ACORD 290 ND (2014/12) - North Dakota Personal Auto Application Section

ACORD 290 ND, North Dakota Personal Auto Application Section, is used when insurance is desired for personal vehicles. ACORD 290 ND was designed to be used in conjunction with ACORD 88, Personal Insurance Application - Applicant Information Section. ACORD 290 ND must be attached to ACORD 88 for a completed application submission.

Following are the unique state characteristics of ACORD 290 ND, North Dakota Personal Auto Application Section:

 * Personal Injury Protection coverages revised to reflect North Dakota's unique coverages and options. Refer to your State Manual.

 * Uninsured and Underinsured Motorists Bodily Injury coverages are combined. Uninsured / Underinsured Motorists Property Damage coverages are not available.

 * Statement is added to the form to allow the applicant to reject Additional Personal Injury Protection coverage. The applicant must initial the form.

Form Page 1

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
IDENTIFICATION SECTION	Date	Enter date: The date on which the form is completed.
IDENTIFICATION SECTION	Agency	Enter text: The full name of the producer / agency.
IDENTIFICATION SECTION	Policy Number	Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number.
IDENTIFICATION SECTION	Effective Date	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
IDENTIFICATION SECTION	Named Insured(s)	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
IDENTIFICATION SECTION	Carrier	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. As used here, this may contain the name of the residual market plan.
IDENTIFICATION SECTION	NAIC Code	Enter code: The identification code assigned to the insurer by the NAIC.
GARAGING ADDRESS (from ACORD 88)	Location #	Enter number: The producer assigned number of the location.

GARAGING ADDRESS (from ACORD 88)	Street	Enter text: The first address line of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	City	Enter text: The city of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	County	Enter text: The county of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	State	Enter code: The state or province of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	Zip + 4	Enter code: The postal code of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	Location #	Enter number: The producer assigned number of the location.
GARAGING ADDRESS (from ACORD 88)	Street	Enter text: The first address line of the physical location. As used here, this is the garaging location of the vehicle.
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GARAGING ADDRESS (from ACORD 88)	Zip + 4	Enter code: The postal code of the physical location. As used here, this is the garaging location of the vehicle.

GARAGING ADDRESS (from ACORD 88)	**Location #**	Enter number: The producer assigned number of the location.
GARAGING ADDRESS (from ACORD 88)	**Street**	Enter text: The first address line of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	**City**	Enter text: The city of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	**County**	Enter text: The county of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	**State**	Enter code: The state or province of the physical location. As used here, this is the garaging location of the vehicle.
GARAGING ADDRESS (from ACORD 88)	**Zip + 4**	Enter code: The postal code of the physical location. As used here, this is the garaging location of the vehicle.
VEHICLE DESCRIPTION / USE	**Total Number of Vehicles in Household**	Enter number: The total number of vehicles in the household.
VEHICLE DESCRIPTION / USE	**Veh #**	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE		Enter number: The producer assigned number of the location.
VEHICLE DESCRIPTION / USE	**Year**	Enter year: The model year of the vehicle.
VEHICLE DESCRIPTION / USE	**Make**	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
VEHICLE DESCRIPTION / USE	**Model**	Enter text: The manufacturer's model name for the vehicle.
VEHICLE DESCRIPTION / USE	**Body Type**	Enter code: The body type of the vehicle.
VEHICLE DESCRIPTION / USE	**VIN**	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
VEHICLE DESCRIPTION / USE	**Registered State**	Enter code: The state or province in which the vehicle is registered.
VEHICLE DESCRIPTION / USE	**HP/CC**	Enter number: The amount of horsepower or the number of cubic centimeters of displacement.
VEHICLE DESCRIPTION / USE	**Date Leased**	Enter text: The month and year the applicant leased the vehicle (MM/YYYY).

VEHICLE DESCRIPTION / USE	Date Purch	Enter text: The month and year the applicant acquired the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	New/Used	Enter code: A code indicating if the vehicle was purchased new or used.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Cost New	Enter amount: The original cost of the vehicle.
VEHICLE DESCRIPTION / USE	Symbol Age Grp	Enter code: The symbol required for physical damage coverage.
VEHICLE DESCRIPTION / USE	Comp / OTC Sym	Enter code: The symbol required for comprehensive / other than collision coverage.
VEHICLE DESCRIPTION / USE	Coll Sym	Enter code: The symbol required for collision coverage.
VEHICLE DESCRIPTION / USE	Terr	Enter code: The rating territory code where the vehicle is principally garaged.
VEHICLE DESCRIPTION / USE	Miles 1 Way Wk/Schl	Enter number: The number of miles from the garage location to school or work.
VEHICLE DESCRIPTION / USE	# Days Week	Enter number: The number of days per week the vehicle is used to commute from the garage location to work or school including driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	# Weeks/ Mo.	Enter number: The number of weeks per month the vehicle is used to commute from the garage location to work or school. This includes driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	Usage	Enter code: The predominant use of the vehicle (e.g. P - Pleasure, B - Business, F - Farm).
VEHICLE DESCRIPTION / USE	Perform	Enter code: The performance level of the vehicle (i.e. B - Basic, H - High, I - Intermediate, P - Sport Premium, S - Sports car).
VEHICLE DESCRIPTION / USE	Multi-Car	Check the box (if applicable): Indicates if the vehicle is subject to consideration for multi-car discount.
VEHICLE DESCRIPTION / USE	Carpool	Enter Y for a "Yes" response. Input N for "No" response. Indicates if a carpool discount applies.

