

GEORGIA INSURANCE POLICY INFORMATION CARD

INSURANCE COMPANY NAME

The Travelers Indemnity Company of Connecticut



COMMERCIAL



PERSONAL

POLICY NUMBER

HC2E840-8E087632-TCT-21

EFFECTIVE DATE

10/1/2021

EXPIRATION DATE

10/1/2022

NAMED INSURED

**Robert Bearden Inc
2601 Industrial Park Dr
Cairo, GA 39828**

To Report a Claim

(877) 241-6121

VEHICLE INSURED

YEAR

Fleet

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

SEE IMPORTANT NOTICE ON REVERSE SIDE

**KEEP THIS CARD IN YOUR MOTOR
VEHICLE WHILE IN OPERATION**

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

The current status of actual motor vehicle liability insurance coverage is maintained by the Georgia Dept. of Revenue and is accessible to law enforcement agencies upon a check of the vehicle registration.

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