

**WEST VIRGINIA CERTIFICATE OF INSURANCE**



COMMERCIAL



PERSONAL

COMPANY NUMBER

**18058**

COMPANY

**Philadelphia Indemnity Insurance Co.**

VEHICLE OWNER ENTER PLATE #

An authorized West Virginia insurer certifies that there is in effect a motor vehicle liability policy upon the described vehicle in accordance with the provisions of the West Virginia Motor Vehicle Code.

POLICY NUMBER  
**PHPK1924834**

EFFECTIVE DATE  
**1/1/2019**

EXPIRATION DATE  
**1/1/2020**

YEAR MAKE/MODEL  
**0 Fleet Fleet**

VEHICLE IDENTIFICATION NUMBER

INSURED

Ohio Valley  
**1 Campus View Drive**

OWNER

**L. Vienna**

**WV 26105**

AGENCY/COMPANY ISSUING CARD

**USI Ins Svcs C/L Huntington**

DATE ISSUED

**4/4/2019**

THIS CERTIFICATE MUST BE CARRIED IN THE VEHICLE DESCRIBED ABOVE FOR USE AS PROOF OF INSURANCE. A COPY OF THIS CERTIFICATE MAY BE REQUESTED BY THE COMMISSIONER OF MOTOR VEHICLES.

SIGNATURE OF OWNER: *David L. Cole for OUV* DATE: 4-4-19

SEE IMPORTANT NOTICE ON REVERSE SIDE

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.