

# **NEHEMIAH EXPRESS**

**8501 TOWER POINT DR  
SUITE B  
CHARLOTTE, NC 28227  
TELEPHONE: 704-200-2258  
FAX: 1-866-954-6188  
MC# 533399**

# Request for Taxpayer Identification Number and Certification

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

Print or type  
 See Specific Instructions on page 2

Name: **Nehemiah Express Inc**  
 Business name, if different from above: **NEHEMIAH Express Inc**

Check appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other  Exempt from backup withholding

Address (number, street, and apt. or suite no.): **10205 Garrett Brigg Rd**  
 City, state, and ZIP code: **Charlotte, NC 28262**  
 Tax account number(s) here (optional):

Requester's name and address (optional):

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 2.

Social security number: \_\_\_\_\_  
 or  
 Employer identification number: **421672902**

## Part II Certification

I certify under penalty of perjury that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued) and:
- 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 and dividends, or (c) the IRS has determined that I am not subject to backup withholding, and
- I am not a person required to file a U.S. resident alien certification statement, as must cross out item 2 above if you have been notified by the IRS that you are otherwise subject to backup withholding and you are required to report all interest and dividends on your tax return. For real estate professionals, item 2 above is not applicable if you are a partner, a partner in a partnership, or a landlord of secured property. Cancellation of debt, contributions to an annuity, life insurance, and generally payments other than interest and dividends, you are not required to report for item 2 above.

Signature: **Volochie A. Loysett**

Date: **JAN 02, 2009**

**Use of Form W-9**  
 This form is used to certify that you are a U.S. person and to provide your correct TIN to the requester. It is not to be used to certify that you are not a U.S. person. If you are a U.S. person, you must cross out item 2 above if you have been notified by the IRS that you are otherwise subject to backup withholding and you are required to report all interest and dividends on your tax return. For real estate professionals, item 2 above is not applicable if you are a partner, a partner in a partnership, or a landlord of secured property. Cancellation of debt, contributions to an annuity, life insurance, and generally payments other than interest and dividends, you are not required to report for item 2 above.

Use Form W-9 only if you are a U.S. person who is required to provide your correct TIN to the requester. Do not use this form if you are a foreign person or if you are a U.S. person who is not required to provide your correct TIN to the requester.

1. Only if your TIN you are giving is correct for the requester (or you are waiting for a number to be issued).
2. Only if you are not subject to backup withholding, or
3. Only if you are exempt from backup withholding if you are a U.S. exempt payee.

If you are a foreign person, use the appropriate Form W-8. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**What is backup withholding?** Backup withholding is an amount withheld on payments you receive if you give the requester your correct TIN, and you are not subject to backup withholding. Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions on page 2 for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

**Penalties**

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each failure, unless the failure is due to reasonable cause or other willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in your backup withholding, you are subject to a civil penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/8/2009

**PRODUCER**  
First Citizens Insurance Services  
P O Box 29611  
  
Raleigh NC 27626-0611  
  
**INSURED**  
Nehemiah Express, Inc.  
8501 Tower Point Drive Suite B  
Charlotte NC 28227

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	NAIC #
INSURER A: Hartford Casualty	29424
INSURER B: Reliance Administrators,	
INSURER C: Everest Indemnity Ins Co	
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 ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC	22SBARI7293	10/15/2008	10/15/2009	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000								
A		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	22SBARI7293	10/15/2008	10/15/2009	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$								
A		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	22SBARI7293	10/15/2008	10/15/2009	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$ \$								
B		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC006971180	9/15/2008	9/15/2009	<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$ 500,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 500,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$ 500,000	E.L. DISEASE - EA EMPLOYEE	\$ 500,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000
WC STATU-TORY LIMITS	OTH-ER													
E.L. EACH ACCIDENT	\$ 500,000													
E.L. DISEASE - EA EMPLOYEE	\$ 500,000													
E.L. DISEASE - POLICY LIMIT	\$ 500,000													
C		<b>OTHER Pollution Liability</b>	40PH004269071	4/18/2008	4/18/2009	Aggregate \$1,000,000 Condition Limit \$1,000,000								

