



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

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

**SERVICE DATE**  
August 2, 2017

**DECISION**  
**MC-253470**  
**SKYLINE EXPRESS, LLC**  
**FRONT ROYAL, VA**  
**REENTITLED**  
**SEI ACQUISITION, LLC**  
**D/B/A SKYLINE EXPRESS**

On July 27, 2017, 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 SEI ACQUISITION, LLC, D/B/A SKYLINE EXPRESS.

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

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.

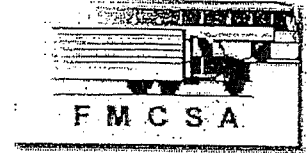
To verify that the applicant is in full compliance, call (202)358-7000 or visit our web site at: <http://li-public.fmcsa.dot.gov>. Any other questions regarding the action taken should be directed to (202)366-9805.

Decided: July 28, 2017  
By the Federal Motor Carrier Safety Administration

Jeffrey L. Secrist, Chief  
Information Technology Operations Division  
NCA

# FMCSA Motor Carrier

USDOT Number: 484360  
Docket Number: MC253470  
Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name: SKYLINE EXPRESS



## Addresses

Business Address: 6205 WEST 101ST STREET  
CHICAGO RIDGE, IL 60415  
Business Phone: (773) 229-2212 Business Fax: Fax: (888) 371-6806  
Mail Address:  
Mail Phone: (540) 635-1200 Mail Fax: Fax: (540) 636-2213 Undeliverable Mail: NO

## Authorities:

Common Authority: NONE Application Pending: NO  
Contract Authority: ACTIVE Application Pending: NO  
Broker Authority: NONE Application Pending: NO  
Property: YES Passenger: NO Household Goods: NO  
Private: NO Enterprise: NO

## Insurance Requirements:

BIPD Exempt: NO BIPD Waiver: NO BIPD Required: \$1,000,000 BIPD on File: \$1,000,000  
Cargo Exempt: NO Cargo Required: NO Cargo on File: NO  
BOC-3: NO Bond Required: NO Bond on File: NO

Older process agent filings may not be shown in the database. To inquire if a carrier has process agents, even if they are not shown here, please call (202)358-7069.

## Comments:

## Active/Pending Insurance:

Form: 82	Type: BIPD	Posted Date: 08/03/2020
Policy/Surety Number: B-13526	Coverage From: \$0	To: \$0
Effective Date: 04/20/2019	Cancellation Date:	

Insurance Carrier: PROTECTIVE INSURANCE CO.  
Attn:  
Address: 111 CONGRESSIONAL BOULEVARD  
CARMEL, IN 46032 US  
Telephone: (317) 636 - 9800 Fax:

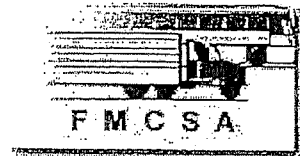
## Rejected Insurances:

Form:	Type:	Coverage From: \$0	To: \$0
Policy/Surety Number:		Received:	Rejected:
Received:		Rejected Reason:	



# FMCSA Motor Carrier

JSDOT Number: 484360  
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Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name: SKYLINE EXPRESS



## Insurance History:

Form: 91	Type: BIPD				
Policy/Surety Number: ASP269423	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/1998	To: 04/20/1999	Disposition: Replaced			

Insurance Carrier: AMERICAN & FOREIGN INSURANCE CO.  
Attn: MS. ROBIN MARENOVIC  
Address: 9300 ARROWPOINT BLVD PO BOX 1000  
CHARLOTTE, NC 28201 US  
Telephone: (704) 522 - 2062 Fax: (704) 522 - 2393

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: ASP269423	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/1998	To: 04/20/1998	Disposition: Replaced			

Insurance Carrier: AMERICAN & FOREIGN INSURANCE CO.  
Attn: MS. ROBIN MARENOVIC  
Address: 9300 ARROWPOINT BLVD PO BOX 1000  
CHARLOTTE, NC 28201 US  
Telephone: (704) 522 - 2062 Fax: (704) 522 - 2393

