LT DELIVERY

7163 SW Karen Rd
Trimble, MO 64492
Phone: (816) 587-4854
Fax: (816) 587-0998
ops@lt-delivery.com
www.lt-delivery.com

COMPANY PROFILE

Established 1994
State of Incorporation: Missouri
Charter# 00448627
Federal I.D. 431798951
MC# 337420 DOT# 574693

TELEPHONE: 816-587-4854	FAX: 816-587-0998	WEBSITE: www.lt-delivery.com

CONTACTS

Owner: Curtis Foster 816-587-4854

Administrative Assistant: Richelle Reece
Ph: 816-587-4854 Email: ap@lt-delivery.com

Director of Operations: Jason Burgess
Ph: 816-587-4854 Email: ops@lt-delivery.com

Courier Operations: Mark Henke
Ph: 816-587-4854 ops@lt-delivery.com

OTR Operations: Eric Catron
Ph: 816-587-4854 otr@lt-delivery.com

REFERENCES

Financial:

Nodaway Valley Bank
P.O. Box 7315
Saint Joseph, MO 64507
Travis Boyer 877-217-4682

CBIZ Insurance Services
2409 N Woodbine Rd
Saint Joseph, MO 64506
Brett Dempsey 816-901.0925

Business:

Wagner Logistics
1201 E 12th Ave
North Kansas City, MO 64116
Chad Grey 816-474-1110

Batliner Paper Stock Co
305 Sunshine Rd
Kansas City, KS 66115
Kelly Ryan 913-233-1367

Vendors:

Rush Truck Center-Kansas City
700 NE 38th St
Kansas City, MO 64161
Kevin Dull 816-455-1833

Southern Tire Mart
11 Industrial Dr
Monett, MO 65708
Bob Heagerty 417-232-2150

Client#: 179781 LTDELIV

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/20/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Kurt Frost	
CBIZ Insurance Services, Inc. 700 West 47th Street, Suite 1100 Kansas City, MO 64112 816 945-5500	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS: Kurt.Frost@cbiz.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Acuity, A Mutual Insurance Company	14184
INSURED LT Delivery, Inc. 7163 SW Karen Road Trimble, MO 64492	INSURER B : Midwest Builders Casualty	13126
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			ZS6040	10/01/2023	10/01/2024	EACH OCCURRENCE	$ 2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY X PRO-JECT X LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
A	AUTOMOBILE LIABILITY			ZS6040	10/01/2023	10/01/2024	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N: N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WC10000055062023A	11/01/2023	11/01/2024	X PER STATUTE / OTH-ER	
							E.L. EACH ACCIDENT	$ 500,000
							E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000
A	Motor Truck Cargo			ZS6040	10/01/2023	10/01/2024	$250,000 Limit Deductible: $5,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

LT Delivery, Inc.
7163 SW Karen Road
Trimble, MO 64492

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Mark A. Stelz

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

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

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

LT Delivery, Inc.

2 Business name/disregarded entity name, if different from above

Same

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☑ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

7163 SW Karen Rd

6 City, state, and ZIP code

Trimble, MO 64492

Requester's name and address (optional)

7 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN,* later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

4	3	–	1	7	9	8	9	5	1

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 for Part II, later.

Sign Here | **Signature of U.S. person** ▶ Curtis Foster | **Date** ▶ 01/08/2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9.*

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION

HAZARDOUS MATERIALS CERTIFICATE OF REGISTRATION FOR REGISTRATION YEAR(S) 2026-2029

Registrant: LT DELIVERY, INC.
ATTN: Curtis Foster
7163 SW KAREN RD
Trimble, MO 64492

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 061726550128IK Effective: July 1, 2026 Expires: June 30, 2029

HM Company ID: 45629

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

(1) A copy of the registration statement filed with PHMSA; and

(2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-52, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

Missouri Department of Transportation

Motor Carrier Services

Jefferson City, Missouri
1-866-831-6277

International Fuel Tax Agreement (IFTA) License

A copy of this license must be placed in each motor vehicle. This license is issued under the International Fuel Tax Agreement and is valid for vehicles operated by the licensee in all IFTA jurisdictions.

