

Section Name	Field Name	Field and/or Section Description
<b>TITLE</b> <b>ACORD 50 OK (2009/08)</b>	<b>Oklahoma Owners Security Verification Form</b>	<p>The title of the form. ACORD 50 OK, Oklahoma Owners Security Verification Form, was created in response to Oklahoma regulations. The main differences between the generic ACORD Automobile Insurance Card, ACORD 50, and the Oklahoma card are:</p> <ul style="list-style-type: none"> <li>* The company name and address is required</li> <li>* The address of the insured cannot be shown on the card</li> <li>* The front of the card includes a series of letters of the alphabet that correspond to pre-printed coverages shown on the back of the card</li> <li>* The appropriate letters must be checked or circled to indicate actual coverage in the policy</li> <li>* Excluded drivers should be listed on the front of the card</li> <li>* The front of the OWNERS FORM states that a liability insurance policy has been issued pursuant to the compulsory insurance law of Oklahoma, and that a copy this form must be kept in the vehicle at all times. It also states that a copy of this form must be submitted with an application for registration.</li> </ul>
<b>TITLE</b>		<ul style="list-style-type: none"> <li>* The back of the OWNERS FORM contains a statement describing Oklahoma state law which requires that a copy of this form be produced upon request by a peace officer, or representative of the Department of Public Safety or, in the case of a collision, other persons affected by the collision</li> <li>* The back of the card also states that a current copy of this form must be surrendered to the motor vehicle license agent or other registering agency upon application or renewal for a motor vehicle license plate</li> <li>* Card must be issued in duplicate</li> </ul>
<b>IDENTIFICATION SECTION</b>	<b>Check box - Commercial One</b>	Check the box (if applicable): Indicates the policy is a commercial lines policy.
<b>IDENTIFICATION SECTION</b>	<b>Check box - Personal One</b>	Check the box (if applicable): Indicates the policy is a personal lines policy.

Section Name	Field Name	Field and/or Section Description
INSURANCE IDENTIFICATION CARD	Company NAIC Number One	Enter code: The identification code assigned to the insurer by the NAIC.
INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD		Enter text: The first line of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter text: The city of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter code: The state or province of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter code: The postal code of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD	Policy Number One	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.
INSURANCE IDENTIFICATION CARD	Effective Date One	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
INSURANCE IDENTIFICATION CARD	Expiration Date One	Enter date: The date on which the terms and conditions of the policy will expire.
INSURANCE IDENTIFICATION CARD	Year One	Enter year: The model year of the vehicle.
IDENTIFICATION SECTION	Make One	Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy).
IDENTIFICATION SECTION	Model One	Enter text: The manufacturer's model name for the vehicle.
INSURANCE IDENTIFICATION CARD	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Agency/Company Issuing Card One	Enter text: The full name of the producer/agency.
INSURANCE IDENTIFICATION CARD		Enter text: The mailing address line one of the producer/agency.
INSURANCE IDENTIFICATION CARD		Enter text: The mailing address line two of the producer/agency.
INSURANCE IDENTIFICATION CARD		Enter text: The mailing address city name of the producer/agency.

Section Name	Field Name	Field and/or Section Description
INSURANCE IDENTIFICATION CARD		Enter code: The mailing address state or province code of the producer/agency.
INSURANCE IDENTIFICATION CARD		Enter code: The mailing address postal code of the producer/agency.
INSURANCE IDENTIFICATION CARD		Enter number: The producer's contact person's phone number. If applicable, include the area code and extension.
INSURANCE IDENTIFICATION CARD	Insured One	Enter text: The named insured(s) as it/they will appear on the policy declarations page.
INSURANCE IDENTIFICATION CARD	Coverages A One	Check the box (if applicable): Indicates the vehicle has liability (bodily injury/property damage) coverage.
INSURANCE IDENTIFICATION CARD	Coverages C One	Check the box (if applicable): Indicates the vehicle has medical payments coverage.
INSURANCE IDENTIFICATION CARD	Coverages D One	Check the box (if applicable): Indicates the vehicle has comprehensive coverage.
INSURANCE IDENTIFICATION CARD	Coverages G One	Check the box (if applicable): Indicates the vehicle has collision coverage.
INSURANCE IDENTIFICATION CARD	Coverages L One	Check the box (if applicable): Indicates the vehicle has loss to your recreational vehicle coverage.
INSURANCE IDENTIFICATION CARD	Coverages N One	Check the box (if applicable): Indicates the vehicle has emergency road service coverage.
INSURANCE IDENTIFICATION CARD	Coverages R One	Check the box (if applicable): Indicates the vehicle has rental reimbursement coverage.
INSURANCE IDENTIFICATION CARD	Coverages R1 One	Check the box (if applicable): Indicates the vehicle has rental reimbursement and travel expense coverage.
INSURANCE IDENTIFICATION CARD	Coverages U One	Check the box (if applicable): Indicates the vehicle has uninsured motorists coverage.
INSURANCE IDENTIFICATION CARD	Coverages S One	Check the box (if applicable): Indicates the vehicle has death and dismemberment coverage.
INSURANCE IDENTIFICATION CARD	Coverages T One	Check the box (if applicable): Indicates the vehicle has disability coverage.
INSURANCE IDENTIFICATION CARD	Coverages Z One	Check the box (if applicable): Indicates the vehicle has loss of earnings coverage.
INSURANCE IDENTIFICATION CARD	Excluded Drivers One	Enter text: The driver's first name (given name). As used here, this is an excluded driver.
INSURANCE IDENTIFICATION CARD		Enter text: The driver's middle name or initial (other given name). As used here, this is an excluded driver.

