

Section Name	Field Name	Field and/or Section Description
TITLE ACORD 65 FL (2007/08)	Florida Residential Property Supplement	<p>ACORD 65 FL, Florida Residential Property Supplement, complies with Florida law, which requires that every applicant applying for a homeowners, mobile home or condominium unit policy, must be given the option to exclude windstorm coverage. Their selection must be written in their own handwriting and signed by them and every other named insured on the policy.</p> <p>The form also provides instructions for "other than individuals" (e.g., corporations), to exclude windstorm coverage.</p> <p>The application also provides the option for applicants applying for a homeowners or mobile home policy to exclude coverage for the contents of the structure. Their selection must be written in their own handwriting and signed by them and every other named insured on the policy.</p>
IDENTIFICATION SECTION	Agency Customer ID	Customer's identification number assigned by the agency or brokerage.
IDENTIFICATION SECTION	Date	Month/day/year (MM/DD/YYYY) on which the form is completed.
IDENTIFICATION SECTION	Agency	Producer's name.
IDENTIFICATION SECTION	Applicant (First Name Insured)	Full name of the applicant as it should appear on the policy. The First Named Insured is given certain rights and responsibilities by the policy contract language. If more than one insured is named, be sure the one intended to receive these rights and responsibilities is named first and any additional insureds identified as such. If joint ownership, the name used may include both names (e.g., John and Mary Smith).
IDENTIFICATION SECTION	Policy Number	The number assigned by the insurance company for the policy. In general, policy numbers will not appear on new business applications since they are not known at that point in time.
IDENTIFICATION SECTION	Carrier	Name of the insurance company (or residual market plan) that will receive the application. Do not use group names, use the actual name of the company within the group in which you wish to have the policy issued.
IDENTIFICATION SECTION	NAIC Code	The identification code assigned to the company by the NAIC.
WINDSTORM EXCLUSION	I do not want the insurance on my home to pay for damage from windstorms	Applicant/Named Insured must write his/her selection in his own handwriting.

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WINDSTORM EXCLUSION	I do not want the insurance on my mobile home to pay for damage from windstorms	Applicant/Named Insured must write his/her selection in his own handwriting.
WINDSTORM EXCLUSION	I do not want the insurance on my condominium unit to pay for damage from windstorms	Applicant/Named Insured must write his/her selection in his own handwriting.
SIGNATURE	Applicant's Signature	Every Applicant/Named Insured must sign the application.
SIGNATURE	Date	Date the application was completed. (MM/DD/YYYY)
SIGNATURE	Effective Date	Enter the effective date of the windstorm exclusion.
IDENTIFICATION SECTION	Agency Customer ID	Customer's identification number assigned by the agency or brokerage.
CONTENTS EXCLUSION	I do not want the insurance on my home to pay for the costs to repair or replace any contents that are damaged.	Applicant/Named Insured must write his/her selection in his own handwriting.
CONTENTS EXCLUSION	I do not want the insurance on my mobile home to pay for the costs to repair or replace any contents that are damaged.	Applicant/Named Insured must write his/her selection in his own handwriting.
SIGNATURE	Applicant's Signature	Every Applicant/Named Insured must sign the application.
SIGNATURE	Date	Date the application was completed. (MM/DD/YYYY)
SIGNATURE	Effective Date	Enter the effective date of the exclusion of coverage for contents.