

Section Name	Field Name	Field and/or Section Description
<p>TITLE ACORD 63 (2010/07)</p>	<p>Fraud Statements</p>	<p>The title of the form. ACORD 63, Fraud Statements, is used in the following states that have enacted anti-fraud statutes that prescribe specific fraud warning text for disclosure notices to applicants for insurance and/or claimants.</p> <p>In the case of claimants, the back of each ACORD loss notice contains the required fraud warning in compliance with state laws and regulations.</p> <p>With respect to applications, all ACORD applications include the required fraud warning or ACORD 63 must be attached (See below).</p> <p>NOTE: When a risk is located in more than one state, the applicable law is the law in effect for the state in which the insurance policy is written, or the insurance claim is made.</p> <p>California: All claim forms, and auto applications contain the required text.</p> <p>Colorado: ACORD 63 responds.</p> <p>Arkansas, Kentucky, New Mexico, New York: ACORD has secured agreement among these state regulators to recognize the "standard" fraud warning text included in all ACORD applications. Companies with unique, program-specific countrywide applications should consider inserting ACORD's "standard" text, in their applications.</p> <p>District of Columbia: ACORD 63 responds.</p>

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TITLE ACORD 63 (2010/07)		<p>Florida: ACORD 63 responds.</p> <p>Hawaii: ACORD 63 responds.</p> <p>Idaho, Indiana, Nevada, New Hampshire: Claim forms only.</p> <p>Kansas: ACORD 63 responds</p> <p>Louisiana, Maine and Virginia: The "standard" ACORD fraud statement has been revised to respond to these states.</p> <p>Massachusetts, Nebraska, Oregon and Vermont: ACORD 63 responds.</p> <p>Michigan: Regulators are enforcing law requiring specific fraud text in claim forms, but are not requiring that warnings be included in applications.</p> <p>Minnesota: ACORD 63 responds</p> <p>Arizona, New Jersey, Pennsylvania, Tennessee: Claim forms and Applications. These states also accepted ACORD's "standard" text, and also recognize supplements to applications.</p> <p>Ohio: Claim forms and applications. ACORD 63 responds.</p> <p>Oklahoma: Claim forms, insurance policies and applications. ACORD 63 responds.</p> <p>Washington: ACORD 63 responds.</p>
GENERAL STATEMENT	Type of Insurance	Enter text: The line of business written by the insurer. As used here, the type of insurance for which this notice is part of your application.
GENERAL STATEMENT	Applicant's Signature	Sign here: Accommodates the signature of the applicant or named insured.
GENERAL STATEMENT	Date	Enter date: The date the form was signed by the named insured.
Edition	Date	The edition identifier of the form including the form number and edition (the date is typically formatted YYYY/MM).