



Date: _____

Carrier: _____

Fax: _____

Reference: **Insurance Requirements**

Welcome to H&M Bay!

Prior to loading you for the first time, H&M Bay must verify your cargo insurance coverage. To speed up the process, we are requesting that you sign this letter and fax it back to us **with the other requested information sent to you in the carrier sign on packet, as well as your insurance certificate.** Please fax to 410-943-1203. We will then fax this letter to your agent, along with a list of coverage to be verified.

Thank you for your cooperation. Please remember, we can't load you until the insurance is verified, therefore it is very important that you return this letter to us as soon as possible.

Sincerely,

Bev Hurlock
Insurance Department

Carrier Permission

I, _____ in my capacity as _____ hereby
Printed name Title

authorize my insurance agent to provide H&M Bay with the information requested. I understand that the information disclosed by my agent will be used as part of a qualification process by H&M Bay.

Signature: _____ Date: _____