

**Louisiana Department of
Public Safety & Corrections
Office of Motor Vehicles**

Section VII Policies and Procedures

Effective Date: August 20, 2015

**Specifications for Notification of Initiation,
Termination or Modification of
Liability Security**

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I. INTRODUCTION

- A. Effective July 1, 1998, security providers shall report to the Department of Public Safety and Corrections, Office of Motor Vehicles, certain information, on a vehicle by vehicle basis, with certain exceptions, in accordance with the Compulsory Motor Vehicle Liability Security Law (R.S. 32:861 et. seq.) “the Compulsory Security Law” and with these Rules and Regulations regarding the initiation of liability coverage as well as the termination, withdrawal, cancellation, lapsing or otherwise rendering ineffective of liability coverage.
- B. As required by law and these Rules and Regulations, reports must be made to the Department whenever liability security on a vehicle is issued, procured, recalled, reinstated, terminated, canceled or changed from binder status to an active policy number.
- C. Such information must be transmitted to the Department in an efficient and timely manner in accordance with these Rules and Regulations.
- D. Insurance companies shall not provide information to the Department except as required by law or these Rules and Regulations. Examples of information which will **not** be submitted to the Department include, but are not limited to, the following:
 - 1. Information on non-liability coverage such as collision and comprehensive policies
 - 2. Information of liability policies not in compliance with the Compulsory Security Law (such as umbrella policies with excess coverage and non-ownership policies)
 - 3. Addition or deletion of other drivers
 - 4. Change of policy number
 - 5. Invalid type use or class
- E. The purpose of the information required is to enforce the Motor Vehicle Safety Responsibility Law (R.S. 32:851 et. seq.) and particularly the Compulsory Security Law (R.S. 32:861 et. seq.). Consistently with this purpose, the information maintained by the Department will be provided to a person making proper written request under R.S. 32:863.2.C and R.S. 32:871, **ONLY** after an accident is reported in accordance with R.S. 32:871. Information will be provided on a single individual or vehicle basis only. In order to preserve the proprietary information of insurance companies, insurance coverage information compiled by company or by zip code, for example, will not be made available to inquirers, nor will the Department develop or maintain any composite list by insurance company or insurance company identifier except by count of disposition codes. The Department will cooperate fully with the insurance industry in preserving the security of customer lists and related data. The Department will initiate

criminal prosecution for violations arising out of the wrongful taking or use of information reported under these Rules and Regulations.

- F. The intent of these Rules and Regulations is to provide a mechanism whereby the liability security coverage for each vehicle subject to the Compulsory Security Law is identified, with the least necessary intrusion into the proprietary interests of liability security providers. To that end the Department, responding to the expressed concerns of the insurance industry, has attempted to eliminate unnecessary redundancy in the data required to be reported. To the extent that any adjustments are required in the scope of reportable information, the Department solicits the continuing active cooperation of the insurance industry in maintaining the effective operation of the Compulsory Security Law.
- G. These Rules and Regulations permit adjustments to technical specifications. Security Providers will be advised by mail (postal, electronic or both) of any changes in the technical specifications of this Section. The Department will always attempt to give ninety (90) days notice of these adjustments so that the Security Provider may have enough time to implement the changes, however, legislative changes or other circumstances may result in notice of less than ninety (90) days. Such mailings may be called "Advisory Bulletins" or "Memorandums" from the Commissioner of the Office of Motor Vehicles. These bulletins or memorandums may also contain clarifications, helpful hints and such additional information as may be deemed applicable to compliance with the Compulsory Security Law. Moreover, in the event that an unusual situation is not covered by these regulations, a reasonable procedure consistent with the Compulsory Security Law will be followed.
- H. In cases where, after written notice, a Security Provider continually fails to supply the information required by R.S. 32:863.2 and these Rules and Regulations, fees as provided by that statute may be imposed. A Security Provider will not be charged a fee for providing data based on a reasonable assumption, such as assuming in good faith that the owner's driver's license number is the same as the named insured's driver's license number. Special consideration shall be given to unusual problems in compliance, provided in writing.
- I. A Security Provider must notify the Department when motor vehicle liability security is issued or procured or after motor vehicle liability security is recalled, reinstated, terminated, canceled or changed from binder status to an active policy number. For initiations and terminations such notification shall be made within fifteen (15) business days of the issue date. Notification shall be made in the form required by the Department as set forth in these Rules and Regulations. A separate notice shall be submitted for each vehicle. Failure to properly notify the Department may result in administrative fees.

J. Procedural questions concerning this regulation should be referred to ([email is the preferred method of communication](#)):

1. Mailing Address:

Louisiana Department of Public Safety and Corrections
Office of Motor Vehicles
Post Office Box 64886
Baton Rouge, Louisiana 70896
Attention: Compulsory Insurance Unit

2. Phone Number: (225) 925-7285 or (225) 925-3731

3. Email: **Insurance@dps.la.gov**

4. Fax Number: (225) 922-0158

K. Technical questions concerning this regulation should be referred to ([email is the preferred method of communication](#)):

1. Mailing Address:

Louisiana Department of Public Safety and Corrections
Data Processing Center
8001 Independence Boulevard
Baton Rouge, Louisiana 70806
Attention: DMB Project Leader

2. Phone Number : (225) 922-2260

3. Email: **Insurance@dps.la.gov**

4. Fax Number: (225) 925-4019

II. DEFINITIONS

Account number/user-id: The unique identifier assigned to each servicing agent. If the electronic filing method is via the internet, this code is assigned by GXS to identify the mailbox for the reporting entity and is also used by GXS for billing. If

the electronic filing method is via the Louisiana Secure Server, the account number and user-id will be assigned by the Department.

Business Days:

Business days are Monday through Friday, between 8:00 a.m. and 4:30 p.m. central time. Business days do not include Saturday, Sunday, state holidays or any other holiday declared by the Governor.

Change in Coverage:

A change in coverage shall be considered either an initiation of coverage or a termination of coverage based on the nature of the change. **The addition of a vehicle to a liability security policy shall be considered an initiation of coverage.** The effective date of the initiation shall be the date the vehicle was added to the policy, regardless of the date the original policy was issued. The deletion of a vehicle from a liability security policy shall be considered a termination of coverage. The replacement of a covered vehicle with another vehicle in a liability security policy shall be considered both a termination of coverage for the replaced vehicle and an initiation of coverage for the replacement vehicle. If the registered owner of a vehicle changes, the previous owner's coverage shall be terminated and the new registered owner's initiation of coverage shall be reported. If the principal driver changes, but the registered owner stays the same, no change in coverage shall be reported. **Renewals, without a lapse in coverage, shall not be reported. Renewals in which only the policy number changes shall not be reported.** Changes in coverage not related to the vehicle liability security being issued, procured, recalled, reinstated, terminated, canceled or changed from binder status to an active policy number shall not be reported.

Department:

Department of Public Safety and Corrections.

Duplicate Record:

Any record reported with the same information (**INS-COMP-CODE, VIN, TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE and TRANSACTION-TYPE**) as a record already in the Department's insurance system is a DUPLICATE RECORD and will be rejected. (Disposition code "D").

Edit Error:

A record submitted by an insurance company or servicing agent unacceptable for filing purposes due to the absence of information in a required field or the presence of invalid information in the key data fields is an EDIT ERROR. Key data fields are identified and detailed in the technical filing specifications. Any record which is returned to an insurance company or servicing agent as an EDIT ERROR is not a filing.

The record shall be corrected and re-reported within fifteen (15) business days of the RETURN-DATE. (Disposition code "E").

