NON-RESIDENT PRIVATE AUTO LIABILITY CERTIFICATE OF INSURANCE

NO COVERAGE FOR PERSONS STUDYING OR WORKING IN THE UNITED STATE

NATIONAL UNITY INSURANCE COMPANY

DECLARATION PAGE

Certificate Number **GEN 861704**

*ITEM ONE: APPLICANT INFORMATION

NAMED INSURED and COMPLETE ADDRESS
ADRIAN EDUARDO CASTAÑEDA VAZQUEZ
CHE GUEVARA, 77, VILLA NUEVA
CHIHUAHUA 31134 CHIHUAHUA
PHONE, AREA CODE 6145550619

WARNING THIS IS A TOURIST POLICY

THIS POLICY IS VALID ONLY FOR DRIVERS WHO PERMANENTLY RESIDE IN MEXICO, AND VISIT THE UNITED STATES OR CANADA FOR 28 CONSECUTIVE DAYS AT A TIME OR LESS. NO COVERAGE IS PROVIDED FOR PHYSICAL DAMAGE TO INSURED VEHICLE.

THIS CERTIFICATE FORMS PART OF MASTER POLICY NUMBER **13/711/220156/1**

Policy Period (365 da
From 13 / Mayo / 2022 Time 12:00 ☐ A.M. ■ P.M.
To 13 / Mayo / 2023 Time 12:00 ☐ A.M. ■ P.M.

AGENT PRODUCER: YAJAHIRA IVETT HERNANDEZ ROSALES

Agent Number: 9899

12:01 A.M., S.T. at the address of the named insured or as state here in

*ITEM TWO: SCHEDULE OF COVERED AUTO INSURED (NO COVERAGE FOR COMMERCIAL USE VEHICLES).

COVERED AUTO	YEAR	MAKE	MODEL	VIN	LICENSE PLATE & STATE
1	1995	SENTRA GST TIPICO STD.		1N4AB41D9SC777971	EML7713

*ITEM THREE: SCHEDULE OF COVERAGE (NO COVERAGE PROVIDED IN MEXICO)
COVERAGE IS PROVIDED WHERE A PREMIUM AND A LIMIT OF LIABILITY ARE SHOWN FOR THE COVERAGE

COVEREGES LIABILITY	LIMITS OF LIABILITY	PREMIUM
A. Bodily Injury	$////////// US dlls. per person $////////// US dlls. each accident	EXCLUDED
B. Property Damage	$////////// US dlls. each accident ////////////	EXCLUDED
C. Combined Single Limit	$100,000.00 US dlls. each accident ////////////	INCLUDED
D. Medical Payments	$5,000.00 US dlls. per person $25,000.00 US dlls. each accident	INCLUDED
E. National Unity Assistence	$200.00 US dlls. per event, 2 events per year	INCLUDED

NATIONAL UNITY INSURANCE CO
ONE HUEBNER PARKE
15303 HUEBNER ROAD
SAN ANTONIO, TX. 78248

TO REPORT A CLAIM CALL / PARA REPORTAR UN ACCIDENTE:
DIRECTO: (512)861 099
TOLL FREE: 1-866-329-6734 /
LLAMADA DESDE MEXICO CON COSTO: 001 883 329 6734
or go to www.nationalunity.com
ROAD SIDE ASSISTANCE/PARA ASISTENCIA VIAL:
TOLL FREE: 1-800-308-5513 / DESDE MEXICO 001-880-308-5513

THIS CERTIFICATE OF INSURANCE WILL BE INFORCE ONLY IF THE PREMIUM FOR THE CORRESPONDING MEXICAN AUTO POLICY IS PAID

IMPORTANT: Full Name of Applicant and Each Driver Required		License Number	Date of Birth	Ocupation
APPLICANT	FIRTS LAST	XXXXXXXX	XXXXXXXX	XXXXXXX
DRIVER#2	Any driver with a valid driver license	XXXXXXXX	XXXXXXXX	XXXXXXX

Certificate of Residency:It has been explained to me(us) that this National Unity Insurance Company policy is valid only when Mexican citizens or persons who reside full-time in Mexico are operating the designated vehicle. I(we) have provided proof of my(our) Mexican residency to my(our) agent and certify that I am(we are) a full-time resident(s) of Mexico. I(we) further understand that if it is determined that i am(we are) not, at any time during the policy period a full-time resident(s) of Mexico, this insurance is not valid a does not provide any coverage to any person operating the designated vehicle in the United States of America or Canada.

Certificado de Residencia:Se me(nos) ha explicado que esta póliza de seguros de National Unity Insurance Company es válida solo cuando cuidadanos mexicanos o personas que residen permanentemente en México están operando el vehículo designado. He(hemos) proporcionado a mi(nuestro) agente, prueba de mi(nuestra) residencia mexicana y certifico que soy(somos) residente(s) permanente(s) de México. Entiendo(entendemos) además, que si se determina que no soy(somos) residente(s) permanente(s) de México este seguro no será válido y no otorgará cobertura alguna a cualquier persona operando el vehículo designado en los Estados Unidos de Norteamérica ó Canadá.

President

F-01 07/2015 1

Date _____ Signature X _____