



A Public Service Agency

*** INCOMPLETE APPLICATION**SEE ABOVE**THIS IS NOT AN OPERATING PERMIT ***

MAKE	YR MODEL	YR 1ST SOLD	VLF CLASS	*YR	TYPE VEH	TYPE LIC	LICENSE NUMBER
WORKH	2001	0000	AK	2021	32V	31	6P82315
BODY TYPE MODEL	MP	MO	AX	WC	UNLADEN/G/CGW		
VN	G	CE	2	H	08040		
TYPE VEHICLE/VESSEL USE		DATE ISSUED	CC/ALCO	DT FEE RECVD	PIC	VEHICLE/VESSEL ID NUMBER	
COMMERCIAL		05/04/21	43	05/04/21	0	5B4HP42R513326061	

RDF REASONS: A

MONICOAGUILAR JOSE A
R 604 11TH ST
O /

AMOUNT DUE \$ 968.00
AMOUNT PAID \$ 968.00

RICHMOND
CA 95122

CASH :
CHCK : 968.00
CRDT :

RBI CATERING TRUCK
L 1391 N 10TH ST
O /

SAN JOSE
CA 95112



STATE FARM
INSURANCE COMPANY
NAIC 25178

KEEP THIS COPY IN YOUR CAR



CALIFORNIA CAR INSURANCE CARD

THIS FORM
SHOULD BE
CARRIED IN THE
VEHICLE AT ALL
TIMES.

POLICYNUMBER MONICO26061

INSURED JOSE MONICO

EFFECTIVE DATE 04/22/2021

EXPIRATION DATE 10/22/2021

THE FORM MAY
BE NEEDED AS
EVIDENCE OF
INSURANCE IN
COURT.

CAR-YEAR/MAKE/VEHICLE IDENTIFICATION NUMBER
2001 WORKHORSE / 5B4HP42R513326061

COVERAGES (SEE REVERSE FOR COVERAGE NAMES)
A 1000000, C 5000, D 500, G 500, U 100/300, U1 3500

THIS CARD IS
INVALID IF THE
POLICY FOR WHICH
IT WAS ISSUED
LAPSES OR IS
TERMINATED.

AGENT
Jared Burns-Coffin
2151 Salvio St,
Suite 270
Concord, Ca
94520

TELEPHONE
925-682-0800

STATE FARM INSURANCE COMPANIES ***25178

IF YOU HAVE AN ACCIDENT - NOTIFY POLICE IMMEDIATELY

1. Write down names, addresses, telephone numbers and license numbers of persons involved and of witnesses.
2. Notify a State Farm Claim Office. (If any injuries, phone nearest State Farm Claim Office - If necessary, call information in nearest large town.)
3. Do not admit fault, do not discuss the accident with anyone except State Farm or Police.

130-4180 aCA.5

HOW TO IDENTIFY YOUR COVERAGES

SEE POLICY FOR FULL NAME AND DEFINITION

A Liability
C Medical Payments
D Comprehensive or Other
Than Collision (OTC)
F Collision - 80%
G Collision
H Emergency Road Service
L Physical Damage
R Car Rental Expense

R1,R2 Car Rental and Travel Expense
S Death, Dismemberment and
Loss of Sight
T Total Disability
U Uninsured Motor Vehicle
U1 Uninsured Motor Vehicle
Property Damage
Z Loss of Earnings