Edit Error Mask:

The field within each type of record (Header, Individual Vehicle and Fleet) that is used to identify fields that failed to pass the edits. When the Disposition code is "E" the EDIT-ERROR-MASK field will identify which fields failed to pass the edits (1) and which fields are edit error free (0).

Fleet Policy:

A policy insuring a business with a fleet of five (5) or more vehicles registered in Louisiana for which VIN information is not maintained on each vehicle. If the insurance company maintains the VIN of each vehicle within the fleet, the filing **must** be reported on a vehicle by vehicle basis.

Hit:

A record submitted by an insurance or servicing agent which matches a Department's vehicle registration record and is an acceptable record. (Disposition code "H").

Incorrect Type-Use:

The reported vehicle is exempt from the Compulsory Motor Vehicle Liability Security Law because of the "type use" or "class" of vehicle. This record is not updated to the system. **Do not resubmit this record.** (Disposition code "I").

Initiation of Coverage:

The issuing or making of a liability security policy, liability bond, deposit or other security.

Insurance Company Code:

A unique number assigned to each insurance company. The **National Association of Insurance Commissioners Code** (NAIC code) or a temporary identification number assigned by the Department to an insurance company for the purpose of R.S. 32:863.2 of the Compulsory Motor Vehicle Liability Security Law will be used.

Lapse:

When a vehicle liability security policy is not in effect for one (1) or more days.

No-Hit:

A record submitted by an insurance company or servicing agent which does not match a Department vehicle registration record and which does not pass the VINA check. The filing must be corrected and resubmitted within fifteen (15) business days of the RETURN-DATE. (Disposition code "U").

- Non-Renewals:** A non-renewal of a motor vehicle liability insurance policy shall include: (a) a refusal by the insurer to issue a superseding policy or a renewal of such policy, (b) a request by the insured that a superseding policy not be issued or such policy not be renewed or (c) a failure of the insured to make the premium payment due upon a superseding policy or on a renewal of such policy offered by the insurer. Non-renewals are to be reported in the same manner as cancellations or terminations.
- Notification:** The furnishing of information by a security provider to the Department concerning liability security or lack of liability security on a motor vehicle, or a change or correction of data concerning the item of security, the vehicle or the lessee or owner, as required by R.S. 32:863.2 of the Motor Vehicle Liability Security Law and these Rules and Regulations.
- Out-of-Sequence Error:** The records submitted are not in chronological order. For example the cancellation is reported prior to the initiation. This record is unacceptable for filing purposes and is returned to the insurance company. **Records shall be reported in chronological order.** (Disposition code "S").
- Owner:** The name of the legal lessee or owner as obtained by the security provider from the Vehicle Registration Certificate.
- Owner ID Number:** Driver's license number for an individual, lessee or owner, the left most nine (9) characters of the driver's license number or federal tax identification number for the lessee or owner such as a corporation, an estate, etc. **This is always a required field.**
- Policy Number:** The number of the policy that the vehicle is insured under. The insurance company will maintain a list of policy numbers and effective dates for each vehicle or fleet reported.
- Prescribed:** The record submitted is over eighteen (18) months old. There is an eighteen (18) month difference between the TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE or ISSUE-DATE and the date this record was received by the Department. This record is not updated to the system. **Do not resubmit this record.** (Disposition code "P").
- Recall of Notification:** A record submitted to the Department by a security provider or servicing agent, which rescinds a record previously submitted to the Department in error. The recall record fields match the original record

fields except for the TRANSACTION-TYPE. A transaction type “B” will recall an initiation (“A”). A transaction type “1” will recall a termination (“0”).

Record: Insurance information pertaining to the items required by law and these Rules and Regulations for an individual vehicle or fleet coverage.

Return Filing Report: A report prepared by the Department for an insurance company or servicing agent following completion of processing (editing of data and record matching) containing the disposition of each record. **It is the responsibility of the insurance company or servicing agent to review this report and take the necessary corrective action as required by these Rules and Regulations.** If the return report contains only the header record, that record was submitted with incorrect or missing information. In this case, the header record must be corrected and **all** of the filing records must be resubmitted. **None** of the filing records submitted with an incomplete or incorrect header record will be accepted. Please note the Office of Motor Vehicles is not responsible for keeping a copy of this report.

Restricted Hit: A record submitted by an insurance company or servicing agent which does **not** match a Department vehicle registration record but which does pass the VINA edit check. These records do not need to be re-reported. (Disposition code “R”).

Return Date: The Department will provide a return date in its filing report. The return date will be the date the Department writes the filing report and will equal the date in the DATE-PROCESSED field of the trailer record.

Security Provider: A liability insurance company or other provider of liability security required under the Compulsory Motor Vehicle Liability Security Law (R.S. 32:861 et. seq.).

Service Agent: Any person or organization duly designated by an insurance company to prepare, transmit or deliver records on behalf of such insurance company.

Service Agent Code: A number assigned to each service agent. Either the National Association of Insurance Commissioners Code (NAIC code) or a temporary identification number assigned by the Department will be used.

**Termination/Cancellation
of Liability Security:**

Any cancellation or termination of liability security on a motor vehicle (whether caused by the insurer or insured).

Timely Filing:

Notification received within fifteen (15) business days from the issue date when a vehicle's liability security is issued, procured, recalled, reinstated, terminated, canceled or changed from binder status to an active policy number.

VINA:

Routine used to compute the VIN check digit for 1981 or newer vehicles.

III. GENERAL INFORMATION

A. CORRECTING NO-HITS

A “Hit” is based on the VIN number. When the VIN does not match with the Department’s vehicle registration records and fails the VINA check, the record is coded “No-Hit” (Disposition code “U”). In accordance with these Rules and Regulations, the security provider (insurance company) has fifteen (15) business days from the Return Date of the filing to correct the VIN information and resubmit. If a company provides a VIN for a 1981 or newer vehicle and the Department’s VINA check determines that the VIN is valid, but the VIN is not available from the Department’s vehicle registration records, the record is returned as a “Restricted Hit”. (Disposition code “R”).

B. REPORTING AN INITIATION OF COVERAGE AND CANCELLATION OF COVERAGE AT THE SAME TIME

The last record received from a company for a vehicle is considered to reflect the status of the vehicle with the company. Multiple filings for a single vehicle having the same company code and owner-ID will result in the last record received being maintained by the Department. Receiving records out of order remains a problem with many companies and may result in cancellation notices being sent to individuals who have insurance. **All records must be submitted in chronological order.**

C. RECALLING NOTIFICATION

When a Security Provider discovers that a cancellation or initiation of coverage was reported by mistake, the Security Provider shall submit to the Department a notice of recall of notification. All of the data except the transaction type shall be the same as originally submitted in order to match the recall with the notification. A transaction type “B” will recall an initiation (“A”). A transaction type “1” will recall a termination (“0”).

D. WARNING ON NOTICE OF ACKNOWLEDGMENT OF TERMINATION TO INSURED

The Notice of Acknowledgment of Termination sent to an insured shall contain the following warning notice:

If you do not keep your liability insurance in force during the entire registration period, your registering privileges will be subject to revocation. By law your insurance carrier is required to report specific termination information to the Commissioner of the Department of Public Safety and Corrections.

E. **TIMELY INSURANCE FILINGS**

In accordance with these Rules and Regulations, the Security Provider must notify the Department **when** motor vehicle security is begun, issued or procured or after motor vehicle security is ended, recalled, reinstated, terminated, canceled or changed from a binder status to an active policy number. Such notification must be made within fifteen (15) business days from the issue date. The Security Provider has fifteen (15) business days from receipt of the Department's returned filings to correct any "No-Hit" records and resubmit. Termination filings received prior to the effective date will result in an edit error (Disposition code "E"). An edit error is not an acceptable filing. Edit errors must be corrected and resubmitted. **It is the responsibility of the insurance company or servicing agent to review and take the necessary corrective action as required by these Rules and Regulations.** An initiation or termination filing will be considered late if the date received is more than fifteen (15) business days after the issue date. Any filings considered late will be returned with the LATE-FLAG set to "Y".

