



LIAM LOGISTICS.LLC

47247 Lexington Dr. Macomb, MI 48044

INTRODUCTION

We are a professional operation committed to providing superior expedited service to our customers, with the safest, most efficient drivers available, utilizing well-maintained equipment. We expect all drivers to preserve our reputation for safe driving, prompt and courteous pick-up and delivery, and compliance with all state and federal regulations.

Liam Logistics has a foundation built over years of experience in the transportation industry. We are in the service industry. We service our customers by providing efficient and creative transportation logistics solutions, supported by outstanding communication capabilities. We service our coworkers, and external partners with courtesy and respect. We service our families and the families of others with safe acts and discipline, while on the road and at home.

Liam Logistics is a 100% asset-based company, with services that include, but not limited to,

- 24/7 365 Dispatch
- Satellite Communications
- Reliable Responsible Drivers
- Dry Vans
- Straight Trucks
- Sprinters
- Transportation services in Mexico
- Cross Dock & Transfer service

Service, Safety and Integrity is our commitment to you.



LIAM LOGISTICS.LLC

47247 Lexington Dr. Macomb, MI 48044

SAFETY COMMITMENT

Liam Logistics LLC is fully committed to safety and quality while providing dependable transportation service to its valued customers. This commitment is the basic philosophy of our entire organization and is reflected in the standards and corporate policies that continually promote performance excellence in all phases of our operation.

Internal and External safety is regarded as a fundamental value of the organization and without exception, is the responsibility of every employee at all levels. The Corporate Safety Statement is the basis by which Liam Logistics will do business. At Liam Logistics, the prevention of accidents and injuries is of such importance that safety will always be given first consideration.

We intend to comply with all applicable safety regulations and expects the same from its employees. We also expect its employees to be rested, sober, substance free, and emotionally able to make prudent decisions regarding safety and job tasks. Every employee must report to work ready to safely perform all job assignments. All employees are responsible to advise their supervisor if they are unfit for duty for any reason. Every employee will be expected to maintain safe work habits, safe work conditions, safe equipment, and overall behavior that reflects compliance with the intent of this statement.

Accidents resulting in personal injury, property damage and loss of equipment-use represent needless suffering and waste. The safety of our employees, our operation, and the public is paramount. Every reasonable effort must be made to reduce the possibility of accidents and injuries. Safety shall always take precedence over expediency or short cuts. Any person who forsakes safety in order to expedite "getting the job done" is neither fulfilling the intent of this statement nor abiding by corporate policy.

This company's most valuable & entrusted asset is its employees. Each employee is empowered to take immediate action to eliminate unsafe conditions in the workplace. All unsafe acts or conditions must be reported and corrected immediately. Please work safely.

William Lauer (President)



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

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

SERVICE DATE
January 12, 2017

CERTIFICATE
MC-962108-C
U.S. DOT No. 2869613
LIAM LOGISTICS
STERLING HTS, MI

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.

Jeffrey L. Secrist, Chief
Information Technology Operations 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



U.S. Department of Transportation
Federal Motor Carrier Safety Administration
Licensing and Insurance Public

Menu

Motor Carrier Details

US DOT:	2869613	Docket Number:	MC00962108	
Legal Name:	LIAM LOGISTICS, LLC			
Doing-Business-As Name:				
Business Address	Business Telephone and Fax	Mail Address	Mail Telephone and Fax	Undeliverable Mail
47247 LEXINGTON DR MACOMB MI 48044	(877) 320-5426 Fax: (877) 320-5426			NO
Authority Type	Authority Status	Application Pending		
Common	ACTIVE	NO		
Contract	NONE	NO		
Broker	NONE	NO		
Property	Passenger	Household Goods	Private	Enterprise
YES	NO	NO	NO	NO
Insurance Type	Insurance Required	Insurance on File		
BIPD	\$750,000	\$1,000,000		
Cargo	NO	NO		
Bond	NO	NO		

BOC-3: YES
Blanket Company: MULTI-STATES AGENT FOR PROCESS, INC.
[Web Site Content and BOC-3 Information Clarification](#)

[| Active/Pending Insurance](#) | [| Rejected Insurance](#) | [| Insurance History](#) | [| Authority History](#) | [| Pending Application](#) | [| Revocation](#) |