IFTA Account Number	U.S. DOT #	License Year	Effective Date	Expiration Date
MO43179895101	574693	2024	01/01/2024	12/31/2024

Mailing Address:

LT DELIVERY INC
7163 SW KAREN RD
TRIMBLE, MO 64492

Business Address:

7163 SW KAREN RD
TRIMBLE, MO 64492

This license is issued under the terms of the International Fuel Tax Agreement (IFTA) and is valid for vehicles operated by the licensee in all IFTA member jurisdictions.

This license may be photocopied and legible copies must be placed in the IFTA qualified vehicles.

An identification decal must be placed on the exterior portion of both sides of the cab. In the case of buses, it must be displayed on both sides of the cab.

You are required to file a quarterly tax return. A tax return must be filed even if there was no operation during the reporting quarter.

You are required to maintain mileage, fuel and bulk storage records to support the information that you report on your quarterly tax return.

You may cancel the IFTA license by submitting a request for cancellation to the Department of Transportation, 830 MoDOT Drive, P.O. Box 270 Jefferson City, MO 65102-0270 or by marking the box located at the bottom of the tax return.

Failure to produce a copy of this license will require the carrier to obtain a non-refundable fuel trip permit upon entering the State of Missouri.

The licensee must return this license to the Department and remove the decals from all qualified motor vehicles operated by the carrier upon termination of the business operation.

This license is not transferable between carriers. A copy of this license must be carried in each IFTA vehicle.

Issued at 830 MoDOT Drive
Post Office Box 270
Jefferson City, MO 65102-0270
On November 07, 2023

Aaron Hubbard
Motor Carrier Services Director

2024 UCR Registration is VALID!

Confirmation # 000-0417-2588

Registered on: 10/10/2023 09:27 EST

Generated: 01/08/2024 15:19 EST

Year: 2024

Paid:

Date	Bracket	UCR Fee	Conv. Fee	Total
10/10/2023	Bracket 4 [31 veh.]	$769.00	$22.84	$791.84

Bracket: 21 to 100 vehicles [31 vehicle(s)]

USDOT #: 574693

Classifications: Motor Carrier

Legal Name: LT DELIVERY INC

Base State: Missouri

Principal: 5034 NW WAUKOMIS DRIVE
NORTHMOOR, MO 64151
US

Payor: LT DELIVERY INC

*** Expires: 12/31/2024 ***

CERTIFICATE OF ASSIGNMENT

For Standard Carrier Alpha Code® (SCAC™)

SCAC	LDIM
Assigned Date	Friday, 04 June 2010
Assigned To	LT DELIVERY INC 8678 SW Z HWY TRIMBLE, MO USA 64492 USDOT # 574693 MC # 337420
Company Contact	CURTIS FOSTER
Expiration Date	Wednesday, 22 September 2027

SCAC Assignment

This SCAC only applies to the company name shown above through the expiration date. Renewal notices are sent approximately three months prior to expiration of this SCAC. A successful renewal must be made prior to the expiration date to ensure its continued validity. For easy renewal, go to https://scaccode.com.

As of 04 June 2010, the safety record for LT DELIVERY INC confirmed identification, as retrieved from the Federal Motor Carrier Safety Administration (FMCSA) Company Snapshot website at https://safer.fmcsa.dot.gov/CompanySnapshot.aspx[1].

To update the company name, address, or contact information affiliated with this SCAC, please fill out and submit your request to NMFTA customer service at https://nmfta.org/support.

To update the authority numbers affiliated with this SCAC, please first contact the U.S. Department of Transportation, and then fill out and submit your update request to NMFTA customer service at https://nmfta.org/support.

Refer to our Terms of Sale at https://nmfta.org/terms-of-sale for additional information regarding our policies governing the handling and administration of a SCAC.

