

Explanation of Changes 10-20-2005

P&C FORMS

Countrywide - Revised

80 (2005/08)

Homeowner Application

PAGE 1

1. PAYMENT PLAN section, delete the word OTHER from three check boxes
2. Delete PLEASE COMPLETE REVERSE SIDE and replace with Page 1 of 2.
3. Add -2005 to copyright

PAGE 2

4. Revise question 10 GENERAL INFORMATION section
5. In ATTACHMENTS section, delete Earthquake Application label.
6. Add Page 2 of 2 to footer.

81 (2005/08)

Personal Inland Marine Application

PAGE 1

1. Replace logo and delete border around title.
2. In SCHEDULE OF PROPERTY section, add SCHD to column heading # and add additional column for ITEM #; delete the word ACORD from Appraisal column.
3. In FOOTER, delete Please Complete Reverse Side and add Page 1 of 2.
4. Add -2005 to copyright

PAGE 2

5. In SCHEDULE OF PROPERTY (Continued) section, delete two rows
6. In BINDER/SIGNATURE section, add Applicable in Colorado; statement to Binder section.
7. Revise Notice of Information Practices
8. In FOOTER, add page 2 of 2.

84 (2005/08)

Dwelling Fire Application

PAGE 1

1. In PAYMENT PLAN section, delete the word OTHER from three check boxes
2. Add -2005 to copyright

PAGE 2

3. Revise question 10 in GENERAL INFORMATION section
4. In ATTACHMENTS section, delete EARTHQUAKE APPLICATION label from check box.
5. Add Page 2 of 2 to footer.

85 (2005/08)

Mobile Home Application

Page 1

1. In IDENTIFICATION section, revise YRS AT THIS RES to DATE AT CURR RES
2. Delete PLEASE COMPLETE REVERSE SIDE and replace with Page 1 of 2.
3. Add -2005 to copyright

Page 2

4. In GENERAL INFORMATION section, revise Question 10.
5. Add Page 2 of 2 to footer.

86 (2005/08)

Personal Lines Package Application

Page 1

1. In APPLICANT'S section, delete the label OTHER from check box.
2. In GENERAL INFORMATION section, revise Question 10.
3. Delete PLEASE COMPLETE REVERSE SIDE and replace with Page 1 of 3.
4. Add -2005 to copyright

Page 2

5. Add Page 2 of 3 to footer.

Page 3

6. In ATTACHMENTS section, delete EARTHQUAKE APPLICATION label from check box.
7. Add Page 3 of 3 to footer.

126 (2005/08)

Commercial General Liability Section

Page 1

1. In SCHEDULE OF HAZARDS section, add column to the right of LOCATION #, entitled HAZ #.
Revise LOCATION # to LOC #.
2. Add -2005 to copyright

130 (2005/08)

Workers Compensation Application

Page 1

1. In IDENTIFICATION section
 - a. In MAILING ADDRESS field, replace Zip code with + 4.
 - b. Add field for NAICS to the right of SIC field.
 - c. Delete the word OTHER label from check box.
2. In BILLING/AUDIT INFORMATION section
 - a. Under PAYMENT PLAN, delete the word OTHER label from check box.
 - b. Under AUDIT, delete the word OTHER label from check box.
3. Add -2005 to copyright.

State Specific - Revised

133 TN (2005/10)

Tennessee Worker's Compensation Insurance Plan - Assigned Risk Supplement

1. On top of page 1, revise Street and Suite of Overnight or Certified (Only) mailing address.
2. Add -2005 to ACORD copyright

133 WI (2005/09)

Wisconsin Worker's Compensation Insurance Pool

Page 1

1. Replace logo and delete border around title.
2. Add -2005 to ACORD copyright

Page 2

1. In RATING INFORMATION SECTION, Estimate Annual Premium column labels, add TRIA and DTEC labels below Total Modified Premium label and directly above Expense Constant label.

P&C Forms - NEW

50 RI (2005/10)

Rhode Island Insurance Identification Card

The Rhode Island Insurance Identification Card was created in response to Rhode Island regulations. The main differences between the generic ACORD Automobile Insurance Card, ACORD 50, and the Rhode Island card are:

1. Statement on front of card indicates, "Policy meets Rhode Island limits".
2. Statement on back of card indicates, "Pursuant to Rhode Island Insurance Law, an insurance company cannot require that repairs be made to a motor vehicle by any particular auto body repair shop or facility".

Withdrawn P&C Forms

None

FIG Changes ONLY P&C Forms

27 (2004/04)

Evidence of Personal Property Insurance

1. Revised first and second paragraph in Title section of spreadsheet
2. Delete Cancellation section with no field name. Retain Cancellation, Number of Days row.

28 (2003/10)

Evidence of Commercial Property Insurance

1. Revised first and fourth paragraph in Title section of spreadsheet
2. Delete Cancellation section with no field name. Retain Cancellation, Number of Days row.

LIFE FORMS

Life Forms - Revised

None

Life Forms - New

None