Form: 91	Type: BIPD				
Policy/Surety Number: ASP269423	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/1999	To: 04/20/2001	Disposition: Replaced			

Insurance Carrier: AMERICAN & FOREIGN INSURANCE CO.  
Attn: MS. ROBIN MARENOVIC  
Address: 9300 ARROWPOINT BLVD PO BOX 1000  
CHARLOTTE, NC 28201 US  
Telephone: (704) 522 - 2062 Fax: (704) 522 - 2393

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: NLH0000225	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2001	To: 04/20/2002	Disposition: Cancelled			

Insurance Carrier: DIAMOND STATE INSURANCE COMPANY  
Attn: THOMAS MCKENNA  
Address: 3 BALA PLAZA, SUITE 300 EAST  
BALA CYNWYD, PA 19004 US  
Telephone: (610) 668 - 6911 Fax: (610) 660 - 8886

# FMCSA Motor Carrier

JSDOT Number: 484360

Docket Number: MC253470

Legal Name: SEI ACQUISITION LLC

DBA (Doing-Business-As) Name SKYLINE EXPRESS



## Insurance History:

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: NLH0000225	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2001	To: 04/20/2001	Disposition: Replaced			

Insurance Carrier: DIAMOND STATE INSURANCE COMPANY  
Attn: THOMAS MCKENNA  
Address: 3 BALA PLAZA, SUITE 300 EAST  
BALA CYNWYD, PA 19004 US  
Telephone: (610) 668 - 6911 Fax: (610) 660 - 8886

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: TF341681	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2002	To: 04/20/2004	Disposition: Cancelled			

Insurance Carrier: NORTHLAND INSURANCE COMPANY  
Attn:  
Address: 385 WASHINGTON STREET MAIL CODE 103  
ST. PAUL, MN 55102-1309 US  
Telephone: (651) 310 - 4100 Fax: (651) 310 - 4949

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: TPO0005072	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2004	To: 04/20/2005	Disposition: Cancelled			

Insurance Carrier: NATIONAL CASUALTY COMPANY  
Attn: GARY FLAHERTY, VP  
Address: 8877 N. GAINEY CTR DR, PO BOX 4110  
SCOTTSDALE, AZ 85261 US  
Telephone: (800) 423 - 7675 Fax:

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: CTO0103352	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2005	To: 04/20/2006	Disposition: Cancelled			

Insurance Carrier: NATIONAL CASUALTY COMPANY  
Attn: GARY FLAHERTY, VP  
Address: 8877 N. GAINEY CTR DR, PO BOX 4110  
SCOTTSDALE, AZ 85261 US  
Telephone: (800) 423 - 7675 Fax:

# FMCSA Motor Carrier

JSDOT Number: 484360  
Docket Number: MC253470  
Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name: SKYLINE EXPRESS



## Insurance History:

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: CT774705-8006-061	Coverage From	\$0	To: \$1,000,000
Effective Date From: 04/20/2006	To: 10/16/2007	Disposition: Name Changed	

Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: LINDA HAMMERSCHMIDT  
Address: 1800 NORTH POINT DR  
STEVENS POINT, WI 54481 US  
Telephone: (800) 610 - 4888 Fax: (715) 346 - 8913

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: CT774705-8006-071	Coverage From	\$0	To: \$1,000,000
Effective Date From: 10/22/2007	To: 03/19/2013	Disposition: Cancelled	

Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: LINDA HAMMERSCHMIDT  
Address: 1800 NORTH POINT DR  
STEVENS POINT, WI 54481 US  
Telephone: (800) 610 - 4888 Fax: (715) 346 - 8913

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: CT774705-8006-071	Coverage From	\$0	To: \$1,000,000
Effective Date From: 10/22/2007	To: 02/11/2013	Disposition: Replaced	