Possible Policy Scenarios:

If a policy lapses and is then later reinstated, with a lapse, submit a termination.

Whenever the policy is re-issued, send in the initiation with the new initiation date, not the date that the policy was initially issued.

1. If insurance coverage lapses and is reinstated without a lapse and a termination has been submitted, recall the termination. **Do not** send in a new initiation.
2. If insurance coverage lapses and is reinstated without a lapse and a termination was not submitted, no filings are required. Only valid terminations should be reported.
3. If the policy number changes or if the policy is renewed without any owner ID or vehicle or company (NAIC number) changes, then a filing is not required.

The Department will monitor this area of the reporting requirements. Those Security Providers who violate this provision will be subject to possible fee assessments.

F. **MANUAL FILINGS**

Effective January 1, 2005 the Department will no longer accept manual filings.

G. **FLEET FILINGS**

Guidelines for Fleet Filings

Eligibility Any insurance company writing motor vehicle liability insurance in Louisiana and insuring a fleet of five (5) or more vehicles registered in Louisiana for which VIN information is not maintained on each vehicle must electronically report said fleet coverage as specified in these Rules and Regulations. If the insurance company maintains the VIN number

of each vehicle within the fleet, the filing **must** be reported on a vehicle by vehicle basis.

**Conditions
of Filing**

A Security Provider must notify the Department after motor vehicle liability security is begun, ended or in certain ways modified. Such notification shall be made within fifteen (15) business days of the issue date of the initiation termination of coverage. After the initiation has been reported, the cancellation is not to be reported until the entire Fleet policy has been canceled. (Do not report the addition or deletion of individual vehicles.)

Format

Each notification must be transmitted electronically using the formats provided in these Rules and Regulations.

**Number
of Vehicles**

The estimated number of vehicles in a fleet is reported in lieu of VIN information on a vehicle by vehicle basis.

H. FEE ASSESSMENTS

The Louisiana Department of Public Safety and Corrections is charged with administering and enforcing all compulsory insurance provisions. In so doing, we must rely on the cooperation of the insurance industry to provide timely, complete and accurate information in accordance with R.S. 32:863.2 and these Rules and Regulations.

Failure to report the required information and/or failure to report the required information timely can result in the insurance company being assessed a fee. If any of acceptable filings (Disposition codes Hit and Restrict Hit) are considered late, a fee of \$50.00 may be assessed for each of these late filings. A fee of \$50.00 may be assessed for each failure to report.

This State's vehicle registration records will be checked against liability security insurance records on an ongoing basis. Fees will be assessed to those companies in non-compliance with the statute and these Rules and Regulations. Further, in cooperation with the Department of Insurance, continuous violations and non-compliance could result in additional administrative or judicial action.

Fees will not be assessed to those Security Providers who continue to report all insured vehicles, as well as reporting them in a timely manner.

I. TRANSACTION TYPES AND HOW THEY ARE USED

Described below are the transaction types and how each may be used.

0 – TERMINATION: A termination or cancellation notice is submitted whenever liability security is canceled or terminated.

1 – RECALL OF TERMINATION: The recall of transaction type “0” is used whenever a cancellation notice has previously been sent **in error**.

Example: A cancellation notice was incorrectly reported. The cancellation date was reported as February 2 instead of February 13. A recall of the February 2 cancellation notice is submitted followed by a cancellation notice having a cancel date of February 13.

6 – TERMINATION FOR NSF CHECK: A termination or cancellation notice pursuant to this code is submitted whenever a Security Provider backdates the effective date of a cancellation because the insurer paid with a check that was returned by the bank more than fifteen (15) days after the effective date of the policy.

7 – TERMINATION FOR RESCINDED/CANCELED SALE: A termination or cancellation notice is submitted whenever liability security is canceled or terminated as a result of a rescinded or canceled sale of the vehicle.

A – INITIATION: An initiation notice is submitted whenever liability security is initiated (new business) on a vehicle. If there is a lapse in coverage, a termination notice must be submitted followed by an initiation notice showing the new initiation or reinstated date.

B – RECALL OF INITIATION: The recall of transaction type “A” is used whenever an initiation notice is submitted **in error**.

Example: An initiation notice was incorrectly reported. The starting date was reported as February 2 instead of February 13. A recall of the February 2 initiation notice is submitted followed by an initiation notice having a starting date of February 13.

F – CHANGE: A change notice is submitted only for changing the policy number from “BINDER” to an active policy number.

Example: An initiation notice was submitted with a policy number of “BINDER”. A change notice is submitted with an active policy number.

J. **DISPOSITION CODES**

Described below are the disposition codes returned and how they are used.

D – DUPLICATE REPORTING: This record was previously reported to the Department with the same information. This record has been **rejected** by the Department. It is not necessary to re-report the same record again after it was successfully reported.

E – EDIT ERROR: This record is not acceptable due to the absence of information in a required field or invalid information in a field. This record has been **rejected** by the Department. The EDIT-ERROR-MASK field needs to be evaluated to determine the field(s) that requires amendment. After the field(s) have been corrected this record shall be re-reported.

H – HIT: This record has been **accepted** by the Department. This record's VIN matches a vehicle that requires compulsory liability security and is currently registered in Louisiana.

I – INCORRECT VEHICLE "TYPE USE" OR "CLASS": This record has been **rejected** by the Department. The "type use" or "class" of this vehicle record is such that it does not have to be reported to the Department. An example of this type of vehicle is a trailer.

P – PRESCRIBED: This record is not acceptable because the date in the TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE or ISSUE-DATE field is more than eighteen (18) months old. This record has been **rejected** by the department.

R – RESTRICTED HIT: This record has been **accepted** by the Department. The VIN of this record does not match a vehicle currently registered in Louisiana that requires compulsory insurance; however, the VIN reported passes the VINA edit routine. This record should be verified using the Vehicle Registration Certificate.

S – SEQUENCE ERROR: This record has been **rejected** by the Department. The record has been reported out of sequence. Examples are: reporting a transaction type "0" (termination) prior to having reported a transaction type "A" (initiation). **Records shall be reported in chronological order.**

U – NO-HIT: This record has been **rejected** by the Department. The VIN of this record does not match a vehicle currently registered in Louisiana. The VIN does not pass the VINA edit routine. The record should be verified using the Vehicle Registration Certificate.

K. **CONTACT PERSON INFORMATION**

Certain information is needed periodically by this agency to facilitate communication with Security Providers. The contact information sheet is to be completed and returned to the Department during the month of January each year **and** whenever there is a change involving contact personnel. A contact information sheet shall be submitted for **each** insurance company.

Please furnish the name of the representative responsible for compliance:

Administrative reporting requirements

Information Technology/Information Services/Data Processing

Commercial lines

Personal lines

Fleet filings

Other personnel responsible for filings or fee assessment

IV. REPORTING INSTRUCTIONS

The Louisiana Department of Public Safety and Corrections has two acceptable methods of exchanging electronic data for compulsory liability insurance reporting.

