

020097



TO: Trustee Richard Soderstrom and the Transportation and Safety Committee

FROM: Ellen Balsamo, Assistant to the Village Manager
Jean Tufano, Licensing Specialist, Finance Department *gt*

DATE: February 19, 2002

SUBJECT: Taxi Licensing

AM Regional Taxi of Woodridge, Illinois has applied for a license to Operate a Taxi Company in the Village of Lombard.

Attached is a copy of the application with a letter of introduction from Doug Behrens, one of the partners of AM Regional Taxi. Also included is insurance information and letters from several of the municipalities in which AM Regional Taxi is currently licensed.

Please include this request for a license on the agenda of the March 4, 2002, Transportation and Safety Committee meeting.

Mr. Behrens and his partner John Debelevich have requested the opportunity to speak to the committee at this meeting.

AM REGIONAL TAXI Inc.

6948 Sundrop Ave. - Woodridge, IL. 60517
Phone 630 971-8888 - Email AMREGIONAL@MSN.COM

October 29, 2001

received 2/11/02

Jean Tufano
Village of Lombard
Lombard, IL. 60148

Dear Jean Tufano

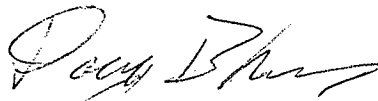
This is a follow up letter concerning our request for a Lombard taxi license. We are a new local taxi service requesting the opportunity to operate in the Village of Lombard.

Currently we are licensed and operate in Downers Grove, Lisle, Westmont, Hinsdale and Oak Brook. All of our drivers have been finger printed and have had police background investigations performed to ensure clean records. Our drivers read, write and speak English fluently and are knowledgeable navigators in and out of DuPage County. We provide 24 hour service 7 days a week, flat rates to and from the airports, local service as well as senior citizen rates. And yes, we do except senior citizen coupons.

We, the seniors and the villages all agree that our senior citizen service is excellent. The Village of Lombard can also benefit from AM REGIONAL TAXI, just by affording us the opportunity to service your community too.

All the taxi's on our fleet are currently company owned and attached you can find a photo of one of them. We Thank you Ms. Tufano for your time.

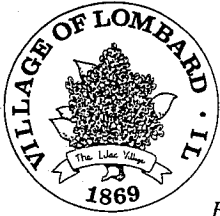
Sincerely



Doug Berhens

ps of 2/11/02

*7 vehicles on the fleet
9 drivers*



Business License # _____

Village of Lombard Taxicab Business License Application

*Business Licenses for Taxicabs shall be issued as of July 1 and shall expire on June 30 of the following year.
(Please print or type)*

Name of Business AM Regional Taxi, Inc Business Telephone # 630-971-8888

Business Address 6948 Sundrop Ave Woodridge IL 60517
Street City State ZipCode

Trade Name and Trademark of Business AM Regional Taxi, Inc.
Please attach copy of company logo

Type of Business (check one): Corporation Partnership Single Owner

Type of service offered (check one): Exclusive Non-Exclusive Both
(Per section 121.02A of the Village Code)

List the names, addresses and telephone numbers for the business as follows: If the business is a corporation, provide the information for the President and Secretary. If it is a partnership, provide information for each of the partners. If the business is a single-owner, provide information for the owner.

Name John Debelevich
Address 6948 Sundrop Ave
Woodridge IL 60517
Telephone # (630) 971-8888

Name Pang Debelevich
Address 6948 Sundrop Ave
Woodridge IL 60517
Telephone # (630) 971-8888

Name _____
Address _____
Telephone # () _____

Name _____
Address _____
Telephone # () _____

Tax ID# D618-941-4 A copy of the company Operating Rules attached: Yes No

Signing below indicates that the Business shall comply with all aspects of the Village of Lombard's Taxi Ordinance.

Signature John Debelevich Date 10-9-01

Please note that the License Fee shall double if all of the information and fees required are not received by July 1 of the licensing year.

Approved: _____, Finance Department
Fee: \$200 Annually

AM REGIONAL TAXI

630-971-8888



WE ARE THE NEWEST TAXI SERVICE IN TOWN.
ALL OF OUR DRIVERS HAVE GOOD DRIVING RECORDS.
WE HAVE THE SAFEST AND FINEST LOOKING CARS.

THANK YOU IN ADVANCED
FOR THE OPPORTUNITY
TO SERVE YOU

Name of Business: AM Regional Taxi Inc.

A list of all employed or contracted drivers is required with a copy of the Motor Vehicle Report for each driver listed. Each driver must also register as provided on the Application for Driver's Registration form. If your office maintains a list with this information, please feel free to attach it to the top of this page.

