

Southeastern Trailer

Carrier

P O box 714 224 Caddo Hwy
Durant, OK 74702

Main Phone: 580-920-2746

Local Phone: 920-2746

Fax Number: 580-924-4800

Hours: M-F 8-5 CST

Email: [Click to Send Email to Southeastern Trailer](#)

Web Site: <http://www.southeastentrailers.com>

Contact: Bobby Montgomery
Preferred Contact Method: Email

Operating Authority and Document Packet (Authority, Insurance, W-9, etc.)

ICC-MC#: 271802

View DOT Info for MC# 271802 (If the DOT website is not accessible, please try again later)

Reference Information

Established in: 1996

Company Description: Transporter of horse, stock, cargo, and rv trailers. Also transport cars and boats

Business Reference #1: Hermes Transpsort 800-624-9359 Bob Mack

Business Reference #2: Asphalt Zipper 801-785-0706x107 Chris

Business Reference #3: Please Call 0

Insurance Information

Cargo Company (Canal, Northland, etc.):
Mid Continent

Cargo Insurance Limit: 100,000

Cargo Deductible: 10,000

Cargo Company (Agent):
Gallagher Bryce I

Cargo City/State (Agent): Tulsa, Ok

Cargo Phone (Agent): 918-764-1626

Equipment and Route Information

Number of Trucks: 60

Equipment Description: 10- 53' wedge type trailer haulers.

Route Description: All U.S. and parts of Canada




Company Ratings

Ratings Score: 88.9%*

Ratings Received: 18

Member Since: Jun 2005

Ratings History:

	Past Month	Past 6 Months	All-Time
Ratings Score	83.3%	90.0%	88.9%
 Positive	5	9	16
 Neutral	0	0	0
 Negative	1	1	2

* **Ratings Score:** Positive ratings receive ONE point. Neutral ratings receive ONE-HALF point. Negative ratings receive ZERO points. Points are combined and computed into an overall Ratings Score PERCENTAGE.

» Hide All «

Ratings Received (18)

Ratings Given To Others (5)

Click a tab above to view individual ratings.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/04/07

PRODUCER
1-918-584-1433
Arthur J. Gallagher Risk Management Services, Inc.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

P.O. Box 1142
Tulsa, OK 74101-1142
P Greathouse 918-764-1626

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Oklahoma Surety Co	23426
INSURER R: Mid-Continent Cas Co	23418
INSURER C:	
INSURER D:	
INSURER E:	

INSURED
Southeastern Trailer Transport
Attn: Oden Grube
P O Box 714
Durant, OK 74702

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC	06-GL-687406	09/01/07	09/01/08	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP/AGG \$ Excluded
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON OWNED AUTOS	06-CT-1020	09/01/07	09/01/08	COMBINED SINGLE LIMIT (EA ACCIDENT) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	CARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ ACC \$
	EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU. CTI TORY LIMITS ER EI EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	OTHER Motor Truck Cargo	04-IM-23784	09/01/07	09/01/08	See Notepad

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Terminal or Warehouse Operations: Durant, OK; Elkhart, IN & Valdosta, GA

CERTIFICATE HOLDER

CANCELLATION

USA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
Thomas A. Jones

INTERSTATE COMMERCE COMMISSION
PERMIT

SERVICE DATE

MAY 3 1994

No. MC 271802

R. J. BLACK
d/b/a SOUTHEASTERN TRAILERS
CADDO, OK

This Permit is evidence of the carrier's authority to engage in transportation as a contract carrier by motor vehicle.

This authority will be effective as long as the carrier maintains compliance with the requirements pertaining to insurance coverage for the protection of the public (49 CFR 1043); the designation of agents upon whom process may be served (49 CFR 1044); and for passenger carriers, tariffs or schedules (49 CFR 1312).

This authority is subject to any terms, conditions, and limitations as are now, or may later be, attached to this privilege.

The transportation service to be performed is described on the reverse side of this document. Service must be performed under a continuing agreement with one or more persons.

By the Commission.

(SEAL)

SIDNEY L. STRICKLAND, JR.
Secretary

NOTE: If there are any discrepancies regarding this Permit, please notify the Commission within 30 days.

SSRS / UCR Update

Important information for SSRS carriers.

The 2005 federal highway bill (SAFETEA-LU) eliminated the SSRS program (effective January 1, 2007) and created a Unified Carrier Registration System.