One method is to utilize GXS's "**Information Exchange**" service. The "**Information Exchange**" service will allow secure electronic data transfer between the Department and each insurance company. The "**Information Exchange**" service gives you the option of submitting multiple filings per day. A message class should be used when sending files via GXS to the test or production mailbox. The message class for uncompressed files is LAPS however the Department no longer accepts compressed files. The following outlines steps necessary to begin participating in this electronic transfer. Assistance in implementing the insurance company's part of this electronic relationship will be provided by the Marketing and Enabling Support function which can be reached at (877) 326-6426. The Department's mailbox (account-number/user-id) is: "**LAPS/LAPSS67**" for test; "**LAPS/LAPSS68**" for production. Please do not send more than 50,000 records at one time. For more records, split the file into smaller parts and send these individually. Each part must contain one header and one trailer.

A test filing **shall** be submitted for all new companies. Please ensure that the test files are sent to the test mailbox (**LAPS/LAPSS67**) and that all testing has been completed before sending a file to the production mailbox.

Network Connectivity/Mailbox

Security Providers that currently have connectivity to GXS, either through **Insurance Value Added Network Services ("IVANS"** phone number (800) 548-2675) or directly, must ensure that their network account is attached to the "**Information Exchange**" service. Marketing and Enabling Support can verify this for you. If you do not currently have an account with GXS and would like one, or if you currently access a mailbox for which restrictions prevent use of that mailbox in this effort, you can obtain an account. Please contact Marketing and Enabling Support at the number noted above.

Cost Information

Information for costs related to participation in this activity (network charges, software charges, etc.) will be provided by the individuals/groups noted above. Costs incurred through participation in this electronic transfer of data will be the responsibility of the filing Security Provider, not the Department.

After contacting GXS, please provide the Department at Insurance@dps.la.gov with the NAIC number, account number and user ID.

The second method is the State of Louisiana's free **DMZ MoveIt** server. You may only submit one filing per day. The following outlines the steps necessary to begin participating in this method of electronic transfer. You will need to contact the Department at Insurance@dps.la.gov to obtain a security form. This form must be completed, signed, scanned and emailed back to the Department for processing. An account will be created for you. Once the account is created you will receive a flow chart with the file names required for you to submit your filings and to retrieve your return error files. You will be required to submit a test file. If the test file is successful then you will be able to go to production.

A. GENERAL INFORMATION

All record formats for electronic transfer will be as described below in the section entitled **RECORD FORMATS**.

The Department will retrieve filings only once per day. Any filing not sent before this retrieval time will be considered filed on the next day.

After processing, information will be returned to the appropriate GXS mailbox or DMZ MoveIt server folder. The returned data will then be ready to be accessed by the insurance company.

* Please process the return files prior to sending in any additional files.

B. FILE TRANSFER

The Department will transfer all files using the **FTP** protocol. Therefore all files will need to be placed in the Department's mailbox using **FTP** or in **FTP ASCII** format which uses a **CRLF** (carriage return line feed) pair as the end-of-line character sequence.

C. RECORD PROCESSING

The filing record will have: a header record, filing records (individual vehicle or fleet) and a trailer record. The trailer record will consist of all 9's from character 1 through character 219. Character number 220 of the trailer record should have a transaction type of "2". After processing the filing records, the Department will return the filing report to the insurance company's GXS mailbox or DMZ MoveIt server folder. The report will consist of: the header record, filing records with dispositions and late flags and a trailer record containing summary totals.

Upon receipt, filings will be edited for the purpose of verification of format and reporting requirements identifying missing or invalid data. Accepted records (those

without edit errors) will then be compared by VIN with Departmental vehicle registration files. After these steps, records that do not result in a match will be considered unresolved. **It is the responsibility of the insurance company to read the returned filing.** No-Hit (Disposition code “U”) and Edit-Error (Disposition code “E”) exceptions must be corrected and re-submitted within fifteen (15) business days from the receipt of the returned filing. If an Out-of-Sequence (Disposition code “S”) error is received contact the Department as soon as possible **before** trying to make corrections to avoid filing errors that **cannot** be corrected.

D. **RECORD FORMATS**

There are four (4) types of records: header, individual vehicle filing, fleet filing and trailer.

A header record must be the first record on filings submitted to the Department. This record contains information pertaining to a particular filing as well as the account number and user-id of the reporting service agent. This information is critical for preparing the Department’s return report. The header record will be the first record on the Department’s return report and will have a record type of “3”.

An individual vehicle filing record is used by an insurance company for reporting required liability security information for an individual vehicle. This filing record will have a record type of “1”.

A fleet filing record is used by an insurance company for reporting required liability security information for a fleet of vehicles. This filing record will have a record type of “4”.

1. **HEADER RECORD**

A. The header record has a record type = “3” and it will be edited for errors. It must be the first record on the filing. Filings will not be processed if the header record does not pass all edit checks. If an error is encountered, the header record will be the only record written to the return report. Character positions (194 – 218) of the header will have an EDIT-ERROR-MASK. The field(s) in error must be corrected and the record(s) re-submitted for processing.

B. Header Record Field Descriptions:

1. SERV-AGENT-CODE – Code for an insurance company preparing its own filing, or a Department-supplied number. The service

agent code must be the same throughout the entire filing report.

2. NR-FILING-RECORDS – Number of filings records, excluding header and trailer records. An accurate count for this field is not required. It must have six (6) digits but it can be six (6) zeros.
3. DATE-CREATED – Date the filing report was created. Use format CCYYMMDD.
4. TEST-FILE – Indicator to determine if filing report is production or test. Use “Y” for test data or “N” for live data. If the indicator is “Y”, filing reports for GXS must be sent to the Test mailbox (“LAPS/LAPSS67”).
5. COMPRESSION – Use “N” for uncompressed.
6. ACCOUNT-NUMBER – The account number (assigned to the company by the GXS or the Department).
7. PERIOD – The character “.”.
8. USER-ID – The user ID (assigned to the company by the GXS or the Department).
9. INS-CO-USAGE – This field is for insurance company usage.
10. FILLER – Unused. Should be space filled.
11. EDIT-ERROR-MASK – Used by the Department to identify fields in error if the Disposition code is “E”.
12. DISPOSITION – If the header record is acceptable will be a SPACE, if the header record is unacceptable will be “E”.
13. RECORD-TYPE – Use a “3”.

C. The following fields are required, and the absence of any of these key data fields or the presence of invalid data in any of the key data fields is an edit error which precludes the Department from processing any filing records on the submission.

1. SERV-AGENT-CODE
2. NR-FILING-RECORDS
3. DATE-CREATED
4. TEST-FILE
5. COMPRESSION
6. ACCOUNT-NUMBER
7. PERIOD
8. USER-ID
9. RECORD-TYPE

- D. Returning Edit Errors: For a header record with an “E” disposition, the EDIT-ERROR-MASK field will be used to indicate the fields in error.

Positions are as follows:

1.	SERV-AGENT-CODE	194
2.	NR-FILING-RECORDS	195
3.	DATE-CREATED	196
4.	TEST-FILE	197
5.	COMPRESSION	198
6.	ACCOUNT-NUMBER	199
7.	PERIOD	200
8.	USER-ID	201
9.	RECORD-TYPE	202

A value of “1” in any of the above character positions signifies an error in the corresponding item. For example, if the SERV-AGT is missing, character position 194 will have a value of “1”. A value of “0” in any character position of the EDIT-ERROR-MASK signifies that the corresponding item passed the edits.