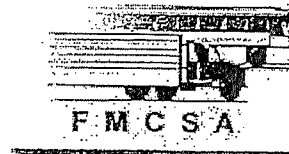
Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: LINDA HAMMERSCHMIDT  
Address: 1800 NORTH POINT DR  
STEVENS POINT, WI 54481 US  
Telephone: (800) 610 - 4888 Fax: (715) 346 - 8913

Form: 91X	Type: BIPD/Primary		
Policy/Surety Number: CT774705-8006-121	Coverage From	\$0	To: \$1,000,000
Effective Date From: 02/11/2013	To: 04/20/2013	Disposition: Cancelled	

Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: LINDA HAMMERSCHMIDT  
Address: 1800 NORTH POINT DR  
STEVENS POINT, WI 54481 US  
Telephone: (800) 610 - 4888 Fax: (715) 346 - 8913

# FMCSA Motor Carrier

JSDOT Number: 484360  
Docket Number: MC253470  
Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name: SKYLINE EXPRESS



## Insurance History:

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: 4232926 BM	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2013	To: 04/20/2015	Disposition: Replaced			

Insurance Carrier: CONTINENTAL WESTERN INSURANCE CO.  
Attn: MIKE MESTDAGH  
Address: P O BOX 1594  
URBANDALE, IA 50306 US  
Telephone: (515) 473 - 3423 Fax: (515) 473 - 3014

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: 8002449	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2015	To: 04/20/2017	Disposition: Replaced			

Insurance Carrier: GREAT DIVIDE INSURANCE COMPANY  
Attn: LEA SPELLS-ACCOUNTING C/O BERKLEY SPECIALTY  
Address: THREE RAVINIA DR, SUITE 500  
ATLANTA, GA 30346 US  
Telephone: (404) 443 - 2097 Fax: (404) 443 - 2050

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: A0034800001	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2017	To: 09/05/2017	Disposition: Name Changed			

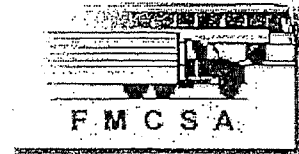
Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: AARON GLINIECKI  
Address: 1800 NORTH POINT DRIVE  
STEVENS, POINT, WI 54481 US  
Telephone: (800) 473 - 6879 Fax: (800) 999 - 4642

Form: 91X	Type: BIPD/Primary				
Policy/Surety Number: A0034800001	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 09/05/2017	To: 04/20/2019	Disposition: Replaced			

Insurance Carrier: SENTRY SELECT INSURANCE COMPANY  
Attn: LINDA HAMMERSCHMIDT  
Address: 1800 NORTH POINT DR  
STEVENS POINT, WI 54481 US  
Telephone: (800) 610 - 4888 Fax: (715) 346 - 8913

# MCSA Motor Carrier

JSDOT Number: 484360  
Jockey Number: MC253470  
Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name SKYLINE EXPRESS



## Insurance History:

Form: 82	Type: BIPD				
Policy/Surety Number: B-13526	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2019	To: 08/26/2020	Disposition: Name Changed			

Insurance Carrier: PROTECTIVE INSURANCE CO.  
Attn:  
Address: 111 CONGRESSIONAL BOULEVARD  
CARMEL, IN 46032 US  
Telephone: (317) 636 - 9800 Fax:

Form: 82	Type: BIPD				
Policy/Surety Number: B-13526	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2019	To: 11/12/2019	Disposition: Name Changed			

Insurance Carrier: PROTECTIVE INSURANCE CO.  
Attn:  
Address: 111 CONGRESSIONAL BOULEVARD  
CARMEL, IN 46032 US  
Telephone: (317) 636 - 9800 Fax:

Form: 82	Type: BIPD				
Policy/Surety Number: B-13526	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2019	To: 04/20/2019	Disposition: Replaced			

Insurance Carrier: PROTECTIVE INSURANCE CO.  
Attn:  
Address: 111 CONGRESSIONAL BOULEVARD  
CARMEL, IN 46032 US  
Telephone: (317) 636 - 9800 Fax:

