



REQUEST TO REMOVE TRUCK/TRAILER FROM LIABILITY & CARGO INSURANCE

Owner Operators Name:

Owner Operator's Date of Birth

Owner Operator's Social Security Number:

Effective Date of Change:

Truck Information

Unit#:

Year:

Make:

VIN number:

Trailer Information

Unit#:

Year:

Make:

VIN number:

Email address:

I, _____, am aware of my truck/trailers being DELETED from MMM Express Inc. insurance effective date stated above. I understand that I will be responsible for all collisions or any other damages. I also understand that I need to take off MMM Express decals from my truck. Before driving for MMM Express I will need to fill out request to add truck/trailer to liability & cargo insurance and receive SMS confirmation that truck is added.

**We are only able to remove equipment from liability and cargo insurance for
30 days or more.**

Owner Signature: _____

Date _____

Email: _____