What is the Unified Carrier Registration System?

The Unified Carrier Registration System will be a streamlined federal registration system for interstate for-hire regulated motor carriers, for-hire exempt motor carriers, private motor carriers, freight forwarders, leasing companies and brokers.

When will the UCR program begin?

The start date is not yet known. It is possible Congress will extend the SSRS program for another year. The Corporation Commission will mail an application to you as soon as it is determined which program will be in effect for 2007.

What do I need to do in the meantime?

- ✓ Through December 31, 2006, maintain a valid 2006 SSRS receipt in each vehicle that has been paid for under the SSRS program.
- ✓ Through December 31, 2006, continue to use a SSRS supplemental application to add additional vehicles or additional states for 2006.
- ✓ Ensure your MCS-150 data on www.fmcsa.dot.gov is accurate. Update your information at <http://www.fmcsa.dot.gov> if needed.
- ✓ Ensure your authority granted by FMCSA is active and remains active at <http://li-public.fmcsa.dot.gov>
- ✓ Contact our office if you need to file a SSRS address change with the Corporation Commission.

Will my driver get a ticket for not carrying a 2007 SSRS receipt?

They should not. Until a final decision is made to extend the SSRS or implement the UCR program, there is no 2007 SSRS receipt for your drivers to carry.

Does the SSRS/UCR program affect IRP, IFTA or other motor vehicle or motor carrier requirements?

No, those programs are not affected by this federal law. Any special permits you may hold (hazardous waste, deleterious, or wash pit) are still required.

Oklahoma Corporation Commission
Transportation Division
P.O. Box 52000
Oklahoma City OK 73152-2000

(405) 521-2251
www.occ.state.ok.us
2101 N. Lincoln Blvd.
Oklahoma City OK 73105

October 30, 2006



BOB ANTHONY
Commissioner

DENISE A. BODE
Commissioner

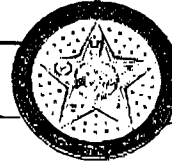
JEFF CLOUD
Commissioner

Oklahoma Corporation Commission

P.O. BOX 52000
OKLAHOMA CITY, OKLAHOMA 73152-2000

(405) 521-2251
Fax (405) 521-2916

Transportation Division



Marchi C. McCartney, Director

REGISTRATION RECEIPT - Truck

OK Corporation Commission
Post Office Box 52000
Oklahoma City, OK 73105-2000
(405) 521-2251

Effective: 01/01/2006 Expires: 12/31/2006
Receipt No: TRM034256 (Initial Order)

In accordance with Public Law 104-88,
this receipt (evidencing compliance
with FHWA registration regulations)
must be carried in the vehicle cab and
may not be altered. Alteration will
result in confiscation and penalties.

This receipt authorizes this motor carrier
to operate in the following states:

ICC Nbr: 271802
SOUTHEASTERN TRAILER TRANSPORT, LLC.
SOUTHEASTERN TRAILER TRANSPORT, LLC.
HWY. 75 N. ARMSTRONG EXIT
DURANT, OK 74701

*****AL(00003), AR(00010), CA(00003),
CO(00003), CT(00002), GA(00004), IA(00005),
ID(00002), IL(00010), IN(00055), KS(00004),
KY(00003), LA(00003), MA(00002), ME(00002),
MI(00002), MN(00002), MO(00040), MS(00002),
MT(00002), NC(00005), ND(00003), NE(00002),
NH(00002), NM(00004), NY(00002), OH(00005),
OK(00063), RI(00002), SC(00005), SD(00002),
TN(00005), TX(00050), UT(00003), VA(00005),
WA(00002), WI(00002), WV(00005), *****

Form RS-3

Mail to:
SOUTHEASTERN TRAILER TRANSPORT, LLC.
SOUTHEASTERN TRAILER TRANSPORT, LLC.
P.O. BOX 714
DURANT, OK 74702

Service • Assistance • Compliance
Excellence Is Our Standard

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Name (as shown on your income tax return)
 Southeastern Trailer Transport, L.L.C.

Business name, if different from above

Check appropriate box: Individual/Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.)
 P.O. Box 714

City, state, and ZIP code
 Durant, OK 74702

Requestor's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

or

Employer identification number
 73-1492569

Notes. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person *Law Anne Jolly*

Date

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,