SCACs Ending in "U"

SCACs ending with the letter "U" are reserved for the identification of freight containers. If your SCAC ends with the letter "U", it should only be used for this purpose. A non-U ending SCAC should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

U.S. Customs and Border Protection (CBP) Automated Commercial Environment (ACE) Program Participants

If you participate in the Customs & Border Protection (CBP) ACE program, all SCACs are automatically uploaded to ACE/AES within 24 hours. If you are having issues with your code after 48 hours, please send an email along with a copy of the NMFTA SCAC letter to AMSSCAC@cbp.dhs.gov and askaes@census.gov for review. Additional information on CBP's automated programs can be found at: https://www.cbp.gov/trade/automated/getting-started.

National Motor Freight Classification (NMFC) Participation and NMFTA Membership

A SCAC assignment is not related to participation in the National Motor Freight Classification (NMFC), and it does not allow for the use of the NMFC in connection with freight rates. In addition, a SCAC assignment does not grant membership in the National Motor Freight Traffic Association, Inc. For assistance, please contact NMFTA Customer Service at (866) 411-6632.

Ownership of SCACs

NMFTA develops and maintains the Directory of SCACs and owns the entire copyright interest in the SCAC database.

[1]Federal Motor Carrier Safety Administration (FMCSA). 2010. Company Snapshot for LT DELIVERY INC. Retrieved from https://safer.fmcsa.dot.gov/CompanySnapshot.aspx.

PM-26
(Rev. 1/95)

SERVICE DATE
May 22, 1998

FEDERAL HIGHWAY ADMINISTRATION

CERTIFICATE

MC 337420 C

LT DELIVERY, INC.
TRIMBLE, MO, US

This Certificate is evidence of the carrier's authority to engage in transportation as a **common carrier of property (except household goods)** by motor vehicle in interstate or foreign commerce.

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 387), and the designation of agents upon whom process may be served (49 CFR 366). The carrier shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Thomas T. Vining
Chief, Licensing and Insurance Division

NOTE: Willful and persistent noncompliance with applicable safety fitness regulations as evidenced by a DOT safety fitness rating of "Unsatisfactory" or by other indicators, could result in a proceeding requiring the holder of this certificate or permit to show cause why this authority should not be suspended or revoked.

U.S. Department of Transportation
Federal Highway Administration

400 Seventh St., S.W.
Washington, D.C. 20590

SEPTEMBER 20, 1994

816/790-3211

LT DELIVERY
7185 E HWY
EDGERTON MO 64444

Dear Motor Carrier:

This letter is to notify you of your USDOT Identification Number and to draw your attention to the requirement for Marking of Commercial Motor Vehicles in section 390.21 of the Federal Motor Carrier Safety Regulations. A copy of this regulation is enclosed. Its primary purpose is to assist enforcement personnel in properly identifying motor carriers, thereby assuring the submission of accurate data to the Federal Highway Administration (FHWA). The number also affords the public a way to quickly and accurately identify a motor carrier operating a particular commercial motor vehicle.

If you are operating as a private motor carrier of property in interstate commerce, as a for-hire motor carrier of property in interstate commerce not subject to regulation by the Interstate Commerce Commission, or as an interstate motor carrier of migrant workers, this regulation requires you to mark all of your "self-propelled motor vehicles" (generally straight trucks and truck tractors) in accordance with the enclosed.

The following USDOT Identification Number is assigned to the motor carrier identified above:

USDOT574693

This letter is being sent to every motor carrier recently added to FHWA records. There has been no attempt to differentiate among private, migrant worker, for-hire, or other types of motor carriers because many carriers conduct operations in a combination of these classifications. If you have questions about compliance with this requirement, please contact the office shown below:

FHWA OFFICE OF MOTOR CARRIERS
209 ADAMS STREET
P.O. BOX 1787
JEFFERSON CITY, MISSOURI 65102
314 / 636-3246,3870