VEHICLE DESCRIPTION / USE	**Gar Code**	Enter code: The garaging code of the vehicle (where the vehicle is parked at night). Select from the following options: A - Garaged at School B - Off street at school C - On street at school D - Driveway G - Garaged N - Not garaged (if other options do not apply) O - Off street P - Parking Lot R - Carport S - Street
VEHICLE DESCRIPTION / USE	**Odometer Reading**	Enter number: The odometer reading at the time the insurance policy is applied for.
VEHICLE DESCRIPTION / USE	**Annual Mileage**	Enter number: The total estimated annual mileage for the vehicle.
VEHICLE DESCRIPTION / USE	**Govern Driver**	Enter number: The producer assigned driver number of the driver assigned to the vehicle for rating purposes.
VEHICLE DESCRIPTION / USE	**Driver Number**	Enter number: The producer assigned driver number of the driver using the vehicle.
VEHICLE DESCRIPTION / USE	**Driver Use %**	Enter percentage: The percentage of time a particular driver uses the vehicle.
VEHICLE DESCRIPTION / USE	**Driver Number**	Enter number: The producer assigned driver number of the driver using the vehicle.
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VEHICLE DESCRIPTION / USE	Driver Use %	Enter percentage: The percentage of time a particular driver uses the vehicle.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Class	Enter code: The rate class of the vehicle. If two rate classes are required, this element should be used to enter the liability code.
VEHICLE DESCRIPTION / USE	Passive Seat Belt	Enter code: The type of seat belts in the vehicle.
VEHICLE DESCRIPTION / USE	Air Bag Drv/Both	Enter code: The type of air bags in the vehicle. Some states may only require a Yes or No response to indicate airbags exists.
VEHICLE DESCRIPTION / USE	Anti-Lock Brakes 2/4	Enter code: The type of anti-lock brakes in the vehicle.
VEHICLE DESCRIPTION / USE	Anti-Theft Devices	Enter code: The principal anti-theft device found on the vehicle. Some states may only require a Yes or No response to indicates there is an anti-theft device on the vehicle.
VEHICLE DESCRIPTION / USE	Credits and Surcharges	Enter text: A credit or surcharge represented as text.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE		Enter number: The producer assigned number of the location.
VEHICLE DESCRIPTION / USE	Year	Enter year: The model year of the vehicle.
VEHICLE DESCRIPTION / USE	Make	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
VEHICLE DESCRIPTION / USE	Model	Enter text: The manufacturer's model name for the vehicle.
VEHICLE DESCRIPTION / USE	Body Type	Enter code: The body type of the vehicle.
VEHICLE DESCRIPTION / USE	VIN	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.

VEHICLE DESCRIPTION / USE	Registered State	Enter code: The state or province in which the vehicle is registered.
VEHICLE DESCRIPTION / USE	HP/CC	Enter number: The amount of horsepower or the number of cubic centimeters of displacement.
VEHICLE DESCRIPTION / USE	Date Leased	Enter text: The month and year the applicant leased the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	Date Purch	Enter text: The month and year the applicant acquired the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	New/Used	Enter code: A code indicating if the vehicle was purchased new or used.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Cost New	Enter amount: The original cost of the vehicle.
VEHICLE DESCRIPTION / USE	Symbol Age Grp	Enter code: The symbol required for physical damage coverage.
VEHICLE DESCRIPTION / USE	Comp / OTC Sym	Enter code: The symbol required for comprehensive / other than collision coverage.
VEHICLE DESCRIPTION / USE	Coll Sym	Enter code: The symbol required for collision coverage.
VEHICLE DESCRIPTION / USE	Terr	Enter code: The rating territory code where the vehicle is principally garaged.
VEHICLE DESCRIPTION / USE	Miles 1 Way Wk/Schl	Enter number: The number of miles from the garage location to school or work.
VEHICLE DESCRIPTION / USE	# Days Week	Enter number: The number of days per week the vehicle is used to commute from the garage location to work or school including driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	# Weeks/ Mo.	Enter number: The number of weeks per month the vehicle is used to commute from the garage location to work or school. This includes driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	Usage	Enter code: The predominant use of the vehicle (e.g. P - Pleasure, B - Business, F - Farm).
VEHICLE DESCRIPTION / USE	Perform	Enter code: The performance level of the vehicle (i.e. B - Basic, H - High, I - Intermediate, P - Sport Premium, S - Sports car).
VEHICLE DESCRIPTION / USE	Multi-Car	Check the box (if applicable): Indicates if the vehicle is subject to consideration for multi-car discount.

VEHICLE DESCRIPTION / USE	Carpool	Enter Y for a "Yes" response. Input N for "No" response. Indicates if a carpool discount applies.
VEHICLE DESCRIPTION / USE	Gar Code	Enter code: The garaging code of the vehicle (where the vehicle is parked at night). Select from the following options: A - Garaged at School B - Off street at school C - On street at school D - Driveway G - Garaged N - Not garaged (if other options do not apply) O - Off street P - Parking Lot R - Carport S - Street
VEHICLE DESCRIPTION / USE	Odometer Reading	Enter number: The odometer reading at the time the insurance policy is applied for.
VEHICLE DESCRIPTION / USE	Annual Mileage	Enter number: The total estimated annual mileage for the vehicle.
VEHICLE DESCRIPTION / USE	Govern Driver	Enter number: The producer assigned driver number of the driver assigned to the vehicle for rating purposes.
VEHICLE DESCRIPTION / USE	Driver Use %	Enter percentage: The percentage of time a particular driver uses the vehicle.
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VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Class	Enter code: The rate class of the vehicle. If two rate classes are required, this element should be used to enter the liability code.

VEHICLE DESCRIPTION / USE	**Passive Seat Belt**	Enter code: The type of seat belts in the vehicle.
VEHICLE DESCRIPTION / USE	**Air Bag Drv/Both**	Enter code: The type of air bags in the vehicle. Some states may only require a Yes or No response to indicate airbags exists.
VEHICLE DESCRIPTION / USE	**Anti-Lock Brakes 2/4**	Enter code: The type of anti-lock brakes in the vehicle.
VEHICLE DESCRIPTION / USE	**Anti-Theft Devices**	Enter code: The principal anti-theft device found on the vehicle. Some states may only require a Yes or No response to indicates there is an anti-theft device on the vehicle.
VEHICLE DESCRIPTION / USE	**Credits and Surcharges**	Enter text: A credit or surcharge represented as text.
VEHICLE DESCRIPTION / USE	**Veh #**	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE		Enter number: The producer assigned number of the location.
VEHICLE DESCRIPTION / USE	**Year**	Enter year: The model year of the vehicle.
VEHICLE DESCRIPTION / USE	**Make**	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
VEHICLE DESCRIPTION / USE	**Model**	Enter text: The manufacturer's model name for the vehicle.
VEHICLE DESCRIPTION / USE	**Body Type**	Enter code: The body type of the vehicle.
VEHICLE DESCRIPTION / USE	**VIN**	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
VEHICLE DESCRIPTION / USE	**Registered State**	Enter code: The state or province in which the vehicle is registered.
VEHICLE DESCRIPTION / USE	**HP/CC**	Enter number: The amount of horsepower or the number of cubic centimeters of displacement.
VEHICLE DESCRIPTION / USE	**Date Leased**	Enter text: The month and year the applicant leased the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	**Date Purch**	Enter text: The month and year the applicant acquired the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	**New/Used**	Enter code: A code indicating if the vehicle was purchased new or used.

VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Cost New	Enter amount: The original cost of the vehicle.
VEHICLE DESCRIPTION / USE	Symbol Age Grp	Enter code: The symbol required for physical damage coverage.
VEHICLE DESCRIPTION / USE	Comp / OTC Sym	Enter code: The symbol required for comprehensive / other than collision coverage.
VEHICLE DESCRIPTION / USE	Coll Sym	Enter code: The symbol required for collision coverage.
VEHICLE DESCRIPTION / USE	Terr	Enter code: The rating territory code where the vehicle is principally garaged.
VEHICLE DESCRIPTION / USE	Miles 1 Way Wk/Schl	Enter number: The number of miles from the garage location to school or work.
VEHICLE DESCRIPTION / USE	# Days Week	Enter number: The number of days per week the vehicle is used to commute from the garage location to work or school including driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	# Weeks/ Mo.	Enter number: The number of weeks per month the vehicle is used to commute from the garage location to work or school. This includes driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	Usage	Enter code: The predominant use of the vehicle (e.g. P - Pleasure, B - Business, F - Farm).
VEHICLE DESCRIPTION / USE	Perform	Enter code: The performance level of the vehicle (i.e. B - Basic, H - High, I - Intermediate, P - Sport Premium, S - Sports car).
VEHICLE DESCRIPTION / USE	Multi-Car	Check the box (if applicable): Indicates if the vehicle is subject to consideration for multi-car discount.
VEHICLE DESCRIPTION / USE	Carpool	Enter Y for a "Yes" response. Input N for "No" response. Indicates if a carpool discount applies.

VEHICLE DESCRIPTION / USE	Gar Code	Enter code: The garaging code of the vehicle (where the vehicle is parked at night). Select from the following options: A - Garaged at School B - Off street at school C - On street at school D - Driveway G - Garaged N - Not garaged (if other options do not apply) O - Off street P - Parking Lot R - Carport S - Street
VEHICLE DESCRIPTION / USE	Odometer Reading	Enter number: The odometer reading at the time the insurance policy is applied for.
VEHICLE DESCRIPTION / USE	Annual Mileage	Enter number: The total estimated annual mileage for the vehicle.
VEHICLE DESCRIPTION / USE	Govern Driver	Enter number: The producer assigned driver number of the driver assigned to the vehicle for rating purposes.
VEHICLE DESCRIPTION / USE	Driver Use %	Enter percentage: The percentage of time a particular driver uses the vehicle.
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VEHICLE DESCRIPTION / USE	Driver Use %	Enter percentage: The percentage of time a particular driver uses the vehicle.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Class	Enter code: The rate class of the vehicle. If two rate classes are required, this element should be used to enter the liability code.
VEHICLE DESCRIPTION / USE	Passive Seat Belt	Enter code: The type of seat belts in the vehicle.

VEHICLE DESCRIPTION / USE	Air Bag Drv/Both	Enter code: The type of air bags in the vehicle. Some states may only require a Yes or No response to indicate airbags exists.
VEHICLE DESCRIPTION / USE	Anti-Lock Brakes 2/4	Enter code: The type of anti-lock brakes in the vehicle.
VEHICLE DESCRIPTION / USE	Anti-Theft Devices	Enter code: The principal anti-theft device found on the vehicle. Some states may only require a Yes or No response to indicates there is an anti-theft device on the vehicle.
VEHICLE DESCRIPTION / USE	Credits and Surcharges	Enter text: A credit or surcharge represented as text.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE		Enter number: The producer assigned number of the location.
VEHICLE DESCRIPTION / USE	Year	Enter year: The model year of the vehicle.
VEHICLE DESCRIPTION / USE	Make	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
VEHICLE DESCRIPTION / USE	Model	Enter text: The manufacturer's model name for the vehicle.
VEHICLE DESCRIPTION / USE	Body Type	Enter code: The body type of the vehicle.
VEHICLE DESCRIPTION / USE	VIN	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
VEHICLE DESCRIPTION / USE	Registered State	Enter code: The state or province in which the vehicle is registered.
VEHICLE DESCRIPTION / USE	HP/CC	Enter number: The amount of horsepower or the number of cubic centimeters of displacement.
VEHICLE DESCRIPTION / USE	Date Leased	Enter text: The month and year the applicant leased the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	Date Purch	Enter text: The month and year the applicant acquired the vehicle (MM/YYYY).
VEHICLE DESCRIPTION / USE	New/Used	Enter code: A code indicating if the vehicle was purchased new or used.
VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.

VEHICLE DESCRIPTION / USE	Cost New	Enter amount: The original cost of the vehicle.
VEHICLE DESCRIPTION / USE	Symbol Age Grp	Enter code: The symbol required for physical damage coverage.
VEHICLE DESCRIPTION / USE	Comp / OTC Sym	Enter code: The symbol required for comprehensive / other than collision coverage.
VEHICLE DESCRIPTION / USE	Coll Sym	Enter code: The symbol required for collision coverage.
VEHICLE DESCRIPTION / USE	Terr	Enter code: The rating territory code where the vehicle is principally garaged.
VEHICLE DESCRIPTION / USE	Miles 1 Way Wk/Schl	Enter number: The number of miles from the garage location to school or work.
VEHICLE DESCRIPTION / USE	# Days Week	Enter number: The number of days per week the vehicle is used to commute from the garage location to work or school including driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	# Weeks/ Mo.	Enter number: The number of weeks per month the vehicle is used to commute from the garage location to work or school. This includes driving to and from a commuter lot or transit station.
VEHICLE DESCRIPTION / USE	Usage	Enter code: The predominant use of the vehicle (e.g. P - Pleasure, B - Business, F - Farm).
VEHICLE DESCRIPTION / USE	Perform	Enter code: The performance level of the vehicle (i.e. B - Basic, H - High, I - Intermediate, P - Sport Premium, S - Sports car).
VEHICLE DESCRIPTION / USE	Multi-Car	Check the box (if applicable): Indicates if the vehicle is subject to consideration for multi-car discount.
VEHICLE DESCRIPTION / USE	Carpool	Enter Y for a "Yes" response. Input N for "No" response. Indicates if a carpool discount applies.
VEHICLE DESCRIPTION / USE	Gar Code	Enter code: The garaging code of the vehicle (where the vehicle is parked at night). Select from the following options: A - Garaged at School B - Off street at school C - On street at school D - Driveway G - Garaged N - Not garaged (if other options do not apply) O - Off street P - Parking Lot R - Carport S - Street

VEHICLE DESCRIPTION / USE	Odometer Reading	Enter number: The odometer reading at the time the insurance policy is applied for.
VEHICLE DESCRIPTION / USE	Annual Mileage	Enter number: The total estimated annual mileage for the vehicle.
VEHICLE DESCRIPTION / USE	Govern Driver	Enter number: The producer assigned driver number of the driver assigned to the vehicle for rating purposes.
VEHICLE DESCRIPTION / USE	Driver Use %	Enter percentage: The percentage of time a particular driver uses the vehicle.
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VEHICLE DESCRIPTION / USE	Veh #	Enter number: The producer assigned vehicle number.
VEHICLE DESCRIPTION / USE	Class	Enter code: The rate class of the vehicle. If two rate classes are required, this element should be used to enter the liability code.
VEHICLE DESCRIPTION / USE	Passive Seat Belt	Enter code: The type of seat belts in the vehicle.
VEHICLE DESCRIPTION / USE	Air Bag Drv/Both	Enter code: The type of air bags in the vehicle. Some states may only require a Yes or No response to indicate airbags exists.
VEHICLE DESCRIPTION / USE	Anti-Lock Brakes 2/4	Enter code: The type of anti-lock brakes in the vehicle.
VEHICLE DESCRIPTION / USE	Anti-Theft Devices	Enter code: The principal anti-theft device found on the vehicle. Some states may only require a Yes or No response to indicates there is an anti-theft device on the vehicle.
VEHICLE DESCRIPTION / USE	Credits and Surcharges	Enter text: A credit or surcharge represented as text.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.

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COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Single Limit Liability	Enter limit: The vehicle combined single limit liability each accident amount. Any questions about appropriate limits or applicable policy coverage(s) should be answered by the issuing insurer(s).
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle combined single limit liability premium amount.
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COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle combined single limit liability premium amount.
COVERAGES / PREMIUMS	Bodily Injury	Enter limit: The vehicle policy, bodily injury per person limit amount. Any questions about appropriate limits or applicable policy coverage(s) should be answered by the issuing insurer(s).
COVERAGES / PREMIUMS	Ea Accident	Enter limit: The vehicle policy, bodily injury per accident limit amount. Any questions about appropriate limits or applicable policy coverage(s) should be answered by the issuing insurer(s).
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle policy, bodily injury premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle policy, bodily injury premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle policy, bodily injury premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The vehicle policy, bodily injury premium amount.
COVERAGES / PREMIUMS	Property Damage	Enter limit: The vehicle policy, property damage per accident limit amount. Any questions about appropriate limits or applicable policy coverage(s) should be answered by the issuing insurer(s).
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The property damage premium amount.
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COVERAGES / PREMIUMS	Premium Amount	Enter amount: The property damage premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The property damage premium amount.
COVERAGES / PREMIUMS	Personal Inj Protection	Enter limit: The personal injury protection (PIP) limit amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with personal injury protection (PIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with personal injury protection (PIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with personal injury protection (PIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with personal injury protection (PIP) coverage.

COVERAGES / PREMIUMS	Additional Personal Inj Protection	Enter limit: The additional personal injury protection (APIP) work loss/survivors income loss limit amount.
COVERAGES / PREMIUMS	Replacement Svcs / Survivors Repl Loss	Enter limit: The replacement services/survivors replacement loss limit amount for additional personal injury protection (APIP) coverage.
COVERAGES / PREMIUMS	Funeral Expense	Enter limit: The limit amount for funeral expense benefit coverage.
COVERAGES / PREMIUMS	Tot Addl PIP Limit	Enter limit: The additional personal injury protection (APIP) limit amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with additional personal injury protection (APIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with additional personal injury protection (APIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with additional personal injury protection (APIP) coverage.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The premium associated with additional personal injury protection (APIP) coverage.
COVERAGES / PREMIUMS	Coordination of Benefits - Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the personal injury protection (PIP) coordination of benefits option applies.
COVERAGES / PREMIUMS	Medical Payments	Enter limit: The medical payments per person limit.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The medical payments premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The medical payments premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The medical payments premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The medical payments premium amount.
COVERAGES / PREMIUMS	Uninsured/Underinsured Motorists	Enter limit: The uninsured / underinsured motorists combined single limit per accident amount. The use of this limit varies by state.
COVERAGES / PREMIUMS	Ea Person	Enter limit: The uninsured / underinsured motorists bodily injury per person limit. The use of this limit varies by state. On commercial policies, this may contain the combined single limit per accident amount.
COVERAGES / PREMIUMS	Ea Accident	Enter limit: The uninsured / underinsured motorists bodily injury per accident limit (in some states this may contain the uninsured / underinsured motorists combined single limit per accident limit). The use of this limit varies by state.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The uninsured / underinsured premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The uninsured / underinsured premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The uninsured / underinsured premium amount.

COVERAGES / PREMIUMS	Premium Amount	Enter amount: The uninsured / underinsured premium amount.
COVERAGES / PREMIUMS	Comprehensive / OTC	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The comprehensive or other than collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The comprehensive or other than collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The comprehensive or other than collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The comprehensive or other than collision deductible amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The comprehensive or other than collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The comprehensive or other than collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The comprehensive or other than collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The comprehensive or other than collision premium amount.
COVERAGES / PREMIUMS	Collision	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The collision deductible amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Deductible	Enter deductible: The collision deductible amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The collision premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The collision premium amount.
COVERAGES / PREMIUMS	ACV unless Amount Stated	Enter number: The producer assigned vehicle number.

COVERAGES / PREMIUMS	Limit	Enter limit: The limit associated with comprehensive and collision coverage is the actual cash value of the vehicle, unless an amount is stated here.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit associated with comprehensive and collision coverage is the actual cash value of the vehicle, unless an amount is stated here.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit associated with comprehensive and collision coverage is the actual cash value of the vehicle, unless an amount is stated here.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit associated with comprehensive and collision coverage is the actual cash value of the vehicle, unless an amount is stated here.
COVERAGES / PREMIUMS	Towing & Labor	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The towing and labor limit amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The towing and labor limit amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The towing and labor limit amount.
COVERAGES / PREMIUMS	Vehicle #	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Limit	Enter limit: The towing and labor limit amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The towing and labor premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The towing and labor premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The towing and labor premium amount.
COVERAGES / PREMIUMS	Premium Amount	Enter amount: The towing and labor premium amount.
COVERAGES / PREMIUMS	Transportation Expenses/Rental Reimbursements	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	Transportation Expense Per Day Limit	Enter limit: The transportation expense or rental reimbursement per day limit amount.
COVERAGES / PREMIUMS	Transportation Expense Maximum Limit	Enter limit: The transportation expense or rental reimbursement maximum limit amount.

COVERAGES / PREMIUMS	**Vehicle #**	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	**Transportation Expense Per Day Limit**	Enter limit: The transportation expense or rental reimbursement per day limit amount.
COVERAGES / PREMIUMS	**Transportation Expense Maximum Limit**	Enter limit: The transportation expense or rental reimbursement maximum limit amount.
COVERAGES / PREMIUMS	**Vehicle #**	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	**Transportation Expense Per Day Limit**	Enter limit: The transportation expense or rental reimbursement per day limit amount.
COVERAGES / PREMIUMS	**Transportation Expense Maximum Limit**	Enter limit: The transportation expense or rental reimbursement maximum limit amount.
COVERAGES / PREMIUMS	**Vehicle #**	Enter number: The producer assigned vehicle number.
COVERAGES / PREMIUMS	**Transportation Expense Per Day Limit**	Enter limit: The transportation expense or rental reimbursement per day limit amount.
COVERAGES / PREMIUMS	**Transportation Expense Maximum Limit**	Enter limit: The transportation expense or rental reimbursement maximum limit amount.
COVERAGES / PREMIUMS	**Premium Amount**	Enter amount: The transportation expense or rental reimbursement premium amount.
COVERAGES / PREMIUMS	**Premium Amount**	Enter amount: The transportation expense or rental reimbursement premium amount.
COVERAGES / PREMIUMS	**Premium Amount**	Enter amount: The transportation expense or rental reimbursement premium amount.
COVERAGES / PREMIUMS	**Premium Amount**	Enter amount: The transportation expense or rental reimbursement premium amount.
COVERAGES / PREMIUMS	**Coverage Code**	Enter code: The coverage code of the other coverage or adjustment.
COVERAGES / PREMIUMS	**Description**	Enter text: The description of the coverage.
COVERAGES / PREMIUMS	**Limit**	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	**Limit Applies To**	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	**Limit**	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	**Limit Applies To**	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	**Deductible $**	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	**Deductible %**	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	**Option 1**	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	**Option 2**	Enter code: The option applicable to this coverage.

COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 4	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Coverage Code	Enter code: The coverage code of the other coverage or adjustment.
COVERAGES / PREMIUMS	Description	Enter text: The description of the coverage.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Deductible $	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	Deductible %	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	Option 1	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 2	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 4	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
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COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
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COVERAGES / PREMIUMS	Description	Enter text: The description of the coverage.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.

COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Deductible $	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	Deductible %	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	Option 1	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 2	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 4	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
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COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
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COVERAGES / PREMIUMS	Description	Enter text: The description of the coverage.
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COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
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COVERAGES / PREMIUMS	Deductible $	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	Deductible %	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	Option 1	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 2	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 4	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
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COVERAGES / PREMIUMS	Coverage Code	Enter code: The coverage code of the other coverage or adjustment.
COVERAGES / PREMIUMS	Description	Enter text: The description of the coverage.
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
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COVERAGES / PREMIUMS	Deductible $	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	Deductible %	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	Option 1	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 2	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.
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COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Limit	Enter limit: The limit amount of the other coverage.
COVERAGES / PREMIUMS	Limit Applies To	Enter code: The code indicating what the limit applies to (e.g. per accident, per person).
COVERAGES / PREMIUMS	Deductible $	Enter deductible: The deductible amount of the coverage.
COVERAGES / PREMIUMS	Deductible %	Enter percentage: The deductible percentage for the coverage.
COVERAGES / PREMIUMS	Option 1	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 2	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Option 3	Enter code: The option applicable to this coverage.

COVERAGES / PREMIUMS	Option 4	Enter code: The option applicable to this coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Amount	Enter amount: The premium amount associated with the coverage.
COVERAGES / PREMIUMS	Estimated Total	Enter amount: The estimated total cost amount of the policy.
COVERAGES / PREMIUMS	Policy Fee	Enter amount: The amount of fee associated with the policy.
COVERAGES / PREMIUMS	Total Per Vehicle	Enter amount: The total amount for the vehicle.
COVERAGES / PREMIUMS	Total Per Vehicle	Enter amount: The total amount for the vehicle.
COVERAGES / PREMIUMS	Total Per Vehicle	Enter amount: The total amount for the vehicle.
COVERAGES / PREMIUMS	Total Per Vehicle	Enter amount: The total amount for the vehicle.

Form Page 2

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	First Name	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	Middle Name	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	Last Name	Enter text: The driver's last name (surname).
RESIDENT & DRIVER INFORMATION	Sex	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	Mar Stat	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	Relation to Applicant	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.

RESIDENT & DRIVER INFORMATION	Date of Birth	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	Occupation	Enter text: The occupation of the driver.
RESIDENT & DRIVER INFORMATION	Date Lic	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	Stdt > 100	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	Good Stdt	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.
RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.
RESIDENT & DRIVER INFORMATION	Licensed State	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	Social Security #	Enter identifier: The tax identifier (social security number) of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	First Name	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	Middle Name	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	Last Name	Enter text: The driver's last name (surname).

RESIDENT & DRIVER INFORMATION	Sex	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	Mar Stat	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	Relation to Applicant	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.
RESIDENT & DRIVER INFORMATION	Date of Birth	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	Occupation	Enter text: The occupation of the driver.
RESIDENT & DRIVER INFORMATION	Date Lic	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	Stdt > 100	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	Good Stdt	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.
RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.
RESIDENT & DRIVER INFORMATION	Licensed State	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	Social Security #	Enter identifier: The tax identifier (social security number) of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.

RESIDENT & DRIVER INFORMATION	First Name	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	Middle Name	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	Last Name	Enter text: The driver's last name (surname).
RESIDENT & DRIVER INFORMATION	Sex	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	Mar Stat	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	Relation to Applicant	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.
RESIDENT & DRIVER INFORMATION	Date of Birth	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	Occupation	Enter text: The occupation of the driver.
RESIDENT & DRIVER INFORMATION	Date Lic	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	Stdt > 100	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	Good Stdt	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.
RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.

RESIDENT & DRIVER INFORMATION	**Licensed State**	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	**Social Security #**	Enter identifier: The tax identifier (social security number) of the driver.
RESIDENT & DRIVER INFORMATION	**Number (#)**	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	**First Name**	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	**Middle Name**	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	**Last Name**	Enter text: The driver's last name (surname).
RESIDENT & DRIVER INFORMATION	**Sex**	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	**Mar Stat**	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	**Relation to Applicant**	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.
RESIDENT & DRIVER INFORMATION	**Date of Birth**	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	**Number (#)**	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	**Occupation**	Enter text: The occupation of the driver.
RESIDENT & DRIVER INFORMATION	**Date Lic**	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	**Stdt > 100**	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	**Good Stdt**	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.

RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.
RESIDENT & DRIVER INFORMATION	Licensed State	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	Social Security #	Enter identifier: The tax identifier (social security number) of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	First Name	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	Middle Name	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	Last Name	Enter text: The driver's last name (surname).
RESIDENT & DRIVER INFORMATION	Sex	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	Mar Stat	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	Relation to Applicant	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.
RESIDENT & DRIVER INFORMATION	Date of Birth	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	Occupation	Enter text: The occupation of the driver.

RESIDENT & DRIVER INFORMATION	Date Lic	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	Stdt > 100	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	Good Stdt	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.
RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.
RESIDENT & DRIVER INFORMATION	Licensed State	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	Social Security #	Enter identifier: The tax identifier (social security number) of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	First Name	Enter text: The driver's first name (given name).
RESIDENT & DRIVER INFORMATION	Middle Name	Enter text: The driver's middle name or initial (other given name).
RESIDENT & DRIVER INFORMATION	Last Name	Enter text: The driver's last name (surname).
RESIDENT & DRIVER INFORMATION	Sex	Enter code: The gender of the driver.
RESIDENT & DRIVER INFORMATION	Mar Stat	Enter code: The marital status of the driver. Examples are: S - Single; M - Married; D - Divorced; P - Separated; W - Widowed, C - Domestic Partner (unmarried), V - Civil Union/Registered Domestic Partner, F- Fiancé/Fiancée, U - Unknown, O - Other
RESIDENT & DRIVER INFORMATION	Relation to Applicant	Enter code: The relationship of the driver to the named insured. Examples are: I - Insured; S - Spouse; C - Child; SIB - Brother or Sister; P - Parent; E - Employee.

RESIDENT & DRIVER INFORMATION	Date of Birth	Enter date: The birth date of the driver.
RESIDENT & DRIVER INFORMATION	Number (#)	Enter number: The number assigned to the driver by the producer.
RESIDENT & DRIVER INFORMATION	Occupation	Enter text: The occupation of the driver.
RESIDENT & DRIVER INFORMATION	Date Lic	Enter date: The original date on which a driver's license was issued to this driver.
RESIDENT & DRIVER INFORMATION	Stdt > 100	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver resides at a school over 100 road miles from the principal place of garaging. In the Remarks section, show name of institution and address.
RESIDENT & DRIVER INFORMATION	Good Stdt	Enter Y for a "Yes" response. Input N for "No" response. Indicate if the driver qualifies for a good student credit (verify that company offers this credit). Complete and attach a Good Student Certificate (ACORD 91) for each operator who qualifies.
RESIDENT & DRIVER INFORMATION	Drv Train	Enter Y for a "Yes" response. Input N for "No" response. Indicate if driver training credit applies to the driver, if required by the company. Refer to the company's manual to verify if a credit or surcharge should be applied. Attach a Driver Training Certificate (ACORD 91) if the operator is under age 21 and has successfully completed this training and qualifies for the credit.
RESIDENT & DRIVER INFORMATION	Acc Prev Cse Date	Enter date: The date on which the driver successfully completed an approved accident prevention or defensive driver course. Attach a Course Completion Certificate if the driver qualifies.
RESIDENT & DRIVER INFORMATION	Drivers License #	Enter identifier: The driver's license number.
RESIDENT & DRIVER INFORMATION	Licensed State	Enter code: The state in which the driver is licensed.
RESIDENT & DRIVER INFORMATION	Social Security #	Enter identifier: The tax identifier (social security number) of the driver.
ACCIDENTS / CONVICTIONS	Within Last_Years?	Enter number: The number of years associated with "… an accident... or convicted of a moving violation" question.
ACCIDENTS / CONVICTIONS	Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if any driver has had an accident or been convicted of a moving violation in the mandated number of years.
ACCIDENTS / CONVICTIONS	Drv #	Enter number: The producer's driver number for the driver involved in the accident or conviction.
ACCIDENTS / CONVICTIONS	Date of Accident / Conviction	Enter date: The date of the accident or conviction.

ACCIDENTS / CONVICTIONS	Description of Accident or Conviction	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is needed.
ACCIDENTS / CONVICTIONS	Place of Accident / Conviction	Enter text: The place of the accident or conviction.
ACCIDENTS / CONVICTIONS	BI or Death Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
ACCIDENTS / CONVICTIONS	Amount of Property Damage	Enter amount: The amount of property damage resulting from the accident or conviction.
ACCIDENTS / CONVICTIONS	Drv #	Enter number: The producer's driver number for the driver involved in the accident or conviction.
ACCIDENTS / CONVICTIONS	Date of Accident / Conviction	Enter date: The date of the accident or conviction.
ACCIDENTS / CONVICTIONS	Description of Accident or Conviction	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is needed.
ACCIDENTS / CONVICTIONS	Place of Accident / Conviction	Enter text: The place of the accident or conviction.
ACCIDENTS / CONVICTIONS	BI or Death Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
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ACCIDENTS / CONVICTIONS	Place of Accident / Conviction	Enter text: The place of the accident or conviction.
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ACCIDENTS / CONVICTIONS	Date of Accident / Conviction	Enter date: The date of the accident or conviction.
ACCIDENTS / CONVICTIONS	Description of Accident or Conviction	Enter text: The description of the accident or conviction. ACORD 101, Additional Remarks Schedule, may be attached if more space is needed.
ACCIDENTS / CONVICTIONS	Place of Accident / Conviction	Enter text: The place of the accident or conviction.
ACCIDENTS / CONVICTIONS	BI or Death Y / N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the accident or conviction resulted in bodily injury or death.
ACCIDENTS / CONVICTIONS	Amount of Property Damage	Enter amount: The amount of property damage resulting from the accident or conviction.
GENERAL INFORMATION	1. With the exception of any encumbrances, are any vehicles for which insurance is requested not solely owned by and registered to the applicant?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "With the exception of any encumbrances, are any vehicles, for which insurance is requested not solely owned by and registered to the applicant?".
GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Name of Other Owner	Enter text: The additional interest's full name. As used here, this is the name of the other owner of the vehicle.
GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Name of Other Owner	Enter text: The additional interest's full name. As used here, this is the name of the other owner of the vehicle.
GENERAL INFORMATION	2. Any car modified / special equipment?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any vehicles customized, altered or with special equipment?".
GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Description	Enter text: The description of modified or special equipment on the vehicle.
GENERAL INFORMATION	Cost	Enter amount: The cost of the modified or special equipment on the vehicle.

GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Description	Enter text: The description of modified or special equipment on the vehicle.
GENERAL INFORMATION	Cost	Enter amount: The cost of the modified or special equipment on the vehicle.
GENERAL INFORMATION	3. Any existing damage?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any existing damage to vehicle? (Include damaged glass)".
GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Description	Enter text: The description of existing damage on the vehicle.
GENERAL INFORMATION	Veh #	Enter number: The producer assigned vehicle number.
GENERAL INFORMATION	Description	Enter text: The description of existing damage on the vehicle.
GENERAL INFORMATION	4. Any other losses not shown in the Accidents / Convictions section that were incurred during the time period specified in that section?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any losses not shown in the Accidents / Convictions section that were incurred during the time period specified in that section?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Description	Enter text: The description of any other losses incurred.
GENERAL INFORMATION	Cost	Enter amount: The cost of any other losses incurred.
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Description	Enter text: The description of any other losses incurred.
GENERAL INFORMATION	Cost	Enter amount: The cost of any other losses incurred.
GENERAL INFORMATION	5. Any other automobile insurance?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any other auto insurance in household? (Include any provided by employer)".
GENERAL INFORMATION	Name Insured	Enter text: The named insured on other insurance.
GENERAL INFORMATION	Year	Enter year: The model year of the vehicle. As used here, this is a vehicle covered by other insurance.
GENERAL INFORMATION	Make	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy). As used here, this is a vehicle covered by other insurance.
GENERAL INFORMATION	Model	Enter text: The manufacturer's model name for the vehicle. As used here, this is a vehicle covered by other insurance.
GENERAL INFORMATION	Carrier	Enter text: The insurer name on any other applicable insurance.

GENERAL INFORMATION	NAIC #	Enter code: The NAIC code of the insurance company that issued the policy.
GENERAL INFORMATION	Policy #	Enter identifier: The policy number on any other applicable insurance.
GENERAL INFORMATION	6. Any household member in military service?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any household member in military service?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Branch	Enter text: The branch of military service.
GENERAL INFORMATION	Rank	Enter text: The driver's rank in the military.
GENERAL INFORMATION	Base Location - Street	Enter text: The military base's first address line.
GENERAL INFORMATION	Base Location - City	Enter text: The city of the military base.
GENERAL INFORMATION	Base Location - State	Enter code: The state or province code of the military base.
GENERAL INFORMATION	Base Location - Zip	Enter code: The postal code of the military base.
GENERAL INFORMATION	Base Location - Country	Enter code: The country code of the military base.
GENERAL INFORMATION	Veh at Base Y/N	Enter Y for a "Yes" response. Input N for "No" response. Indicates if the driver has a vehicle at a military base.
GENERAL INFORMATION	7. Any license suspended / revoked?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any drivers license been suspended/revoked?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Suspension Period Start Date	Enter date: The date the driver's license suspension became effective.
GENERAL INFORMATION	Suspension Period End Date	Enter date: The date the driver's license suspension is scheduled to end.
GENERAL INFORMATION	Explanation	Enter text: The reason the driver's license was suspended or revoked.
GENERAL INFORMATION	Reinstatement Date	Enter date: The date a suspended or revoked driver's license was reinstated.
GENERAL INFORMATION	8. Any driver have a physical impairment that would affect the ability to drive?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any driver have a physical impairment that would affect the ability to drive?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Description of Special Equipment in Vehicle	Enter text: The description of any special equipment.

GENERAL INFORMATION	9. Any driver undergoing a course of medical treatment for a physical or mental impairment that would affect the ability to drive?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Any driver undergoing a course of medical treatment for a physical or mental impairment that would affect the ability to drive?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Explanation	Enter text: The description of any medication or treatments for a driver with physical or mental impairments.
GENERAL INFORMATION	10. Any financial responsibility filing?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any financial responsibility filing?".
GENERAL INFORMATION	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION	Reason for Filing	Enter text: The description of why a financial responsibility filing is required.
GENERAL INFORMATION	Filing Date	Enter date: The date on which the financial responsibility filing was originally required.

Form Page 3

Section Name	Field Name	Description
IDENTIFICATION SECTION	Agency Customer ID	Enter identifier: The customer's identification number assigned by the producer (e.g., agency or brokerage).
GENERAL INFORMATION (continued)	11. Any coverage declined, cancelled or non-renewed during the last three (3) years?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Any policy or coverage declined, cancelled or non-renewed during the mandated number of years?".
GENERAL INFORMATION (continued)	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION (continued)	Reason declined, cancelled, or non-renewed	Enter text: The description of the reason for coverage being declined, cancelled or non-renewed within the last mandated number of years.
GENERAL INFORMATION (continued)	12. Is this brokered business to the agent?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Is this brokered business to the agent?".
GENERAL INFORMATION (continued)	Remarks	Enter text: An explanation of brokered business to the agent.
GENERAL INFORMATION (continued)	13. Has agent inspected vehicle?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question "Has agent inspected vehicle?".
GENERAL INFORMATION (continued)	Remarks	Enter text: An explanation indicating if agent has inspected vehicle.

GENERAL INFORMATION (continued)	14. Has any named insured driven without liability insurance during any part of the last six (6) months?	Enter Y for a "Yes" response. Input N for "No" response. Indicates the response to the question, "Has any named insured driven without liability insurance during any part of the last six (6) months?".
GENERAL INFORMATION (continued)	Drv #	Enter number: The number assigned to the driver by the producer.
GENERAL INFORMATION (continued)	Explanation	Enter text: The explanation of why the driver has driven without liability insurance during any part of the last six (6) months.
REMARKS / ATTACHMENTS	Young Driver Questionnaire	Check the box (if applicable): Indicates if an attachment will follow containing a young driver questionnaire.
REMARKS / ATTACHMENTS	Driver Training Certificate	Check the box (if applicable): Indicates if an attachment will follow containing a driver training certificate.
REMARKS / ATTACHMENTS	Good Student Certificate	Check the box (if applicable): Indicates if an attachment will follow containing a good student certificate.
REMARKS / ATTACHMENTS	Anti-Theft Device Certificate	Check the box (if applicable): Indicates if an attachment will follow containing an anti-theft device certificate.
REMARKS / ATTACHMENTS	Medical Statement	Check the box (if applicable): Indicates if an attachment will follow containing a medical statement.
REMARKS / ATTACHMENTS	Motor Vehicle Report	Check the box (if applicable): Indicates if an attachment will follow containing a motor vehicle report.
REMARKS / ATTACHMENTS	Photograph	Check the box (if applicable): Indicates if an attachment will follow containing a photograph.
REMARKS / ATTACHMENTS	Bill of Sale	Check the box (if applicable): Indicates if an attachment will follow containing a bill of sale.
REMARKS / ATTACHMENTS	Other	Check the box (if applicable): Indicates there are attachments other than those listed.
REMARKS / ATTACHMENTS	Other Description	Enter text: The description of the attachment.
REMARKS / ATTACHMENTS	Other	Check the box (if applicable): Indicates there are attachments other than those listed.
REMARKS / ATTACHMENTS	Other Description	Enter text: The description of the attachment.
REMARKS / ATTACHMENTS	Other	Check the box (if applicable): Indicates there are attachments other than those listed.
REMARKS / ATTACHMENTS	Other Description	Enter text: The description of the attachment.
REMARKS / ATTACHMENTS	Other	Check the box (if applicable): Indicates there are attachments other than those listed.
REMARKS / ATTACHMENTS	Other Description	Enter text: The description of the attachment.
REMARKS / ATTACHMENTS	Remarks	Enter text: The personal vehicle line of business remarks.

BINDER / SIGNATURE	**Effective Date**	Enter date: The date on which the terms and conditions of the binder commenced. This date normally coincides with the effective date of the policy or of an endorsement to the policy.
BINDER / SIGNATURE	**Time**	Enter time: The time of the binder effective date that the binder becomes effective.
BINDER / SIGNATURE	**Expiration Date**	Enter date: The date on which the terms and conditions of the policy will or have expired. Certain state laws limit the terms of a binder, so this date may not coincide with the policy expiration date.
BINDER / SIGNATURE	**12:01**	Check the box (if applicable): Indicates the binder expires at 12:01 AM on the expiration date.
BINDER / SIGNATURE	**Noon**	Check the box (if applicable): Indicates the binder expires at 12:00 noon on the expiration date.
BINDER / SIGNATURE	**Coverage Not Bound**	Check the box (if applicable): Indicates the coverage has not been bound.
SIGNATURE	**Producer's Statement**	Enter text: The length of time the named insured has been known by the producer.
SIGNATURE	**Additional P.I.P Rejection**	Initial here: The named insured's initials. As used here, indicates the named insured has been offered additional personal injury coverage and has rejected it.
SIGNATURE	**Applicant's Signature**	Sign here: Accommodates the signature of the applicant or named insured.
SIGNATURE	**Date**	Enter date: The date the form was signed by the named insured.
SIGNATURE	**Producer's Signature**	Sign here: Accommodates the signature of the authorized representative (e.g., producer, agent, broker, etc.) of the company(ies) listed on the document. This is required in most states.
SIGNATURE	**National Producer Number**	Enter identifier: The National Producer Number (NPN) as defined in the National Insurance Producer Registry (NIPR). Note: The NPN is not the same as the producer state license number.