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INSURANCE IDENTIFICATION CARD		Enter text: The driver's last name (surname). As used here, this is an excluded driver.
INSURANCE IDENTIFICATION CARD		Enter text: The driver's first name (given name). As used here, this is an excluded driver.
INSURANCE IDENTIFICATION CARD		Enter text: The driver's middle name or initial (other given name). As used here, this is an excluded driver.
INSURANCE IDENTIFICATION CARD		Enter text: The driver's last name (surname). As used here, this is an excluded driver.
IDENTIFICATION SECTION	Check box - Commercial Two	Check the box (if applicable): Indicates the policy is a commercial lines policy.
IDENTIFICATION SECTION	Check box - Personal Two	Check the box (if applicable): Indicates the policy is a personal lines policy.
INSURANCE IDENTIFICATION CARD	Company NAIC Number Two	Enter code: The identification code assigned to the insurer by the NAIC.
INSURANCE IDENTIFICATION CARD	Company Two	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.
INSURANCE IDENTIFICATION CARD		Enter text: The first line of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter text: The city of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter code: The state or province of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD		Enter code: The postal code of the insurer's mailing address.
INSURANCE IDENTIFICATION CARD	Policy Number Two	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.
INSURANCE IDENTIFICATION CARD	Effective Date Two	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence.
INSURANCE IDENTIFICATION CARD	Expiration Date Two	Enter date: The date on which the terms and conditions of the policy will expire.
INSURANCE IDENTIFICATION CARD	Year Two	Enter year: The model year of the vehicle.
IDENTIFICATION SECTION	Make Two	Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy).

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<b>IDENTIFICATION SECTION</b>	<b>Model Two</b>	Enter text: The manufacturer's model name for the vehicle.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Vehicle Identification Number Two</b>	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Agency/Company Issuing Card Two</b>	Enter text: The full name of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The mailing address line one of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The mailing address line two of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The mailing address city name of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The mailing address state or province code of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The mailing address postal code of the producer/agency.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter number: The producer's contact person's phone number. If applicable, include the area code and extension.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Insured Two</b>	Enter text: The named insured(s) as it/they will appear on the policy declarations page.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages A Two</b>	Check the box (if applicable): Indicates the vehicle has liability (bodily injury/property damage) coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages C Two</b>	Check the box (if applicable): Indicates the vehicle has medical payments coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages D Two</b>	Check the box (if applicable): Indicates the vehicle has comprehensive coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages G Two</b>	Check the box (if applicable): Indicates the vehicle has collision coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages L Two</b>	Check the box (if applicable): Indicates the vehicle has loss to your recreational vehicle coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages N Two</b>	Check the box (if applicable): Indicates the vehicle has emergency road service coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages R Two</b>	Check the box (if applicable): Indicates the vehicle has rental reimbursement coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages R1 Two</b>	Check the box (if applicable): Indicates the vehicle has rental reimbursement and travel expense coverage.

<b>Section Name</b>	<b>Field Name</b>	<b>Field and/or Section Description</b>
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages U Two</b>	Check the box (if applicable): Indicates the vehicle has uninsured motorists coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages S Two</b>	Check the box (if applicable): Indicates the vehicle has death and dismemberment coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages T Two</b>	Check the box (if applicable): Indicates the vehicle has disability coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Coverages Z Two</b>	Check the box (if applicable): Indicates the vehicle has loss of earnings coverage.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Excluded Drivers Two</b>	Enter text: The driver's first name (given name). As used here, this is an excluded driver.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's middle name or initial (other given name). As used here, this is an excluded driver.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's last name (surname). As used here, this is an excluded driver.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's first name (given name). As used here, this is an excluded driver.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's middle name or initial (other given name). As used here, this is an excluded driver.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's last name (surname). As used here, this is an excluded driver.
<b>Edition</b>	<b>Date</b>	The edition identifier of the form including the form number and edition (the date is typically formatted YYYY/MM).