2. **INDIVIDUAL VEHICLE FILING RECORD**

- A. An individual vehicle filing record identifies the vehicle for which liability security has been issued, procured, recalled, reinstated, terminated, canceled or changed from binder status to an active policy. Every individual vehicle filing record in the RETURN FILING REPORT is to be reviewed. Duplicate reportings (Disposition code “D”) are not to be re-reported to the Department. Edit errors (Disposition code “E”) are to be corrected and re-reported to the Department within fifteen (15) business days of the Return-Date. Hits (Disposition code “H”) are acceptable. Incorrect “type use” or “class” (Disposition code “I”) are not to be re-reported to the Department. Prescribed (Disposition code “P”) are not to be re-reported to the Department. Restricted-Hit (Disposition code “R”) are to have the “VIN” verified with the “Vehicle Identification Number” field from the Vehicle Registration Certificate. If the “VIN” reported matches the “Vehicle Identification Number” on the Vehicle Registration Certificate, do not re-report. If the “VIN” reported does not match the “Vehicle Identification Number” on the Vehicle Registration Certificate, re-report with the correct “VIN”. Sequence errors (Disposition code “S”) must be researched to determine if the record needs to be resubmitted with necessary

changes. **Records must be reported in chronological order.** No-Hit (Disposition code “U”) are to have the “VIN” verified with the “Vehicle Identification Number” field from the Vehicle Registration Certificate, corrected and re-reported with the correct “VIN”; this is not an acceptable reporting.

B. Individual Vehicle Filing Record Field Descriptions:

1. VIN – “Vehicle Identification Number” field from the Vehicle Registration Certificate.
2. INS-COMP-CODE – NAIC Code (Best’s Insurance Reports Property-Casualty).
3. TRANSACTION-TYPE – See Section III.I. (Transaction Types and How They Are Used)
4. INS-POLICY-NR – Policy number.
5. TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE – Date insurance coverage on VIN was canceled, terminated, changed or became effective. Use format CCYYMMDD.
6. SERV-AGENT-CODE – Use only one (1) servicing agent code throughout the filing. Companies preparing their own filings are to use the NAIC code for the company reporting. Servicing Agents preparing filings for multiple companies shall use their SERV-AGENT-CODE throughout the entire filing and use the NAIC code for the insurance company that is issuing the liability security policy in the INS-COMP-CODE field.
7. LESSEE-OR-OWNER-STATE – A two-character abbreviation for the state that issued the driver’s license. If the “LESSEE-OR-OWNER-IDENTIFICATION-NUMBER” contains the federal tax identification number, the LESSEE-OR-OWNER-STATE field is spaces.
8. LESSEE-OR-OWNER-IDENTIFICATION-NUMBER – The lessee or owner identification number can be either a driver’s license number or a federal tax identification number. The “DRIVER’S LICENSE/EIN” field as it appears on the Vehicle Registration Certificate should contain the correct number. For individually owned vehicles, use the driver’s license. For company owned vehicles, use the federal tax identification number.
9. ISSUE-DATE – Date the policy was issued **or terminated** for a vehicle. **When reporting an initiation for a new vehicle added to an existing policy, make sure that the issue date used is the date the vehicle was added to the policy, not the issue date of the original policy.** Use format CCYYMMDD.

10. INS-CO-USAGE – This field is for insurance company usage.
11. FILLER – Spaces. No special characters.
12. RETURN-DATE – This field will be populated by the Department with the date the record was processed and returned to the reporting company. Use format CCYYMMDD.
13. LATE-FLAG – Indicates if filing record was late. This field will be populated by the Department. Any filing that is late will have this field set to “Y”.
14. EDIT-ERROR-MASK – Used to identify edit errors that are being returned to the company. For filing records with DISPOSITION of “E” the EDIT-ERROR-MASK will identify each field that failed to pass the edits. This field will be populated by the Department with a “1” (error) or “0” (no error).
15. DISPOSITION – Code used to determine the acceptance or rejection of a filing record. This field will be populated by the Department. See Section III.J. (Disposition Codes)
16. RECORD-TYPE – Use a “1” to identify this record as an individual vehicle filing record.

C. The following fields are required, and the absence of any of these key data fields or the presence of invalid data in any of the key data fields is an edit error which precludes the Department from processing this individual filing record.

1. VIN
2. INS-COMP-CODE
3. TRANSACTION-TYPE
4. INS-POLICY-NR
5. TERMINATION-OR-CHANGE-OR-EFFECTVE-DATE
6. SERV-AGENT-CODE
7. LESSEE-OR-OWNER-STATE
8. LESSEE-OR-OWNER-IDENTIFICATION-NUMBER
9. ISSUE-DATE
10. RECORD-TYPE

D. Returning Edit Errors. For individual vehicle filing records with an “E” Disposition, the EDIT-ERROR-MASK field will be used to indicate the fields in error.

Positions are as follows:

- | | | |
|----|-----|-----|
| 1. | VIN | 194 |
|----|-----|-----|

2.	INS-COMP-CODE	195
3.	TRANSACTION-TYPE	196
4.	INS-POLICY-NR	197
5.	TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE	198
6.	SERV-AGENT-CODE	199
7.	LESSEE-OR-OWNER-STATE	200
8.	LESSEE-OR-OWNER-IDENTIFICATION-NUMBER	201
9.	ISSUE-DATE – only for Initiations	202
10.	RECORD-TYPE	203

A value of “1” in any of the above character positions signifies an error in the corresponding item. For example, if the TRANSACTION-TYPE is missing, character position 196 will have a value of “1”. A value of “0” in any character position of the EDIT-ERROR-MASK signifies that the corresponding item has passed the edits.

3. **FLEET FILING RECORD**

- A. A Fleet Filing record is to be used to report the number of vehicles contained within the fleet.
- B. Fleet Filing Record Field Descriptions:
 - 1. INS-COMP-CODE – NAIC Code (Best’s Insurance Reports Property-Casualty)
 - 2. TRANSACTION-TYPE – See Section III.I. (Transaction Types and How They Are Used)
 - 3. INS-POLICY-NR – Policy number.
 - 4. TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE – Date policy was canceled, terminated, changed or became effective. Use format CCYMMDD.
 - 5. SERV-AGENT-CODE – Use only one (1) servicing agent code throughout the filing. Companies preparing their own filings are to use the NAIC code for the company reporting. Servicing Agents preparing filings for multiple companies shall use their SERV-AGENT-CODE throughout the entire filing and use the NAIC code for the insurance company that is issuing the liability security policy in the INS-COMP-CODE field.
 - 6. LESSEE-OR-OWNER-FEDERAL-TAX-IDENTIFICATION-NUMBER – The lessee or owner Federal Tax Identification Number. Use

- the nine (9) digits of the federal tax identification number. This is the "DRIVER'S LICENSE/EIN" FIELD as it appears on the Vehicle Registration Certificate.
7. LESSEE-OR-OWNER-NAME – For leased vehicles ("STATUS" field of the Vehicle Registration Certificate is "LESSEE") this is the "NAME" field as it appears on the Vehicle Registration Certificate. For owned vehicles, this is the "OWNER'S NAME" field as it appears on the Vehicle Registration Certificate.
 8. LESSEE-OR-OWNER-ADDRESS – For leased vehicles ("STATUS" field of the Vehicle Registration Certificate is "LESSEE") this is the "STREET1" field below the "NAME" field as it appears on the Vehicle Registration Certificate. For owned vehicles, this is the "STREET1" field below the "OWNER'S NAME" field as it appears on the Vehicle Registration Certificate.
 9. LESSEE-OR-OWNER-CITY-STATE – For leased vehicles ("STATUS" field of the Vehicle Registration Certificate is "LESSEE") this is the "CITY/STATE" field below the "NAME" field as it appears on the Vehicle Registration Certificate. For owned vehicles, this is the "CITY/STATE" field below the "OWNER'S NAME" field as it appears on the Vehicle Registration Certificate.
 10. LESSEE-OR-OWNER-ZIP-CODE - For leased vehicles ("STATUS" field of the Vehicle Registration Certificate is "LESSEE") this is the "ZIP" field below the "NAME" field as it appears on the Vehicle Registration Certificate. For owned vehicles, this is the "ZIP" field below the "OWNER'S NAME" field as it appears on the Vehicle Registration Certificate.
 11. NUMBER-OF-VEHICLES-IN-FLEET – The estimated number of vehicles in the fleet covered by this filing record.
 12. ISSUE-DATE – Date the policy was issued or terminated.
 13. INS-CO-USAGE – This field is for insurance company usage.
 14. RETURN-DATE – This field will be populated by the Department with the date the record was processed and returned to the reporting company. Use format CCYYMMDD.
 15. LATE-FLAG – Indicates if filing was late. This field will be populated by the Department. Any filing that is late will have this field set to "Y".
 16. EDIT-ERROR-MASK – Used to identify edit errors that are being returned to the company. For filing records with Disposition of "E", the EDIT-ERROR-MASK will identify each field that failed to pass the edits. Each character of this field will be populated by the Department with a "1" (error) or a "0" (no error).

17. DISPOSITION – Code used to determine the acceptance or rejection of a filing record. This field will be populated by the Department. See Section III.J. (Disposition Codes)
18. RECORD-TYPE – Use a “4” to identify this record as a fleet filing record.

C. The following fields are required:

1. INS-COMP-CODE
2. TRANSACTION-TYPE
3. INS-POLICY-NR
4. TERMINATION-OR-CHANGE-OR-EFFECTIVE-DATE
5. SERV-AGENT-CODE
6. LESSEE-OR-OWNER-FEDERAL-TAX-IDENTIFICATION-NUMBER
7. LESSEE-OR-OWNER-NAME
8. LESSEE-OR-OWNER-ADDRESS
9. LESSEE-OR-OWNER-CITY-STATE
10. LESSEE-OR-OWNER-ZIP-CODE
11. NUMBER-OF-VEHICLES-IN-FLEET
12. ISSUE-DATE
13. RECORD-TYPE

D. Returning Edit Errors. For filing records with an “E” disposition, the EDIT-ERROR-MASK field will be used to indicate the fields in error.

Positions are as follows:

1.	INS-COMP-CODE	194
2.	TRANSACTION-TYPE	195
3.	INS-POLICY-NR	196
4.	TERMINATION-OR-CHANGE-OR- EFFECTIVE-DATE	197
5.	SERV-AGENT-CODE	198
6.	LESSEE-OR-OWNER-FEDERAL-TAX- IDENTIFICATION-NUMBER	199
7.	LESSEE-OR-OWNER-NAME	200
8.	LESSEE-OR-OWNER-ADDRESS	201
9.	LESSEE-OR-OWNER-CITY-STATE	202
10.	LESSEE-OR-OWNER-ZIP-CODE	203
11.	NUMBER-OF-VEHICLES-IN-FLEET	204
12.	ISSUE-DATE	205
13.	RECORD-TYPE	206

A value of "1" in any of the above character positions signifies an error in the corresponding item. For example, if the TRANSACTION-TYPE is missing, character position 195 will have a value of "1". A value of "0" in any character position of the EDIT-ERROR-MASK signifies that the corresponding item passed the edits.

4. **TRAILER RECORD**

A. A trailer record is required. The trailer record must contain all 9's for positions 1 through 219 and must have a record type 2 in position 220. After the complete filing has been processed, the Department will update the trailer record with statistical information for the records submitted. This record is returned to the insurance company for review.

B. Returned Trailer Record Field Descriptions:

1. Servicing Agent Code
2. Date Filing was Received by the Department \
3. Date Filing was Processed by the Department
4. Total number of records included in the filing (record types 1 and 4)
5. Total number of records with disposition "D" (Duplicate Reporting)
6. Total number of records with disposition "E" (Edit Error)
7. Total number of records with disposition "H" (Hit)
8. Total number of records with disposition "I" (Incorrect Type-Use or Class)
9. Total number of records with disposition "P" (Prescribed)
10. Total number of records with disposition "R" (Restricted Hit)
11. Total number of records with disposition "S" (Sequence Error)
12. Total number of records with disposition "U" (No Hit)
13. Total number of late filings
14. Filler
15. Record-Type – 2

RECORD FORMAT – INSURANCE HEADER RECORD

FIELD CHARACTERISTICS		RECORD NAME		SYSTEM		
A = ALPHABETIC X = ALPHANUMERIC N = NUMERIC (UNSIGNED) USAGE ALL ASCII CHARACTERS		INSURANCE HEADER RECORD		Compulsory Insurance Reporting		
				RECORD SIZE		
				220		
ITEM NO.	FIELD POSITION	FIELD SIZE CHAR.	FIELD CHAR.	JUSTIFIED	FIELD LABEL	DESCRIPTION OR VALUE
1	1 - 5	5	N	Right	Serv-Agent-Code	REQUIRED
2	6 - 11	6	N	Right	NR-Filing-Records	REQUIRED
3	12 - 19	8	N	Right	Date-Created	REQUIRED
4	20	1	X		Test-File (Y or N)	REQUIRED
5	21	1	X		Compression (Y or N)	REQUIRED
6	22 - 28	7	X	Right	Account-Num	REQUIRED
7	29	1	X		Period	REQUIRED
8	30 - 36	7	X	Right	User-ID	REQUIRED
9	37 - 70	34	X		Ins-Co-Usage	
10	71 - 193	123	X		Filler	SPACES
*** THE FOLLOWING FIELDS ARE OMV DATA RETURNED FOR RECORD TYPE = 3 ***						
11	194 - 218	25	X	Left	Edit-Error-Mask	
12	219	1	X	Left	Disposition	
13	220	1	N		Record-Type	3

RECORD FORMAT – INDIVIDUAL VEHICLE FILING RECORD

FIELD CHARACTERISTICS		RECORD NAME		SYSTEM		
A = ALPHABETIC X = ALPHANUMERIC N = NUMERIC (UNSIGNED) USAGE <u>ALL ASCII CHARACTERS</u>		INDIVIDUAL VEHICLE FILING RECORD		Compulsory Insurance Reporting		
				RECORD SIZE		
				220		
ITEM NO.	FIELD POSITION	FIELD SIZE CHAR.	FIELD CHAR.	JUSTIFIED	FIELD LABEL	DESCRIPTION OR VALUE
1	1 - 30	30	X	Right / Space Filled	VIN	REQUIRED
2	31 - 35	5	N	Right	Ins-Comp-Code	REQUIRED
3	36	1	X		Transaction-Type	REQUIRED
4	37 - 66	30	X	Left	Ins-Policy-Nr	REQUIRED
5	67 - 74	8	N	Right	Termination-or-Change-or-Effective-Date (CCYYMMDD)	REQUIRED
6	75 - 79	5	N	Right	Serv-Agent-Code	REQUIRED
7	80 - 81	2	X		Lessee-or-Owner-State	REQUIRED
8	82 - 90	9	N	Right	Lessee-or-Owner-Identification-Number	REQUIRED
9	91 - 98	8	N	Right	Issue-Date (CCYYMMDD)	REQUIRED
10	99 - 132	34	X		Ins-Co-Usage	
11	133 - 184	52	X		Filler	SPACES
*** THE FOLLOWING FIELDS ARE OMV DATA RETURNED FOR RECORD TYPE = 1 ***						
12	185 - 192	8	N	Right	Return-Date	CCYYMMDD
13	193	1	X		Late-Flag	Y or N
14	194 - 218	25	X	Left	Edit-Error-Mask	
15	219	1	X	Left	Disposition	
16	220	1	N		Record-Type	1

RECORD FORMAT – FLEET FILING RECORD

FIELD CHARACTERISTICS		RECORD NAME		SYSTEM		
A = ALPHABETIC X = ALPHANUMERIC N = NUMERIC (UNSIGNED) USAGE <u>ALL ASCII CHARACTERS</u>		FLEET FILING RECORD		Compulsory Insurance Reporting		
				RECORD SIZE		
		220				
ITEM NO.	FIELD POSITION	FIELD SIZE CHAR.	FIELD CHAR.	JUSTIFIED	FIELD LABEL	DESCRIPTION OR VALUE
1	1 - 5	5	N	Right	Ins-Comp-Code	REQUIRED
2	6	1	X		Transaction-Type	REQUIRED
3	7 - 36	30	X	Left	Ins-Policy-Nr	REQUIRED
4	37 - 44	8	N	Right	Termination-or-Change-or-Effective-Date (CCYYMMDD)	REQUIRED
5	45 - 49	5	N	Right	Serv-Agent-Code	REQUIRED
6	50 - 58	9	N	Right	Lessee-or-Owner-Federal-Tax-Identification-Number	REQUIRED
7	59 - 88	30	X	Left	Lessee-or-Owner-Name	REQUIRED
8	89 - 113	25	X	Left	Lessee-or-Owner-Address	REQUIRED
9	114 - 133	20	X	Left	Lessee-or-Owner-City-State	REQUIRED
10	134 - 138	5	N	Right	Lessee-or-Owner-Zip-Code	REQUIRED
11	139 - 142	4	N	Right	Number-of-Vehicles-in-Fleet	REQUIRED
12	143 - 150	8	N	Right	Issue-Date (CCYYMMDD)	REQUIRED
13	151 - 184	34	X		Ins-Co-Usage	
*** THE FOLLOWING FIELDS ARE OMV DATA RETURNED FOR RECORD TYPE = 4 ***						
14	185 - 192	8	N	Right	Return-Date	CCYYMMDD
15	193	1	X		Late-Flag	Y or N
16	194 - 218	25	X	Left	Edit-Error-Mask	
17	219	1	X	Left	Disposition	
18	220	1	N		Record-Type	4

RECORD FORMAT – TRAILER RECORD

FIELD CHARACTERISTICS		RECORD NAME		SYSTEM		
A = ALPHABETIC X = ALPHANUMERIC N = NUMERIC (UNSIGNED) USAGE <u>ALL ASCII CHARACTERS</u>		TRAILER RECORD		Compulsory Insurance Reporting		
				RECORD SIZE		
		220				
ITEM NO.	FIELD POSITION	FIELD SIZE CHAR.	FIELD CHAR.	JUSTIFIED	FIELD LABEL	DESCRIPTION OR VALUE
1	1 - 5	5	N	Right	Serv-Agent-Code	
2	6 - 13	8	N	Right	Date-Received	CCYYMMDD
3	14 - 21	8	N	Right	Date-Processed	CCYYMMDD
4	22 - 27	6	N	Right	Total-Number-of-Filing-Records	
5	28 - 33	6	N	Right	Total-Number-of-Disposition-D-Records	
6	34 - 39	6	N	Right	Total-Number-of-Disposition-E-Records	
7	40 - 45	6	N	Right	Total-Number-of-Disposition-H-Records	
8	46 - 51	6	N	Right	Total-Number-of-Disposition-I-Records	
9	52 - 57	6	N	Right	Total-Number-of-Disposition-P-Records	
10	58 - 63	6	N	Right	Total-Number-of-Disposition-R-Records	
11	64 - 69	6	N	Right	Total-Number-of-Disposition-S-Records	
12	70 - 75	6	N	Right	Total-Number-of-Disposition-U-Records	
13	76 - 81	6	N	Right	Total-Number-of-Late-Fillings	
14	82 - 219	138	X		Filler	SPACES
15	220	1	N		Record-Type	2

V. INVALID VEHICLE TYPE-USE

The type-use for a vehicle is in the “CLASS” field of the Vehicle Registration Certificate. Below is a list of invalid “Type-Use” or “Class” of vehicles that are not to be reported to the Department.

0109 – Shriner Auto
0110 – Grotto Auto
0111, 0112, 0113, 0114, 0115, 0116, 0117, 0118, 0147, 0148, 0149 – Public Auto
0121, 0122 – Consular Auto
0124, 0125 – Governor’s Staff Auto
0138 – US Congressman
0139 – US Senator
0205, 0236, 0241 – Forest Truck
0209 – Shriner Truck
0210 – Grotto Truck
0211, 0212, 0213, 0214, 0215, 0216, 0217 – Public Truck
0221, 0222 – Consular Truck
0224, 0225 – Governor’s Staff Truck
0242, 0243, 0244, 0245, 0246 – Farm Truck
0252, 0253, 0254 – Public Truck
0262 – Handicap Farm Truck
0305, 0306, 0307, 0311, 0312, 0313, 0314, 0315, 0316 – Public Motorcycle
0309 – Shriner Motorcycle
0310 – Grotto Motorcycle
0409 – Shriner Bus
0415, 0416, 0417, 0418, 0419, 0420, 0421, 0422, 0423, 0427, 0428, 0429, 0466, 0467, 0468 – Public Bus
0601, 0602 – House Trailer
0701, 0722 – Trailer
0702, 0733 – Boat Trailer
0703 – 4 Year Trailer
0704 – Light Semi Trailer
0705 – Trailer Apportioned
0706 – Farm Semi Trailer
0707, 0708, 0709, 0723, 0724, 0725 – Public Perm Trailer
0710, 0711, 0712 – Public Boat Trailer
0713, 0714, 0715 – Public 4 Year Trailer
0716, 0717, 0718 – Public Light Semi Trailer
0719, 0720, 0721 – Public Plate Trailer
0726 – Shriner Trailer
0727 – Grotto Trailer
0728 – Appor Life trailer
0729, 0730 – Trailer Life
0731, 0732 – Trailer 4 Year
0901, 0902, 0903, 0904, 0905 – Off-Road Vehicle

VI. IDENTIFICATION CARD SPECIFICATIONS

A. GENERAL INFORMATION

Pursuant to R.S. 32:863, which became effective July 1, 1985, all vehicles registered in the State of Louisiana must contain within the vehicle documentation indicating compliance with the Compulsory Motor Vehicle Liability Security Law. An identification card may be used in lieu of the actual policy as a means of showing evidence of liability insurance coverage.

The purpose of developing an approved identification card should be to provide a document to be used as proof of compliance with Louisiana's compulsory insurance laws.

Those ID Cards, in conformance with the attached specifications, will be accepted as proof of liability insurance by law enforcement and by the Office of Motor Vehicles.

In order for the Security Provider to insure compliance with specification requirements, the Security Provider shall furnish the Department with sample copies of its Louisiana Liability Insurance Identification Card. Mail sample ID cards to:

Department of Public Safety & Corrections
Office of Motor Vehicles
Compulsory Insurance Unit
Post Office Box 64886
Baton Rouge, Louisiana 70896-4886
or
Fax copy to (225)-922-0158
Attention: Supervisor

For questions regarding implementation, please call the Compulsory Insurance Unit at (225) 925-7285.

B. LOUISIANA IDENTIFICATION CARD SPECIFICATIONS

1. Size of document need not be uniform.
2. Card should be a one-part form on at least 20 lb. white paper stock.
3. The following general information must be designated on the card in either bold print or contrasting color:

- (Front)
- A. Louisiana Auto Insurance Identification Card
 - B. An insurer authorized to transact business in Louisiana has issued the Motor Vehicle Policy identified hereon. The coverage provided by this policy meets the minimum liability insurance limits prescribed by law*
 - C. This card must be carried in the vehicle at all times as evidence of liability insurance

- (Reverse)
- A. **IMPORTANT NOTICE**
- La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times.
- Failure to comply may result in fines, revocation of registration privileges and block against the renewal or issuance of a driver's license.

4. Specific information **required** on the Identification Card is as follows:

- (Front)
- A. The name, address and NAIC number of the insurance company.
 - B. Name of insured, policy number, effective date and expiration date. When a new vehicle is added to an existing policy, make sure the effective date used is the date the vehicle was added to the policy, not the issue date of the original policy.
 - C. Vehicle Description: the year may be shown as two (2) digits and the make may be abbreviated. The full VIN number must be shown. Only when the insurer does not have the VIN information under a fleet policy, is the word "FLEET" to be entered. The Federal Tax identification number of the listed insured must be provided when "FLEET" is used.

- (Front or Back)
- A. Any excluded driver's on the policy must be listed.
 - B. The excluded driver's date of birth and/or operator's license number (optional)

C. The insurance agent's name, address and telephone number**

5. The certificate should be provided to each liability policy holder at least annually or at each renewal.
6. Other items may be included at the discretion of the insurer such as company logo or any other message(s) including claim locations, what to do in the event of an accident, etc., on the reverse side of the card.

* This wording is necessary to meet requirements without having to specify the actual insurance limits on all vehicles (vehicles under or over 20,000 lbs.).

** In accordance with Act 527 (SB882) R.S. 32:397(A), the insured will be required to furnish proof of insurance to law enforcement at the time of an accident.

C. EXAMPLES OF LOUISIANA IDENTIFICATION CARD

LOUISIANA AUTO INSURANCE IDENTIFICATION CARD		
An insurer authorized to transact business in Louisiana has issued the Motor Vehicle Policy identified hereon. The coverage provided by this policy meets the minimum liability insurance limits prescribed by law.		
NAIC NUMBER	COMPANY	
POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE
VEHICLE DESCRIPTION		
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
INSURED		
THIS CARD MUST BE IN THE VEHICLE AT ALL TIMES AS EVIDENCE OF INSURANCE		

IMPORTANT NOTICE
La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times.
Failure to comply may result in fines, revocation of registration privileges and block against the renewal or issuance of a driver's license.
INSURANCE AGENT:
EXCLUDED DRIVERS:

SAMPLE IDENTIFICATION CARD WITH INDIVIDUAL VEHICLE INFORMATION

LOUISIANA AUTO INSURANCE IDENTIFICATION CARD

An insurer authorized to transact business in Louisiana has issued the Motor Vehicle Policy identified hereon. The coverage provided by this policy meets the minimum liability insurance limits prescribed by law.

NAIC NUMBER

12345

COMPANY

Compulsory Insurance Company
1234 Liability Lane
Security, LA 10000

POLICY NUMBER

ABC 12345

EFFECTIVE DATE

01/01/2010

EXPIRATION DATE

01/01/2011

VEHICLE DESCRIPTION

YEAR

2005

MAKE/MODEL

Chev/Cam

VEHICLE IDENTIFICATION NUMBER

1GTCE1456PB123456

INSURED

John Doe
203 Doe Street
Baton Rouge, LA 70895

**THIS CARD MUST BE IN THE VEHICLE AT ALL TIMES
AS EVIDENCE OF INSURANCE**

IMPORTANT NOTICE

La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times.

Failure to comply may result in fines, revocation of registration privileges and block against the renewal or issuance of a driver's license.

INSURANCE AGENT:

All Day Insurance Agency
1000 Anywhere Street
Baton Rouge, LA 70806
Phone # (225) 123-4567

EXCLUDED DRIVERS: Johnny Doe

SAMPLE IDENTIFICATION CARD WITH FLEET INFORMATION

LOUISIANA AUTO INSURANCE IDENTIFICATION CARD

An insurer authorized to transact business in Louisiana has issued the Motor Vehicle Policy identified hereon. The coverage provided by this policy meets the minimum liability insurance limits prescribed by law.

NAIC NUMBER

12345

COMPANY

Compulsory Insurance Company
1234 Liability Lane
Security, LA 10000

POLICY NUMBER

ABC 12345

EFFECTIVE DATE

01/01/2010

EXPIRATION DATE

01/01/2011

VEHICLE DESCRIPTION

YEAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

FLEET – FEDERAL TAX ID # 720000000

INSURED

John Doe Trucking, Inc.
203 Doe Street
Baton Rouge, LA 70895

**THIS CARD MUST BE IN THE VEHICLE AT ALL TIMES
AS EVIDENCE OF INSURANCE**

IMPORTANT NOTICE

La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times.

Failure to comply may result in fines, revocation of registration privileges and block against the renewal or issuance of a driver's license.

INSURANCE AGENT:

All Day Insurance Agency
1000 Anywhere Street
Baton Rouge, LA 70806
Phone # (225) 123-4567

EXCLUDED DRIVERS: N/A

VII. PROOF OF LIABILITY SECURITY

In accordance with Act 423 (HB1366) R.S. 32:862(B)(H), licensed drivers and motor vehicle owners will be required to show **PROOF OF LIABILITY COVERAGE** at the time of vehicle registration, renewal of license plate and at the time of initial application, renewal or change of address/endorsement for a Driver's License. Acceptable proof of insurance will be in the form of one of the following:

A. FOR VEHICLES WITH A GROSS VEHICLE WEIGHT OF 20,000 POUNDS OR UNDER

1. Proof that a liability insurance policy providing at least **\$15,000/\$30,000** bodily injury and **\$25,000** property damage as provided in R.S. 32:900(B) was issued. (Copy of insurance identification card, copy of insurance policy or copy of declaration page of insurance policy); or
2. Proof that an approved motor vehicle liability bond was issued by a surety or insurance company in the amount of **\$30,000**; or
3. Proof that a certificate was issued from the State Treasurer stating that cash or securities of **\$55,000** was on deposit with the State Treasurer; or
4. Proof that a Louisiana Certificate of Self-Insurance was issued under R.S. 32:1042.

B. FOR VEHICLES WITH A GROSS VEHICLE WEIGHT OF 20,001 – 50,000 POUNDS

1. Proof that a liability insurance policy providing at least **\$25,000/\$50,000** bodily injury and **\$25,000** property damage as provided in R.S. 32:900(B) was issued. (Copy of insurance policy or copy of declaration page of insurance policy); or
2. Proof that a Louisiana Certificate of Self-Insurance was issued under R.S. 32:1042 (ACT 34 of the first extraordinary special session of 1996); or
3. Proof of single state registration (current form RS-3); or
4. Proof of Public Commission authority (current Intra-State ID Cab card); or
5. Proof that a Certificate of Self-insurance was issued by the Interstate Commerce Commission (ICC) under R.S. 32:900(M)(3).

C. **FOR VEHICLES WITH A GROSS VEHICLE WEIGHT OVER 50,001 POUNDS**

1. Proof that a liability insurance policy providing at least **\$100,000/\$300,000** bodily injury and **\$25,000** property damage or combined single limit of **\$300,000** as provided in R.S. 32:900(B) was issued. (Copy of insurance policy or copy of declaration page of insurance policy); or
2. Proof that a Louisiana Certificate of Self-Insurance was issued under R.S. 32:1042 (Act 34 of the first extraordinary special session of 1996); or
3. Proof of single state registration (current form RS-3); or
4. Proof of Public Service Commission authority (current Intra-State ID Cab Card);
or
5. Proof a Certificate of Self-Insurance was issued by the Interstate Commerce Commission (ICC) under R.S. 32:900(M)(3).