

Section Name	Field Name	Field and/or Section Description
TITLE ACORD 133 WI (2010/04)	Wisconsin Workers Compensation Insurance Pool	The title of the form. ACORD 133 WI, Wisconsin Workers Compensation Insurance Pool, is used as an application for workers compensation insurance coverage required by the Wisconsin Workers Compensation Insurance Pool. For answers to questions about completing this form, call the Pool at (262) 796-4592.