



Setting the Standard for Safety. One Mile at a Time



BUCHANAN HAULING AND RIGGING, INC
 4625 INDUSTRIAL ROAD
 FORT WAYNE, INDIANA 46825
 260-471-1877 (P) 260-471-8878 (F)
 sales@buchananhauling.com
 www.buchananhauling.com

Carrier Profile

Incorporated: 1999
 Type of Business: Corporation
 Annual Gross: 200,000,000
 Total Employees: 575
 DOT: 649444
 MC# 306359

Year Started: 1996
 SCAC: BHRI
 D&B: 069531197
 SIC CODE: 4213
 Federal ID#: 35-2067792
 Business Activity Code: 484121

Corporate Officers

Geary Buchanan – President
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext 2224
 gbuchanan@buchananhauling.com

Rebecca Buchanan - Executive VP
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext 2127
 rbuchanan@buchananhauling.com

Key Officers

David Francis, CFO
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext 6270
 David.francis@buchananhauling.com

Jessica Studle – Director of Safety
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext. 2167
 Jessica.Studle@buchananhauling.com

Phil Gray, Vice President IT
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext. 2132
 pgray@buchananhauling.com

Rob Rausch, COO
 4625 Industrial Road
 Fort Wayne, IN 46825
 260-471-1877 Ext. 2268
 Rob.Rausch@buchananhauling.com



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Bank

Fifth Third Bank
202 W. Berry Street
Fort Wayne, IN 46802

Kimberlee Ray
Kimberlee.ray@53.com
317-383-2497

Check Payments

Buchanan Hauling & Rigging, Inc./Buchanan Logistics, Inc.
P. O. Box 631526
Cincinnati, OH 45263

Financial Statements: Available Upon Request

Insurance Limits

Brown & Brown
801-505-6500
Dave Wittwer
dwwittwer@hayscompanies.com

Brown & Brown
801-505-6500
Melody Jensen
mejensen@hayscompanies.com

For reference only. Refer to insurance certificate for actual coverage.

General Liability----- \$2,000,000
Workers Comp-----\$1,000,000
Automobile Liability-----\$3,000,000
Cargo-----\$1,000,000

Terminals

4625 Industrial Road
Fort Wayne, IN 46825

2725 South Holt Road
Indianapolis, IN 46241

1200 Commerce Circle
Trafford, PA 15085

4301 Pan American Blvd
Laredo, TX 78040

2430 S. 39th Avenue
Phoenix, AZ 85009

20727 Petroleum Common
Elmendorf, TX 78112

17630 Beaumont Highway
Houston, TX 77049

219 Russell Street
Mountain Home, AR 72653

2081 Rt. 80
Tully, NY 13159

Equipment

386 Power Units 1000 Trailers

- Dry Van ■ Flatbed ■ Stretch Flatbed ■ Step Deck ■ Double Drop / Double Drop Stretch
- RGN (multi-axle) ■ Curtainside ■ Perimeter / Dollie Systems



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Communication Equipment

Omnitracs
GPS Trailer Tracking

Certifications

US EPA SmartWay Partner
TIA Performance Certified (\$250,000)
U.S. Customs Bonded Carrier
Canadian Bonded Carrier

Billing Capabilities

EDI (Available for Volume Shippers)
McLeod Software

Buchanan Holdings

Buchanan Logistics, Inc.
RB Equipment Corporation
Buchanan Real Estate, LLC
Shellback Transportation, Inc.
Summit Equipment Leasing, Inc.
Buchanan Specialized, Inc.

Asset Based Transportation

Full-Service Brokerage

Third Party Logistics

Specialized Services including Dedicated, Hazmat and Warehousing





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4625 Industrial Road
Fort Wayne IN 46825

Phone: (260) 471-1877
Fax: (260) 399-4418

www.buchananhauling.com

Contact: **David Francis, CFO**
Email: David.Francis@buchananhauling.com

CREDIT REFERENCES

<p>XTRA Lease PO Box 99262 Chicago, IL 60693-9262 Phone: (317) 244-5601 Fax: (317) 244-5602</p>	<p>Kopetsky Family, LLC 5730 Kopetsky Drive Indianapolis, IN 46217 Phone: (317) 788-6966</p>	<p>Trafford Commerce Center 1000 Commerce Circle Trafford, PA 15085 Phone: (412) 856-9401</p>	<p>Stoops Freightliner 12247 Declaration Drive New Haven, IN 46774 Phone: (260)749-8587</p>
<p>Macy's Auto Parts 310 Collins Drive Fort Wayne, IN 46825 Phone: (260) 422-7492</p>	<p>Don R. Fruchey, Inc. 5608 Old Maumee Road Fort Wayne, IN 46803 Phone: (260) 749-8502 Fax: (260) 749-6337</p>	<p>Palmer Kenworth Tracey Walters-General Manager 3535 Coliseum Blvd W. Fort Wayne, IN 46808 Phone: (260)483-6367 Cell: (260) 740-6067 Fax: (260)483-2109</p>	<p>JH Specialty Inc. PO Box 15370 Fort Wayne, In 46885 Phone: (260) 485-5264</p>
	<p>Hoosier Truck & Trailer Equipment 4830 Todd Drive Fort Wayne, IN 46803 Phone: (800) 572-0143</p>	<p>Star Leasing Company 4080 Business Park Drive Columbus, OH 43260 Phone: (614) 278-9999 Fax: (614) 275-2884 Attn: Credit Dept.</p>	

When necessary to honor service commitments, Carrier may, at its sole discretion, utilize the services of other carrier's or modes of transportation. Carrier's liability to its customer will not change unless agreed upon in writing by Carrier and Customer.

