/2010</b>	To: <b>08/05/2010</b>	Disposition: <b>Replaced</b>			

Insurance Carrier: SELECTIVE INSURANCE COMPANY OF SOUTH CAROLINA  
Attn: SHERRI BATKO  
Address: 40 WANTAGA AVE.  
BRANCHVILLE, NJ 07890 US  
Telephone: (973) 948 - 3000 Fax: (973) 948 - 4538

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## Insurance History:

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>FBCAT0155200</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>08/05/2010</b>	To: <b>10/16/2011</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: ARCH INSURANCE COMPANY  
Attn: SERENA BATEMAN/ARCH INSURANCE GROUP, INC.  
Address: 30 EAST 7TH STREET, STE: 2200  
ST. PAUL, MN 55101 US  
Telephone: (651) 855 - 4504 Fax: (203) 388 - 3301

Form: <b>84</b>	Type: <b>SURETY</b>				
Policy/Surety Number: <b>2521085</b>	Coverage From	<b>\$0</b>	To:	<b>\$75,000 *</b>	
Effective Date From: <b>10/01/2013</b>	To: <b>01/15/2014</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: GREAT AMERICAN INSURANCE CO.  
Attn: GREAT AMERICAN INSURANCE COMPANY  
Address: 301 EAST FOURTH STREET  
CINCINNATI, OH 45202 US  
Telephone: (800) 858 - 8335 Fax: (513) 287 - 8230

Form: <b>84</b>	Type: <b>SURETY</b>				
Policy/Surety Number: <b>712696</b>	Coverage From	<b>\$0</b>	To:	<b>\$75,000 *</b>	
Effective Date From: <b>01/22/2015</b>	To: <b>03/06/2015</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier: GREAT AMERICAN INSURANCE CO.  
Attn: GREAT AMERICAN INSURANCE COMPANY  
Address: 301 EAST FOURTH STREET  
CINCINNATI, OH 45202 US  
Telephone: (800) 858 - 8335 Fax: (513) 287 - 8230

Form: <b>84</b>	Type: <b>SURETY</b>				
Policy/Surety Number: <b>2521085</b>	Coverage From	<b>\$0</b>	To:	<b>\$75,000 *</b>	
Effective Date From: <b>01/22/2015</b>	To: <b>03/06/2015</b>	Disposition: <b>Cancelled</b>			

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## Insurance History:

Form: <b>84</b>	Type: <b>SURETY</b>				
Policy/Surety Number: <b>2521085</b>	Coverage From	<b>\$0</b>	To:	<b>\$75,000 *</b>	
Effective Date From: <b>01/22/2015</b>	To: <b>01/22/2015</b>	Disposition: <b>Replaced</b>			

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 Attn: GREAT AMERICAN INSURANCE COMPANY  
 Address: 301 EAST FOURTH STREET  
 CINCINNATI, OH 45202 US  
 Telephone: (800) 858 - 8335 Fax: (513) 287 - 8230

Form: <b>84</b>	Type: <b>SURETY</b>				
Policy/Surety Number: <b>712696</b>	Coverage From	<b>\$0</b>	To:	<b>\$75,000 *</b>	
Effective Date From: <b>01/22/2015</b>	To: <b>01/22/2015</b>	Disposition: <b>Replaced</b>			

Insurance Carrier: GREAT AMERICAN INSURANCE CO.  
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 Telephone: (800) 858 - 8335 Fax: (513) 287 - 8230

\* 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, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

## Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	MOTOR PROPERTY COMMON CARRIER	GRANTED	06/01/2010

## Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

## Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason