



AIA

WHERE TRUTH BUILDS TRUST

Insurance Proposal

Amerigo Insurance Agency

1110 Civic Center Blvd Ste# 202D
 Yuba City, CA 95993
 530-290-1633

Dear: Kingpeak Intermodal Inc
 Date: 04/29/2026
 Phone Number: (801) 648-9353
 Address: 17036 S Harlan Rd, French Camp, CA 95230

Enclosed is the proposal for you

I also wish to take this opportunity to thank you, for the opportunity you have provided us to serve you. Please be at liberty to review the proposal and highlight any necessary adjustments. You can always get in touch with us if there is a need for clarification or additional information.

We hope to work together in the coming years.

Sincerely,
 Parmjit Dhami

Coverage	Insurance Carrier	Deductible	Premium/Tax/Fee	Limits
PKG Policy	Mentioned Below <small>UNITED FINANCIAL CASUALTY COMPANY</small>	Mentioned Below	\$14,872.76 <small>Pure Premium : \$14,836.00</small>	Mentioned Below
Auto Liability	A+ Rated	\$0.00	Included in PKG Policy	\$1,000,000.00
General Liability	A+ Rated	\$0.00	Included in PKG Policy	Please see the next page
Motor Cargo	A+ Rated	Dry/Reefer: \$2,500	Included in PKG Policy	\$100,000.00
Physical Damage	A+ Rated	Comp/Coll: \$2,500	Included in PKG Policy	As Stated TIV
Uninsured/Under-insured Motorists			Included in Auto Liability	\$750,000.00



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General Liability Limits;

Each Occurrence; \$1,000,000

General Aggregate; \$2,000,000

Products/Completed Operations Aggregate; \$2,000,000

Personal and Advertising Injury; \$1,000,000/any one person o organization

Damage to Premises Rented to You; \$100,000/any one premises

Medical Expense; \$5,000/any one person

TIV; Physical Damage: \$22,000.00

Truck Tractor: 2020 International 3HCDZAPR3LL307920

Cargo Policy – Commodities: Business Documents/Non-Negotiable Securities, Mobile/Modular Homes, Containerized Freight.

Initial
SS

Payment: -

The Policy is on direct billing. Please see the payment plan on the quotation.

Note: Minimum Earned Premium = Carrier will be retaining 25% of the total premium to bind all these policies.

Initial
SS

Special Points:

***Value will not be amended(increased/decreased) during the policy term.**

Initial
SS

***Radius: 300 miles.**

***Coverage will only be offered to the above-listed equipment and drivers. if any unit or driver is missing from the above list, please contact us before signing the paperwork.**

***We cannot bind or alter coverage via fax, voicemail, text, or social media, all bind requests must be received via email. Coverage cannot be bound without written confirmation from our Agency.**

***Signed endorsement request is needed to make any change to the policy. Driver and equipment need to be confirmed by the insurance company before their operation under the insured's authority.**

***We also offer General Liability, Worker Compensation, Occupational Accidental, and Excess/ Umbrella Coverage upon the client's request.**

INSURED SIGNATURE: _____

Signed by:
Sonia Sandler
A45B3564AA33400

DATE SIGNED: _____

4/30/2026

AMERIGO INS AGENCY
 1110 CIVIC CTR #202D
 YUBA CITY, CA 95993



Underwritten by:
 United Financial Cas Co
 April 29, 2026
 Policy Period: Apr 30, 2026 - Apr 30, 2027
 Page 1 of 3
 Customer Phone number: 1-801-648-9353

KINGPEAK INTERMODAL INC
 17036 S HARLAN RD
 FRENCH CAMP, CA 95230

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from United Financial Cas Co, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through progressiveagent.com, your customized website. Claims service is available 24 hours a day, 7 days a week.