NCA
SERVICE DATE
Aug 18, 2000

DEPARTMENT OF TRANSPORTATION
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION

DECISION

No. MC-306359
GEARY BUCHANAN
D/B/A BUCHANAN HAULING & RIGGING CO.
VALPARAISO, IN

REENTITLED

BUCHANAN HAULING & RIGGING, INC.

On Jul 28, 2000, applicant filed a request to have the FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION's records changed to reflect a name change.

It is ordered:

The FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION's records are amended to reflect the carrier's name as BUCHANAN HAULING & RIGGING, INC. .

Within 30 days after this decision is served, the applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for property broker security and BOC-3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-90 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION, 400 Virginia Ave., SW, Suite 600, Washington, DC 20024.

The applicant is notified that failure to comply with the terms of this decision shall result in revocation of its operating rights registration, effective 30 days from the service date of this decision.

To verify that the applicant is in full compliance, call (202) 358-7000 or visit our web site at: <http://fhwa-li.volpe.dot.gov/>. Any other questions regarding the action taken should be directed to (202) 358-7028/7029.

Decided: Aug 15, 2000

By the FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION.

Terry Shelton, Acting Director
Office Data Analysis & Information Systems



May 24, 2021

REBECCA BUCHANAN
BUCHANAN HAULING & RIGGING INC
4625 INDUSTRIAL RD
FORT WAYNE, IN 46825

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) RENEWAL

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

BUCHANAN HAULING & RIGGING INC
4625 INDUSTRIAL RD
FORT WAYNE, IN 46825
MC-306359
US DOT-649444

This Alpha Code will apply only to the company name shown above through June 30, 2022. 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 an issue with using your SCAC with ACE, please contact CBP at the following email address: AMSSCAC@cbp.dhs.gov. All SCACs are automatically uploaded to ACE within 24 hours. To participate in the Automated Export System (AES) program, please email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request, along with a copy of the NMFTA SCAC letter, to enable your SCAC for AES. Additional information on CBP's automated programs can be found at: <https://www.cbp.gov/trade/automated/getting-started>.

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 inconnection with freight rates. For participation and membership information, please call (703) 838-1810.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/17/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Hays Companies 1-801-505-6500 257 East 200 South Suite 700 Salt Lake City, UT 84111 INSURED Buchanan Hauling & Rigging Inc 4625 Industrial Road Fort Wayne, IN 46825	CONTACT NAME: Melody Jensen PHONE (A/C No. Ext): 801-505-6500 E-MAIL ADDRESS: mjensen@hayscompanies.com FAX (A/C No.): 801-505-6501
INSURER(S) AFFORDING COVERAGE	
INSURER A: NATIONAL INTERSTATE INS CO	NAIC # 32620
INSURER B: TRIUMPH CAS CO	NAIC # 41106
INSURER C: EVANSTON INS CO	NAIC # 35378
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 64002824

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBROGATION WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<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"/> PROJECT <input type="checkbox"/> LOC OTHER:		LJG 000103-04	01/01/22	01/01/23	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 PREMISES (Ea occurrence) \$ 100,000 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	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS		CRA 5500021-06	01/01/22	01/01/23	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED RETENTION \$	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE	EXT 5500021-06	01/01/22	01/01/23	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N / N/A	SCW 0000516-04	01/01/22	01/01/23	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Cargo		MKL31M0047609	01/01/22	01/01/23	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

FOR INFORMATION ONLY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ACORD 25 (2014/01)
MJensen
64002824

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PRIMARY AND NONCONTRIBUTORY –
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance Condition** and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Where required by written contract or agreement provided such contract was executed prior to the date of loss.	
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s): Any person or organization against whom you have agreed to waive your right of recovery in a written contract or agreement provided such contract was executed prior to the date of loss.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
BLANKET ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
AUTO DEALERS COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

Who Is An Insured under **COVERED AUTOS LIABILITY COVERAGE** is amended to include as an "insured", any person or organization you are required to add as an additional insured on this policy under a written contract, agreement or permit which must be:

- a. currently in effect or becoming effective during the term of the policy; and
- b. executed prior to the "bodily injury" or "property damage."

The insurance provided to this additional insured is limited as follows:

1. That person or organization is an additional insured only with respect to liability arising out of your operations performed for that additional insured as specified in the written contract, agreement or permit.
2. The limits of insurance applicable to the additional insured are those in written contract, agreement, permit or in the Declarations for this policy, whichever are less. These limits of insurance are inclusive of and not in addition to the Limit of Insurance for Liability Coverage shown in the Declarations.
3. Coverage is not provided for "bodily injury" or "property damage" arising out of the sole negligence of the additional insured.

Any coverage provided hereunder will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless a contract specifically requires that this insurance be primary.

When this insurance is in excess, we will have no duty to defend the additional insured against any "suit" if any other insurer has a duty to defend the additional insured against that "suit." If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insurer's rights against all those other insurers.

All other terms and conditions of this policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: BUCHANAN HAULING & RIGGING, Endorsement Effective Date:

SCHEDULE

Name(s) Of Person(s) Or Organization(s): Any person or organization against whom you have agreed to waive your right of recovery in a written contract or agreement provided such contract was executed prior to the date of loss.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The Transfer Of Rights Of Recovery Against Others To Us condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Any person or organization
against whom you have agreed
to waive your right of
recovery in a written contract
or agreement provided such

contract was executed prior to
the date of loss.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective 01/01/2022

Policy No. SCW 0000516 04

Endorsement No. 2

Insured BUCHANAN HAULING & RIGGING INC.

Premium \$

Insurance Company
Triumpher Casualty Company

Countersigned by _____

WC 00 03 13
(Ed. 4-84)

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