July 15, 2019



[FMCSA Home](#) | [DOT Home](#) | [Feedback](#) | [Privacy Policy](#) | [USA.gov](#) | [Freedom of Information Act \(FOIA\)](#) | [Accessibility](#) | [OIG Hotline](#) | [Web Policies and Important Links](#) | [Plug-ins](#) | [Related Sites](#) | [Help](#)

Federal Motor Carrier Safety Administration
 1200 New Jersey Avenue SE, Washington, DC 20560 - 1-800-832-5660 - TTY: 1-800-877-8339 - Field Office Contacts

USDOT Number: 2869613 Date Received: 05/16/18

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0015. Public reporting for this collection of information is estimated to be approximately 10 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

Una agencia federal no puede conducir o auspiciar, y una persona no está sujeta a responder ni será sujeta a penalidades por fallar en cumplir con una recolección de información sujeta a los requerimientos del Acto de Reducción de Papeleo, a menos que la recolección de información muestre un Número de Control OMB válido. El Número de Control OMB para esta recolección de información es 2126-0015. El reporte público para esta recolección de información es estimado en aproximadamente 10 minutos por respuesta, incluyendo el tiempo para revisar las instrucciones, obtener los datos necesarios y completar y revisar la recolección de información. Todas las respuestas a esta recolección de información son mandatorias. Enviar los comentarios respecto a esta carga estimada o cualquier otro aspecto de esta recolección de información, incluyendo sugerencias para reducir esta carga a: Oficial de Clarificación de Recolección de Información, Administración Federal de Seguridad del Autotransporte, MR-RRA, 1200 New Jersey Avenue, SE, Washington, D.C. 20590.



Designation of Agents for Service of Process / Designación de Agentes del Servicio de Proceso

FORM BOC-3

FULL AND CORRECT NAME OF CARRIER, BROKER, OR FREIGHT FORWARDER:
 Nombre Completo y Correcto del Transportista, Agente, o el Destinatario del Flete:

LIAM LOGISTICS LLC

ADDRESS OF CARRIER, BROKER, OR FREIGHT FORWARDER:
 Dirección del Transportista, Agente, o el Destinatario del Flete:

47247 LEXINGTON DR	MCCOMB	MI	48044-0000		
STREET ADDRESS	CITY	STATE/PROVINCE	ZIP CODE + 4	COLONIA (Mexico only)	FOREIGN COUNTRY
Dirección	Ciudad	Estado/Provincia	Código Postal + 4	Colonia (sólo México)	País Extranjero

PERSON AUTHORIZED TO SIGN FORM:
 Persona Autorizada Para Firmar el Formulario:

PROCESS AGENT	SANDY WILLIAMS
TITLE OF AUTHORIZED PERSON	NAME OF AUTHORIZED PERSON (please print)
<i>Sandy Williams</i>	Nombre de la Persona Autorizada (por favor imprima)
SIGNATURE OF AUTHORIZED PERSON	800-238-8814
Firma de la Persona Autorizada	TELEPHONE NUMBER
	Número Telefónico

INSTRUCTIONS: Regulations governing the designation of persons upon whom process may be served are prescribed at 49 CFR 386, as amended. An agent must be designated for each state in or through which the carrier, broker, or freight forwarder operates; each person, association or corporation designated must reside in the state for which designated; a carrier, broker or freight forwarder may designate himself/herself for the state in which he/she resides; and state officials may be designated only if such official's agreement to so act is furnished with this designation. Note: a post office box is NOT ACCEPTABLE as an agent's address. FILE THE ORIGINAL signed copy with the FMCSA, 1200 New Jersey Ave., S.E. (W63-105) Washington, DC 20590. One signed copy should be filed with each state in or through which the operation is conducted; and one copy should be retained by the carrier, broker, or freight forwarder. CHANGES in designation may be made only by filing with the FMCSA, a new form BOC-3. Copies of new designations need to be sent only to those states affected by the change or new filing. Either INDIVIDUAL or BLANKET designations may be made.