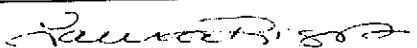
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

## CERTIFICATE HOLDER

## 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.

AUTHORIZED REPRESENTATIVE  
Laura Riggs/BGB01



# NEHEMIAH EXPRESS

8501 TOWER POINT DR STE B  
CHARLOTTE, NC 28227  
PHONE: 704-200-2258  
FAX: 866-954-6188

## TRADE REFERENCES

Turbo Logistics

Gainesville, GA  
Smiley 800-532-2239

M&L Trucking Service

Rome, NY  
Debbie 800-756-1331

Churchill Transport  
Group

Charlotte, NC  
Neil 844-466-7642



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

400 7th Street SW  
Washington, DC 20590

**SERVICE DATE**  
January 13, 2006

**CERTIFICATE**  
**MC-533399-C**  
**NEHEMIAH EXPRESS INC**  
**CHARLOTTE, NC**

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.

A handwritten signature in black ink, appearing to read 'Angeli Sebastian'.

Angeli Sebastian, Chief  
Information Systems 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.

CMO

# **NEHEMIAH EXPRESS**

**8501 TOWER POINT DRIVE SUITE B  
CHARLOTTE, NC 28227**

**704-200-2258 (P)**

**866-954-6188 (F)**

## **Attn: Accounts Receivable**

Nehemiah Express is unable to provide original bills of Lading for attachments. Under the Federal Governments current Laws we are not obligated to supply original documents for payment. Original documents are no longer necessary to store once it has been imaged or copied.

## **For Insurance please see below**

Nehemiah Express uses CIC(Carolina Insurance Co.) through BB&T. Please see safersys.org or call Barbara at 800-476-4339 for insurance information. Fax # 864-297-6393

## **DETENTION**

Nehemiah Express policy on detention is \$50 per hour after 2 hours at the receivers/shipper, \$200 for layover, \$500 for weekend layover, and other additional charges as needed and accrued.

## **Loading/Unloading**

Our drivers must be paid and lumpers must be reimbursed and are not part of the general rate.

Client#: 1315904

15NEHEMEXP

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 01/19/09
PRODUCER <b>BB&amp;T -CIC</b> 47 Alrpark Court (29807) P.O. Box 27149 Greenville, SC 29616-2149		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.
INSURED <b>Nehemiah Express Inc</b> P O Box 481310 Charlotte, NC 28269		
INSURERS AFFORDING COVERAGE		NAIC #
INSURER A: <b>Northland Insurance Company</b>		<b>24015</b>
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 ADD'L LTR	INSRD	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"/> PROJ. JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 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 checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	TK635405	01/06/09	01/06/10	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				WC STATUTORY LIMITS E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				Limit \$ 100,000 Deductible \$ 1000 Theft Ded \$ 2000
A		OTHER Cargo	TK635405	01/06/09	01/06/10	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 Vehicle schedule on file with company.

<b>CERTIFICATE HOLDER</b>   	<b>CANCELLATION</b> 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.
	AUTHORIZED REPRESENTATIVE <i>Terri B. Gould</i>



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.  
Washington, DC 20590

**SERVICE DATE**  
January 14, 2009

**DECISION**

MC-533399-C  
NEHEMIAH EXPRESS INC  
CHARLOTTE, NC

**REINSTATEMENT OF AUTHORITY**

On May 22, 2006, NEHEMIAH EXPRESS INC, was notified that its certificate was revoked by the Federal Motor Carrier Safety Administration.

NEHEMIAH EXPRESS INC, has now filed a written request for reinstatement of the authority and has submitted evidence of compliance with 49 U.S.C § 13906 and 49 CFR 387.

**It is ordered:**

The certificate evidenced in Docket No. MC-533399-C is reactivated. The effective date of the reinstatement of this authority is shown below.

**Decided:** January 14, 2009  
By the Federal Motor Carrier Safety Administration

Loretta Bitner, Chief  
Commercial Enforcement Division

REI