Form: 82	Type: BIPD				
Policy/Surety Number: B-13526	Coverage From	\$0	To:	\$1,000,000	
Effective Date From: 04/20/2019	To: 04/20/2019	Disposition: Replaced			

Insurance Carrier: PROTECTIVE INSURANCE CO.  
Attn:  
Address: 111 CONGRESSIONAL BOULEVARD  
CARMEL, IN 46032 US  
Telephone: (317) 636 - 9800 Fax:



# FMCSA Motor Carrier

JSDOT Number: 484360  
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Legal Name: SEI ACQUISITION LLC  
DBA (Doing-Business-As) Name: SKYLINE EXPRESS



## Insurance History:

Form: 34	Type: CARGO				
Policy/Surety Number: KO1151 002313045	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 04/20/1995	To: 05/14/1998	Disposition: Cancelled			

Insurance Carrier: LIBERTY MUTUAL INSURANCE CO.  
Attn: HO SURETY CLAIMS  
Address: P. O. BOX 34526  
SEATTLE, WA 98124 US  
Telephone: (206) 473 - 6700 Fax: (866) 442 - 4060

Form: 34	Type: CARGO				
Policy/Surety Number: PST228635	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 04/20/1998	To: 04/20/2001	Disposition: Replaced			

Insurance Carrier: ROYAL INSURANCE COMPANY OF AMERICA  
Attn: KAREN MARTIN  
Address: 9300 ARROWPOINT BLVD.  
CHARLOTTE, NC 28273 US  
Telephone: (704) 522 - 2441 Fax: (704) 522 - 3200

Form: 34	Type: CARGO				
Policy/Surety Number: PST 22 86 35	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 04/20/1998	To: 04/20/1998	Disposition: Replaced			

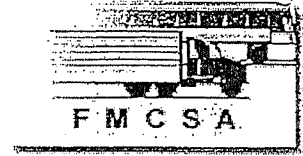
Insurance Carrier: ROYAL INSURANCE COMPANY OF AMERICA  
Attn: KAREN MARTIN  
Address: 9300 ARROWPOINT BLVD.  
CHARLOTTE, NC 28273 US  
Telephone: (704) 522 - 2441 Fax: (704) 522 - 3200

Form: 34	Type: CARGO				
Policy/Surety Number: QT-660-527D4485-TIL	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 04/20/2001	To: 04/20/2002	Disposition: Replaced			

Insurance Carrier: TRAVELERS INSURANCE COMPANY  
Attn: PLEASE CONTACT YOUR LOCAL AGENT  
Address: ENTERPRISE PRODUCT OPERATIONS 5GS  
HARTFORD, CT 06183 US  
Telephone: Fax:

# FMCSA Motor Carrier

JSDOT Number: 484360  
 Jocket Number: MC253470  
 Legal Name: SEI ACQUISITION LLC  
 DBA (Doing-Business-As) Name SKYLINE EXPRESS



## Insurance History:

Form: 34	Type: CARGO				
Policy/Surety Number: QT660-1030A870-TIL-	Coverage From	\$0	To:	\$5,000 *	
Effective Date From: 04/20/2002	To: 06/01/2006	Disposition: Cancelled			

Insurance Carrier: TRAVELERS PROPERTY CASUALTY CO. OF AMERICA  
 Attn: PLEASE CONTACT YOUR LOCAL AGENT  
 Address: 1 TOWER SQUARE, 5GS  
 HARTFORD, CT 06183 US  
 Telephone: Fax:

If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

## Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
	MOTOR PROPERTY CONTRACT CARRIER	REINSTATED	10/29/2007
0	MOTOR PROPERTY CONTRACT CARRIER	GRANTED	08/12/1992 REVOKED 10/16/2007

## Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

## Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason
CONTRACT	09/13/2007	10/16/2007	INVOLUNTARY REVOCATION