ACORD 50 FL (2017/12) - FLORIDA AUTOMOBILE INSURANCE IDENTIFICATION CARD

ACORD 50 FL, Florida Auto Insurance Identification Card, is used as proof of automobile insurance. The Florida Auto Insurance Identification Card was created in response to Florida regulations. The main differences between the generic ACORD Automobile Insurance Card, ACORD 50, and the Florida card are: * The size of the card is 3 1/2 inches wide, 2 1/4 inches high * The name of the insurance carrier should be followed by the carrier's unique five digit Florida company code. * Boxes referring to Personal Injury Protection Benefits/Property Damage Liability and Bodily Injury Liability must be checked, according to the coverage provided. * Statement is included on the back of the card referring to the fact that misrepresentation of insurance is a first degree misdemeanor. * Required to state whether rental coverage is provided.

Form Page 1

Section Name	Field Name	Description
INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD	Florida Company Code One	Enter identifier: The identification code assigned to the insurer by the state. As used here, enter the carrier's unique five digit Florida company code.
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. (MM/DD/YYYY)
INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
		Check the box (if applicable): Indicates the policy is a fleet policy.

ACORD 50 FL (2017/12) rev. 10-26-2017

INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD	Florida Company Code One	Enter identifier: The identification code assigned to the insurer by the state. As used here, enter the carrier's unique five digit Florida company code.
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. (MM/DD/YYYY)
INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.

Form Page 2

Section Name	Field Name	Description
INSURANCE IDENTIFICATION CARD		Check the box (if applicable): Indicates the vehicle has rental reimbursement or transportation expense coverage.
INSURANCE IDENTIFICATION CARD		Check the box (if applicable): Indicates the vehicle has rental reimbursement or transportation expense coverage.

Form Page 3

Section Name	Field Name	Description
INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD	Florida Company Code One	Enter identifier: The identification code assigned to the insurer by the state. As used here, enter the carrier's unique five digit Florida company code.
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. (MM/DD/YYYY)
INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD	Florida Company Code One	Enter identifier: The identification code assigned to the insurer by the state. As used here, enter the carrier's unique five digit Florida company code.
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.

ACORD 50 FL (2017/12) rev. 10-26-2017 Page 3 of 9

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. (MM/DD/YYYY)
INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
INSURANCE IDENTIFICATION CARD	Company One	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.
INSURANCE IDENTIFICATION CARD	Florida Company Code One	Enter identifier: The identification code assigned to the insurer by the state. As used here, enter the carrier's unique five digit Florida company code.
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. (MM/DD/YYYY)
INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.

ACORD 50 FL (2017/12) rev. 10-26-2017 Page 4 of 9

Year One	Enter year: The model year of the vehicle.
Make One	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
Company One	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.
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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.
Effective Date One	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY)
Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
Year One	Enter year: The model year of the vehicle.
Make One	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
	Make One Vehicle Identification Number One Fleet Coverage Company One Florida Company Code One Policy Number One Effective Date One Personal Injury Protection Benefits/Property Damage Liability (checkbox) One Bodily Injury Liability (checkbox) One Named Insured One Year One Make One Vehicle Identification Number One

ACORD 50 FL (2017/12) rev. 10-26-2017 Page 5 of 9

INSURANCE IDENTIFICATION CARD	Company One	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.
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INSURANCE IDENTIFICATION CARD	Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
INSURANCE IDENTIFICATION CARD	Company One	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.
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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. (MM/DD/YYYY)

ACORD 50 FL (2017/12) rev. 10-26-2017 Page 6 of 9

Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
Year One	Enter year: The model year of the vehicle.
Make One	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
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Effective Date One	Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. (MM/DD/YYYY)
Personal Injury Protection Benefits/Property Damage Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has personal injury protection benefits / property damage liability.
Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
Year One	Enter year: The model year of the vehicle.
	Benefits/Property Damage Liability (checkbox) One Bodily Injury Liability (checkbox) One Named Insured One Year One Make One Vehicle Identification Number One Fleet Coverage Company One Florida Company Code One Policy Number One Effective Date One Personal Injury Protection Benefits/Property Damage Liability (checkbox) One Bodily Injury Liability (checkbox) One Named Insured One

ACORD 50 FL (2017/12) rev. 10-26-2017 Page 7 of 9

INSURANCE IDENTIFICATION CARD	Make One	Enter text: The manufacturer of the vehicle (e.g., Ford, Chevy).
INSURANCE IDENTIFICATION CARD	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.
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INSURANCE IDENTIFICATION CARD	Bodily Injury Liability (checkbox) One	Check the box (if applicable): Indicates the vehicle has bodily injury liability coverage.
INSURANCE IDENTIFICATION CARD	Named Insured One	Enter text: The named insured(s) as it / they will appear on the policy declarations page.
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	Vehicle Identification Number One	Enter identifier: The vehicle identification number (VIN) or serial number assigned by the manufacturer.
INSURANCE IDENTIFICATION CARD	Fleet Coverage	Check the box (if applicable): Indicates the policy is a fleet policy.

Form Page 4

Section Name	Field Name	Description
1	l I	

INSURANCE IDENTIFICATION CARD	Check the box (if applicable): Indicates the vehicle has rental reimbursement or transportation expense coverage.
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