

**Universal wording updates to improve clarity and intent were made to all FIG text for this form on 11/21/2008.**

Section Name	Field Name	Field and/or Section Description
<b>TITLE</b> <b>ACORD 50 AR (2007/10)</b>	<b>ARKANSAS PROOF OF INSURANCE CARD</b>	<p>The title of the form. ACORD 50 AR, Arkansas Insurance Identification Card, is used as proof of automobile insurance. The Arkansas Proof of Insurance Card was created in response to Arkansas regulations. The main differences between the generic ACORD Automobile Insurance Card, ACORD 50, and the Arkansas card are:</p> <ul style="list-style-type: none"> <li>* Company Number is clearly identified as NAIC #</li> <li>* Company Name, Address and Phone Number is required</li> <li>* Agency Phone Number is required</li> <li>* Insured Name and Address is required</li> <li>* Names of Excluded Drivers must be listed on the reverse side of the card</li> </ul>
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Check box - Commercial One</b>	Check the box (if applicable): Indicates the policy is a commercial lines policy.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Check box - Personal One</b>	Check the box (if applicable): Indicates the policy is a personal lines policy.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Company NAIC Number</b>	Enter code: The identification code assigned to the insurer by the NAIC.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Company Name and Address</b>	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.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The first line of the insurer's mailing address.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The city of the insurer's mailing address.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The state or province of the insurer's mailing address.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The postal code of the insurer's mailing address.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Company Phone Number One</b>	Enter number: The primary phone number of the insurer.

Section Name	Field Name	Field and/or Section Description
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.
INSURANCE IDENTIFICATION CARD	Make One	Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy).
INSURANCE IDENTIFICATION CARD	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).
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.
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	Agency Phone Number One	Enter number: The phone number of the producer/agency.
INSURANCE IDENTIFICATION CARD	Insured Name and Address	Enter text: The named insured(s) as it/they will appear on the policy declarations page.
INSURANCE IDENTIFICATION CARD		Enter text: The named insured's mailing address line one.
INSURANCE IDENTIFICATION CARD		Enter text: The named insured's mailing address line two.

<b>Section Name</b>	<b>Field Name</b>	<b>Field and/or Section Description</b>
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The named insured's mailing address city name.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The named insured's mailing address state or province code.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter code: The named insured's mailing address postal code.
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Excluded Driver 1</b>	Enter text: The driver's first name (given name). As used here, enter the full name of all drivers who are to be excluded from coverage under this policy.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's middle name or initial (other given name).
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's last name (surname).
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Excluded Driver 2</b>	Enter text: The driver's first name (given name). As used here, enter the full name of all drivers who are to be excluded from coverage under this policy.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's middle name or initial (other given name).
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's last name (surname).
<b>INSURANCE IDENTIFICATION CARD</b>	<b>Excluded Driver 3</b>	Enter text: The driver's first name (given name). As used here, enter the full name of all drivers who are to be excluded from coverage under this policy.
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's middle name or initial (other given name).
<b>INSURANCE IDENTIFICATION CARD</b>		Enter text: The driver's last name (surname).
<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).