Driver's Name: John Debelevich
 Home Address: 6948 Sundrop Ave, Woodridge IL 60517
 IL Driver's License Number: D141-4786-1031
 License Classification: CDL B

Driver's Name: Doug Behrens
 Home Address: 421 Burlington Apt 15, Downers Grove IL 60515
 IL Driver's License Number: B652-1735-5316
 License Classification: D

Driver's Name: Carmelo Abella
 Home Address: 1311 S Finley Apt 410 Lombard IL 60148
 IL Driver's License Number: A140-1016-8068
 License Classification: D

Driver's Name: Denise Rose
 Home Address: 1449 Fairway Dr. Naperville IL 60563
 IL Driver's License Number: R200-1747-3654
 License Classification: D

Driver's Name: Tom Laskowski
 Home Address: 300 W Fullerton Addison IL 60101
 IL Driver's License Number: ~~(847) 858 7322~~ ~~6220~~ L020-8395-2195
 License Classification: AM CDL AM

Driver's Name: John Kotzow
 Home Address: 11606 Homestead LaGrange Park IL 60528
 IL Driver's License Number: K420-4
 License Classification: D

Driver's Name: Jim Loy
 Home Address: 8101 RT 53 Woodridge IL 60565
 IL Driver's License Number: L000-4463-6220
 License Classification: D

Name of Business: AM Regional Taxi Inc.

A list of all employed or contracted drivers is required with a copy of the Motor Vehicle Report for each driver listed. Each driver must also register as provided on the Application for Driver's Registration form. If your office maintains a list with this information, please feel free to attach it to the top of this page.

Driver's Name: Cindy Andrzejewski
Home Address: 397-E Altgeld Glendale Hts, IL 60139
IL Driver's License Number: A536-1016-47H
License Classification: C

Driver's Name: Donna Fretto
Home Address: 6711 Stanley Ave Berwyn IL, 60402
IL Driver's License Number: F030-1657-3742
License Classification: D

Driver's Name: Philip Stanek
Home Address: 3112 A Woodcreek Apt 201 Bolingbrook IL 60440
IL Driver's License Number: S352-6705-6225
License Classification: CDLB

Driver's Name: _____
Home Address: _____
IL Driver's License Number: _____
License Classification: _____

Driver's Name: _____
Home Address: _____
IL Driver's License Number: _____
License Classification: _____

Driver's Name: _____
Home Address: _____
IL Driver's License Number: _____
License Classification: _____

Driver's Name: _____
Home Address: _____
IL Driver's License Number: _____
License Classification: _____



THE VILLAGE OF WESTMONT

The
Progressive
Village

31 West Quincy St. • Westmont, IL 60559 • (630) 829-4400

Fax (630) 829-4426

February 13, 2002

Jean Turfano
Village of Lombard
255 E. Wilson Avenue
Lombard, IL 60148

Re: AM Regional Taxi, Inc.

Dear Ms. Turfano:

This letter will confirm that AM Regional Taxi, Inc. holds a current license (2002) to operate a taxi company in the Village of Westmont.

AM Regional Taxi is a locally owned taxi service that participates in Westmont's Senior Citizens discount coupon program. This is a village-subsidized program that provides low cost taxi service to our senior and handicapped residents.

AM Regional has been licensed in Westmont since October 15, 2001 and to date we have not had any complaints registered about their service.

Please feel free to contact me at (630) 829-4402 if you have any additional questions or concerns.

Yours truly,

Steve Penczak
Finance Collector/Deputy Clerk

cc: AM Regional File



Village of
DOWNERS GROVE
ILLINOIS

Civic Center

801 Burlington Avenue
Downers Grove
Illinois 60515-4776
630.434.5500
TDD 630.434.5511
FAX 630.434.5571

CBD Redevelopment Office

1015 Curtiss Street
Downers Grove
Illinois 60515
630.434.5940
FAX 630.968.6346

Fire Department

Administration

3900 Highland Avenue
Downers Grove
Illinois 60515-1506
630.434.5980
FAX 630.434.5988

Police Department

825 Burlington Avenue
Downers Grove
Illinois 60515-4783
630.434.5600
FAX 630.434.5690

Public Works Department

5101 Walnut Avenue
Downers Grove
Illinois 60515-4074
630.434.5460
FAX 630.434.5495

Department of

Social & Health Services

842 Curtiss Street
Downers Grove
Illinois 60515-4761
630.434.5595
FAX 630.434.5599

Village of

Downers Grove Web site

<http://www.vil.downers-grove.il.us>

Info Line

630.434.6800

February 12, 2002

To Whom It May Concern:

This is to confirm that AM Regional Taxi is currently licensed in the Village of Downers Grove. Furthermore, the company accepts senior citizen coupons. We have received no complaints against the company.

If you need more information, please call me at (630) 434-5535.

Thank you.