Policy information

Business: General Freight Hauler

Quote for 12 month policy period

Total policy premium \$14,872.76

Payment plans

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$3.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 25.0% Down	\$13,980.76	\$3,522.76	9 payments of \$1,165.00
4 Pay, Seasonal, 25.0% Down	\$13,980.76	\$3,522.76	3 payments of \$3,489.00
4 Pay, Quarterly, 25.0% Down	\$13,980.76	\$3,522.76	3 payments of \$3,489.00
3 Payments, 40.0% Down	\$13,980.76	\$5,614.36	2 payments of \$4,186.20
2 Payments, 50.0% Down	\$13,980.76	\$7,008.76	1 payments of \$6,975.00

Make payments by mail or at progressiveagent.com. Each payment includes a \$6.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
1 Payment	\$14,872.76	\$14,872.76	None
10 Payments, 25.0% Down	\$14,872.76	\$3,745.76	8 payments of \$1,242.34 and 1 of \$1,242.28
4 Pay, Seasonal, 25.0% Down	\$14,872.76	\$3,745.76	3 payments of \$3,715.00
4 Pay, Quarterly, 25.0% Down	\$14,872.76	\$3,745.76	3 payments of \$3,715.00
3 Payments, 40.0% Down	\$14,872.76	\$5,971.16	2 payments of \$4,456.80
2 Payments, 50.0% Down	\$14,872.76	\$7,454.76	1 payment of \$7,424.00

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-530-290-1633**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Signed by:

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 4/30/2026

Rated drivers

The insured declares that no persons other than those listed in this application are expected to operate, even occasionally, the vehicle(s) described in this application.

Name	Date of Birth	Points	Additional information
BARINDER SINGH SIDHU	10/11/1987	0	

Outline of coverage

Auto coverage part

Description	Limits	Deductible	Premium
Liability To Others			\$11,963
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured/Underinsured Motorist	\$750,000 combined single limit		172
Uninsured Motorist Property Damage	Rejected		--
Medical Payments	\$5,000 each person		9
Comprehensive			433
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			647
See Auto Coverage Schedule	Limit of liability less deductible		
Subtotal policy premium			\$13,224.00

Commercial General Liability coverage part

Description	Limits	Premium
Limited General Liability - Trucking Operations	\$1,000,000/\$2,000,000	\$390
Each Occurrence	\$1,000,000	
General Aggregate	\$2,000,000	
Products/Completed Operations Aggregate	\$2,000,000	included
Personal and Advertising Injury	\$1,000,000/any one person or organization	included
Damage to Premises Rented to You	\$100,000/any one premises	included
Medical Expense	\$5,000/any one person	included
Subtotal policy premium		\$390.00

Motor Truck Cargo coverage part

Description	Limits	Deductible	Premium
Motor Truck Cargo	\$100,000	\$2,500	\$1,222
Refrigeration Breakdown	included in Motor Truck Cargo Limit	\$2,500	included
Subtotal policy premium			\$1,222.00
Federal Filing Fee			35.00
California Vehicle Assessment Fee			1.76
Total 12 month policy premium and fees			\$14,872.76

Rated commodities

- BUSINESS DOCUMENTS/NON-NEGOTIABLE SECURITIES
- MOBILE/MODULAR HOMES
- CONTAINERIZED FREIGHT

Signed by:

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 4/30/2026

Auto coverage schedule

- 2020 INTERNATIONAL LT625** Stated Amount: * \$22,000 (including Permanently Attached Equip)
 VIN: **3HCDZAPR3LL307920** Garaging Zip Code: 95230 Radius: 300 miles
 Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	UM/UIM Premium	Med Pay Premium		
	\$11647	\$172	\$9		
<hr/>					
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$2,500	\$433	\$2,500	\$647	\$12,908

- 2030 Non-owned Attached Trailer ****
 VIN: **None** Garaging Zip Code: 95230 Radius: 300 miles
 Personal use: N Body type: 20

Liability Premium	Liability Premium				Auto Total
	\$316				\$316

*A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.

**Non-Owned trailer but only while attached to a listed power unit specifically described on the declarations page.

Important notice

For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Form QUOTE CA (12/23)

Signed by:

 A45B3561AA33400...
 4/30/2026