INSTRUCCIONES: Las regulaciones gobernantes para la designación de personas a quienes el proceso puede ser servido son prescritas en el 49 CFR 386, como se a enmendado. Un agente tiene que ser designado a través de cada estado que el autotransportista, agente o el destinatario del flete que opera; cada persona, asociación o corporación designada debe vivir en el estado que se le a designado. Un autotransportista, agente o el destinatario del flete, puede designarse así mismo por el estado en cual vive; y los oficiales del estado pueden ser designados solamente de acuerdo oficial en el que se facilita de acuerdo al acto de esta designación. Nota: un apartado postal NO ES ACEPTABLE como la dirección de un agente. ARCHIVE LA COPIA ORIGINAL firmada con el FMCSA, 1200 New Jersey Ave. (W63-105) Washington, D.C. 20590. Una copia firmada tiene que ser archivada por cada estado a través de cada operación conducida; y una copia tiene que guardarla el auto transportista, agente o el destinatario del flete. LOS CAMBIOS de cada designación pueden hacerse solamente reportándose con el FMCSA, y una nueva forma BOC-3. Las copias de las nuevas designaciones necesitan ser mandadas solamente a los estados afectados o el nuevo reporte que se ha hecho. Cualquiera de las dos designaciones pueden hacerse ya sea INDIVIDUAL O AMPLIADA.

(continued on next page)



May 10, 2019

WILLIAM LAUCER
LIAM LOGISTICS
47247 LEXINGTON DRIVE
MACOMB, MI 48044

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) RENEWAL

The Standard Carrier Alpha Code of **LIAM** has been renewed for:

LIAM LOGISTICS
47247 LEXINGTON DRIVE
MACOMB, MI 48044
MC-962108
US DOT-2869613

This Alpha Code will apply only to the company name shown above through June 30, 2020. Approximately two months prior to expiration of this SCAC, NMFTA will provide a renewal notice which must be promptly returned together with payment to ensure its continued validity. Should the company name, address or contact information need an update, please notify the National Motor Freight Association, Inc. at customerservice@nmfta.org.

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

If you participate in the Customs & Border Protection (CBP) ACE program and you have any issue with ACE and your SCAC, please contact CBP at the following address:

AMSSCAC@cbp.dhs.gov
Customs and Border Protection
Attention: SCAC Beauregard, Cube: A-105-3
1801 N. Beauregard Street
Alexandria, VA 20598-1350

If you would also like to participate in the Automated Export System (AES) program, please email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request to enable your SCAC for AES.

All SCACs are automatically uploaded to ACE within 24 hours.

NOTICE: Renewal of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810.



Matthew G. Bevin
Governor

TRANSPORTATION CABINET
FRANKFORT, KENTUCKY 40622
www.transportation.ky.gov

Greg Thomas
Secretary

9/25/2018

LIAM LOGISTICS LLC
47247 LEXINGTON DR
MACOMB, MI 48044

The Kentucky Division of Motor Carriers has issued your company the following Kentucky Weight Distance Tax (KYU) license number: 616912.

As a KYU license holder, you are required to do the following:

1. Visit drive.ky.gov to file KYU taxes quarterly, file even if the KYU was issued the last day of a quarter, and file a zero if you did not have operations during a quarter. Below are the required filing timelines:

1st Quarter - January - March - Filing opens April 1st

2nd Quarter - April - June - Filing opens July 1st

3rd Quarter - July - September - Filing opens October 1st

4th Quarter - October - December - Filing opens January 1st

2. Failure to file or pay quarterly taxes on time will result in a penalty fee of \$500.

3. All VINS registered over 59,999 lbs or greater must be added to your KYU inventory. Visit drive.ky.gov to update your inventory.

4. Visit drive.ky.gov to update KYU address, phone, & email data.

5. Visit fmcsa.dot.gov to update your USDOT data.

Visit drive.ky.gov to sign up for electronic tax filing and electronic reminders regarding filing deadlines. If your business is closed for any reason you must indicate that on your final tax return. Kentucky no longer sends delinquent mailed correspondence we only send cancellations. Operating on a cancelled KYU license may result in citations and impoundment of vehicles.



An Equal Opportunity Employer M/F/D

Access the Department of Vehicle Regulation Website: <http://drive.ky.gov/>

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.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. LIAM LOGISTICS		
	2 Business name/disregarded entity name, if different from above LIAM LOGISTICS,LLC		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small>		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) 47247 LEXINGTON DRIVE		Requester's name and address (optional)
	6 City, state, and ZIP code MACOMB, MI 48044		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. 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 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
or								
Employer identification number								
8	1	-	1	4	8	6	1	5

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); 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 or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ Date ▶ **10.02.19**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1098-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

