Universal wording updates to improve clarity and intent were made to all FIG text for this form on 07/31/2009.		
Section Name	Field Name	Field and/or Section Description
TITLE ACORD 26 (2002/01)	Policy Certification Log	The title of the form. ACORD 26, Policy Certification Log, is used with the Certificate of Property Insurance (ACORD 24), the Certificate of Liability Insurance (ACORD 25), the Certificate of Aviation Liability Insurance (ACORD 20), the Certificate of Aircraft Insurance (ACORD 21), the Evidence of Personal Property Insurance (ACORD 27), and the Evidence of Commercial Property Insurance (ACORD 28.). Its purpose is to keep a manual record or to prepare a hard copy of a computer record of all certifications issued for a single insured. The form summarizes the information contained in the above forms and identifies several key items to check when issuing renewals.
IDENTIFICATION SECTION	Agency	Enter text: The full name of the producer/agency.
IDENTIFICATION SECTION		Enter text: The mailing address line one of the producer/agency.
IDENTIFICATION SECTION		Enter text: The mailing address line two of the producer/agency.
IDENTIFICATION SECTION		Enter text: The mailing address city name of the producer/agency.
IDENTIFICATION SECTION		Enter code: The mailing address state or province code of the producer/agency.
IDENTIFICATION SECTION		Enter code: The mailing address postal code of the producer/agency.
IDENTIFICATION SECTION	Insured	Enter text: The named insured(s) as it/they will appear on the policy declarations page.
IDENTIFICATION SECTION		Enter text: The named insured's mailing address line one.
IDENTIFICATION SECTION		Enter text: The named insured's mailing address line two.
IDENTIFICATION SECTION		Enter text: The named insured's mailing address city name.
IDENTIFICATION SECTION		Enter code: The named insured's mailing address state or province code.
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IDENTIFICATION SECTION	A. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.
IDENTIFICATION SECTION	B. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.
IDENTIFICATION SECTION	C. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.
IDENTIFICATION SECTION	D. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.
IDENTIFICATION SECTION	E. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.

Section Name	Field Name	Field and/or Section Description
IDENTIFICATION SECTION	F. Insurers Affording Coverage	Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name.
IDENTIFICATION SECTION	Policy Period - Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Policy Period - Expiration Date	Enter date: The date on which the terms and conditions of the policy will expire.
CERTIFICATES/EVIDENCE	Date Issued	Enter date: The date the certificate / evidence was issued.
CERTIFICATES/EVIDENCE	Log ID Number	Enter identifier: The producer assigned number for the certificate.
CERTIFICATES/EVIDENCE	Certificate/Evidence Holder and Address	Enter text: The certificate holder's full name.
IDENTIFICATION SECTION		Enter text: The certificate holder's mailing address line one.
IDENTIFICATION SECTION		Enter text: The certificate holder's mailing address city name.
IDENTIFICATION SECTION		Enter code: The certificate holder's mailing address state or province code.
IDENTIFICATION SECTION		Enter code: The certificate holder's mailing address postal code.
CERTIFICATES/EVIDENCE	Letter	Enter code: The company letter of the insurer for the policy, as identified in the "Insurers Affording Coverage" section of the form.
CERTIFICATES/EVIDENCE	NAIC Code	Enter code: The identification code assigned to the insurer by the NAIC.
CERTIFICATES/EVIDENCE	Line of Business	Enter code: The line of business code for the coverages indicated on the Certificate of Insurance or Evidence of Property Insurance. Examples: AUTO - Automobile CGL - General Liability HOME - Homeowners WORK - Workers Compensation
CERTIFICATES/EVIDENCE	Insr Ltr	Enter code: The company letter of the insurer for the policy, as identified in the "Insurers Affording Coverage" section of the form.
CERTIFICATES/EVIDENCE	Sched Auto	Check the box (if applicable): Indicates the Certificate of Insurance or Evidence of Property Insurance was issued for a specific auto that is scheduled on a policy.
CERTIFICATES/EVIDENCE	Word Change	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the wording that appears on the Certificate of Insurance or Evidence of Property Insurance has been changed.

Section Name	Field Name	Field and/or Section Description
CERTIFICATES/EVIDENCE	Add Ins	Check the box (if applicable): Indicates the certificate holder has been named as an additional insured on the policy.
CERTIFICATES/EVIDENCE	Perm	Enter Y for a "Yes" response. Input N for "No" response. Indicate if a new Certificate/Evidence is to be issued annually.
CERTIFICATES/EVIDENCE	# Days Canc	Enter number: The number of days in which the insurer will endeavor to mail a written cancellation notice. This amount is subject to approval by the insurer(s).
CERTIFICATES/EVIDENCE	Month/Year Certification Expires	Enter text: The month and year the certification expires (MM/YYYY).
CERTIFICATES/EVIDENCE	Date Issued	Enter date: The date the certificate / evidence was issued.
CERTIFICATES/EVIDENCE	Log ID Number	Enter identifier: The producer assigned number for the certificate.
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Edition	Date	The edition identifier of the form including the form number and edition (the date is typically formatted YYYY/MM).