Sincerely,

April K. Holden
Village Clerk

VILLAGE OF DOWNERS GROVE



Village of
Oak Brook

1200 Oak Brook Road
Oak Brook, IL 60523-2255

Website
www.oak-brook.org

Administration
630.990.3000
FAX 630.990.0876

Community
Development
630.990.3045
FAX 630.990.3985

Engineering
Department
630.990.3010
FAX 630.990.3985

Fire Department
630.990.3040
FAX 630.990.2392

Police Department
630.990.2358
FAX 630.990.7484

Public Works
Department
630.990.3044
FAX 630.472.0223

Oak Brook
Public Library

1112 Oak Brook Road
Oak Brook, IL 60523-4623
630.990.2222
FAX 630.990.0170

Oak Brook Sports Core

Bath & Tennis Club
700 Oak Brook Road
Oak Brook, IL 60523-4600
630.990.3020
FAX 630.990.1002

Golf Club
2606 York Road
Oak Brook, IL 60523-4602
630.990.3032
FAX 630.990.0245

February 12, 2002

Mr. Douglas M. Behrens
AM Regional Taxi
421 Burlington Apt. #15
Downers Grove, IL 60515

RE: Village of Oak Brook Taxi Company License #01-05

Dear Mr. Behrens:

This is to confirm per your telephone request of today that your company, AM Regional Taxi, is licensed within Oak Brook to operate your taxi cabs. To date we have not received any complaints of your services provided to our residents.

Sincerely,

Linda K. Gonnella, CMC
Village Clerk



The Arboretum Village

VILLAGE OF LISLE

"Small Enough To Be Your Neighbor, Large Enough To Serve Your Needs"

1040 Burlington Avenue

Lisle, Illinois 60532-1898

February 12, 2002

To Whom It May Concern:

AM Regional Taxi has a license to operate within the corporate limits of the Village of Lisle for the calendar year 2002.

Sincerely:

Judy Lagro
Business Office Manager/
Deputy Village Clerk

PRODUCER KROPP INSURANCE AGENCY, INC. 6300 LINCOLN AVE MORTON GROVE IL 60053- Phone: 847-965-2330 Fax: 847-965-2773	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.
	INSURERS AFFORDING COVERAGE INSURER A: AMERICAN SERVICE INSURANCE CO. INSURER B: INSURER C: INSURER D: INSURER E:
INSURED John T. Dabelevich 6948 Sundrop Ave Woodridge IL 60517	

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 LTR.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	C2CM977562	01/01/02	12/31/02	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

SEE FLEET SCHEDULE

CERTIFICATE HOLDER VILLAGE CLERK 255 E WILSON LOMBARD IL 60148	ADDITIONAL INSURED; INSURER LETTER: LOMB001	CANCELLATION 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. <i>Terese L. Keegan</i>
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ACORD

CERTIFICATE OF LIABILITY INSURANCE

BSR TK
LOYJ-E1

DATE (MM/DD/YY)
12/24/01

PRODUCER KROPP INSURANCE AGENCY, INC. 6300 LINCOLN AVE MORTON GROVE IL 60053- Phone: 847-965-2330 Fax: 847-965-2773	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.
	INSURERS AFFORDING COVERAGE
INSURED James E. Loy 1 8102 S. Rt. 53 Woodridge IL 60515	INSURER A: AMERICAN SERVICE INSURANCE CO.
	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:

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 LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					FIRE DAMAGE (Any one fire)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COMP/OP AGG	\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	C2CM977337	01/01/02	12/31/02	COMBINED SINGLE LIMIT (Ea accident)	\$
					BODILY INJURY (Per person)	\$ 250,000
					BODILY INJURY (Per accident)	\$ 250,000
					PROPERTY DAMAGE (Per accident)	\$ 50,00.
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

1997 FORD CRN VIC 2FALP71W9VX178671

CERTIFICATE HOLDER	N	ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
VILLAGE OF LOMBARD 255 E. WILSON LOMBARD IL 60148		LOMB-V1	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.
			<i>Teese L. Kropp</i>

ACORD

CERTIFICATE OF LIABILITY INSURANCE

FORM ID TD
BEHR-D1

DATE (MM/DD/YY)
12/28/01

PRODUCER
KROPP INSURANCE AGENCY, INC.
6300 LINCOLN AVE
MORTON GROVE IL 60053-
Phone: 847-965-2330 Fax: 847-965-2773

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.

INSURERS AFFORDING COVERAGE

INSURED

Douglas M. Behrens
421 Burlington Ave. #15
Downers Grove IL 60515

INSURER A: AMERICAN SERVICE INSURANCE CO.
INSURER B:
INSURER C:
INSURER D:
INSURER E:

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 LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					FIRE DAMAGE (Any one fire)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COMP/OP AGG	\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	C2CM974656	01/01/02	12/31/02	COMBINED SINGLE LIMIT (Ea accident)	\$
					BODILY INJURY (Per person)	\$ 250,000
					BODILY INJURY (Per accident)	\$ 250,000
					PROPERTY DAMAGE (Per accident)	\$ 50,000
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
1992 CHEVY CAPRICE 1G1BL5377MR125142 13949TX

CERTIFICATE HOLDER

N

ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

LOMB001

VILLAGE CLERK
255 E WILSON
LOMBARD IL 60148

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ~~ENDORSE TO~~ MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT ~~NEITHER THE INSURER NOR~~ ~~IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.~~

Joseph A. Kropp