

# FMCSA Motor Carrier



USDOT Number:

Docket Number: **FF006460**

Legal Name: **IDA - COR TRANS INC.**

DBA (Doing-Business-As) Name

## Addresses

Business Address: **10400 W. OVERLAND RD #421  
BOISE, ID 83709**

Business Phone: **(208) 407-5793** Business Fax: **Fax: (208) 445-5415**

Mail Address:

Mail Phone:

Mail Fax:

Undeliverable Mail: **NO**

## Authorities:

Common Authority: **NONE**

Application Pending: **NO**

Contract Authority: **ACTIVE**

Application Pending: **NO**

Broker Authority: **NONE**

Application Pending: **NO**

Property: **YES**

Passenger: **NO**

Household Goods: **NO**

Private: **NO**

Enterprise: **NO**

## Insurance Requirements:

BIPD Exempt: **YES**

BIPD Waiver: **NO**

BIPD Required: **\$0**

BIPD on File: **\$0**

Cargo Exempt: **NO**

Cargo Required: **NO**

Cargo on File: **NO**

BOC-3: **YES**

Bond Required: **YES**

Bond on File: **YES**

Blanket Company: **ALL AMERICAN AGENTS OF PROCESS**

Comments:

## Active/Pending Insurance:

Form: **84**

Type: **SURETY**

Posted Date: **05/24/2012**

Policy/Surety Number: **20120521624**

Coverage From:

**\$0** To:

**\$25,000 \***

Effective Date: **05/22/2012**

Cancellation Date:

Insurance Carrier: **AMERICAN ALTERNATIVE INSURANCE CORPORATION**

Attn: **TO REPORT A CLAIM CALL 800-305-4954**

Address: **555 COLLEGE RD. EAST PLAZA II**

**PRINCETON, NJ 08543 US**

Telephone: **(800) 305 - 4954** Fax: **(609) 275 - 2147**

\* 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.

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## Rejected Insurances:

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

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## Insurance History:

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>BCM21796</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/12/2006</b>	To: <b>07/12/2007</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier UNDERWRITERS AT LLOYDS LONDON  
Attn: LLOYD'S ILLINOIS INC  
Address: 181 W. MADISON, SUITE 3870  
CHICAGO, IL 60602 US  
Telephone: (312) 407 - 6219 Fax: (312) 407 - 6229

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>9234XKTBCM26391</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/12/2007</b>	To: <b>07/12/2008</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier UNDERWRITERS AT LLOYDS LONDON  
Attn: LLOYD'S ILLINOIS INC  
Address: 181 W. MADISON, SUITE 3870  
CHICAGO, IL 60602 US  
Telephone: (312) 407 - 6219 Fax: (312) 407 - 6229

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>9234XKTCK01868A08</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/12/2008</b>	To: <b>07/12/2009</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier UNDERWRITERS AT LLOYDS LONDON  
Attn: LLOYD'S ILLINOIS INC  
Address: 181 W. MADISON, SUITE 3870  
CHICAGO, IL 60602 US  
Telephone: (312) 407 - 6219 Fax: (312) 407 - 6229

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>9234XKTCK11625A09</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/12/2009</b>	To: <b>07/12/2010</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier UNDERWRITERS AT LLOYDS LONDON  
Attn: LLOYD'S ILLINOIS INC  
Address: 181 W. MADISON, SUITE 3870  
CHICAGO, IL 60602 US  
Telephone: (312) 407 - 6219 Fax: (312) 407 - 6229

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## Insurance History:

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>9234XKTCK11625A09</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/12/2009</b>	To: <b>07/01/2010</b>	Disposition: <b>Replaced</b>			

Insurance Carrier UNDERWRITERS AT LLOYDS LONDON  
 Attn: LLOYD'S ILLINOIS INC  
 Address: 181 W. MADISON, SUITE 3870  
 CHICAGO, IL 60602 US  
 Telephone: (312) 407 - 6219 Fax: (312) 407 - 6229

Form: <b>34</b>	Type: <b>CARGO</b>				
Policy/Surety Number: <b>PAC6876839</b>	Coverage From	<b>\$0</b>	To:	<b>\$5,000 *</b>	
Effective Date From: <b>07/01/2010</b>	To: <b>07/01/2011</b>	Disposition: <b>Cancelled</b>			

Insurance Carrier PENN STAR INSURANCE COMPANY  
 Attn: DIANE VEAL  
 Address: THREE BALA PLAZA, EAST STE300  
 BALA CYNWYD, PA 19040 US  
 Telephone: (610) 668 - 3263 Fax: (610) 668 - 6935

\* 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
	PROPERTY FREIGHT FORWARDER	REINSTATED	07/23/2007
	PROPERTY FREIGHT FORWARDER	GRANTED	07/19/2006 REVOKED 07/18/2007

## Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

## Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason
CONTRACT	06/15/2007	07/18/2007	INVOLUNTARY REVOCATION