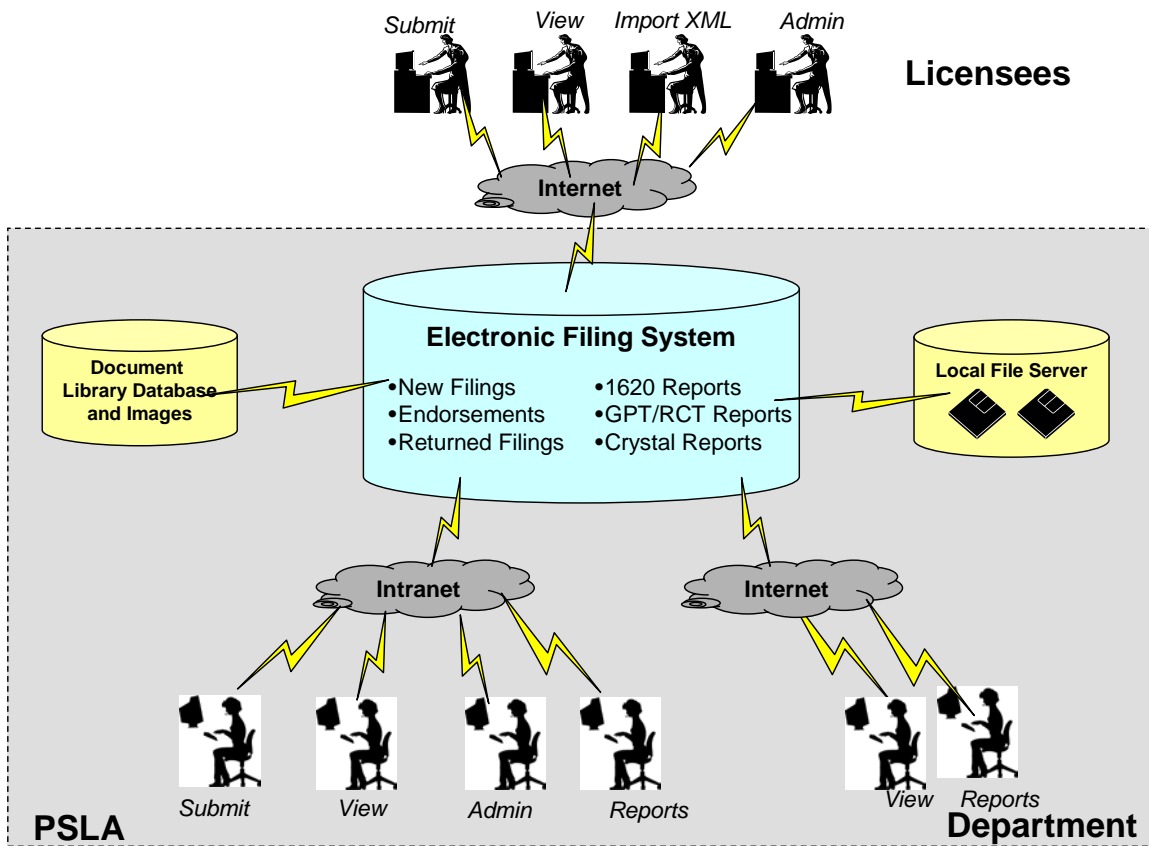


# Electronic Filing System User Manual for XML Export/Import



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## Table of Contents

<b>1</b>	<b>XML EXPORT/IMPORT .....</b>	<b>3</b>
1.1	Document History .....	4
<b>2</b>	<b>XML FILE STRUCTURE .....</b>	<b>4</b>
<b>3</b>	<b>XML FILE FORMAT .....</b>	<b>5</b>
<b>4</b>	<b>XML TAG NAMES .....</b>	<b>7</b>
<b>5</b>	<b>PROCEDURE TO IMPORT AN XML FILE INTO EFS .....</b>	<b>10</b>
5.1	Import Individual Filings via Email .....	10
5.2	Import a Batch of Filings via a Web Page .....	10
<b>6</b>	<b>XML EXPORT/IMPORT FILE EXAMPLES .....</b>	<b>12</b>
6.1	Filing Type 1609-SLL/1609-PR .....	12
6.2	Filing Type 1609-SLL/1609-PR – Unable to Obtain PR Image .....	14
6.3	Filing Type 1609-SLL/1609-PR with Multi-state Risk .....	16
6.4	Filing Type 1609-B .....	18
6.5	Filing Type 1610-A with Multi-state Risk .....	20
6.6	Filing Type 1610-B .....	22
6.7	Filing Type 1604-E .....	24
6.8	Multiple Filings in a Single XML File .....	26
6.9	</filings>Multiple Eligible Insurers and Ineligible Insurers .....	29
<b>7</b>	<b>TYPE OF COVERAGE (KIND).....</b>	<b>31</b>
<b>8</b>	<b>DESCRIPTION OF INSURED’S OPERATION (CLASS) .....</b>	<b>34</b>
<b>9</b>	<b>XML INTERFACE ERRORS .....</b>	<b>37</b>

## 1 XML EXPORT/IMPORT

The XML (Extensible Markup Language) Export/Import function is targeted at agencies where filing information is stored in the agency's computer system and the computer system prints out filings that are mailed to PSLA. PSLA receives the filing, scans the paper filing, and manually retypes filing information into the Electronic Filing System. The XML Export/Import function eliminates the need for the agency to print/mail the filing and the need for PSLA to manually retype in the filing information. The XML Export/Import process is:

- The agency computer system generates/exports an XML text file that contains filing information
- The agency computer system emails the XML text file to PSLA
- PSLA's Electronic Filing System validates filing information in the XML text file and imports it into PSLA's database
- PSLA's Electronic Filing System sends a return email confirming a successful import
- The filing is available for review over the Internet similar to filings entered by Agency Users or PSLA Users.

A single XML file may contain information for multiple policies but the typical usage is to have one policy per XML file. The XML Export/Import function supports submitting new filings. It does not support revisions, endorsements, 1620 reports, or RCT reports.

Please contact [efshelp@pasla.org](mailto:efshelp@pasla.org) if you are interested in the XML Export/Import function.

## 1.1 Document History

Date	Description
1/30/2010	Added description of <a href="#">XML Interface Errors</a>
5/4/2010	Added 2 new Kinds ( <a href="#">Type of Coverage</a> ) per Export List dated 4/24/2010
6/24/2011	Added three new fields for EFS 3.0. Refer to the <a href="#">Procedures and Electronic Filing User Manual</a> for more information. <ul style="list-style-type: none"> <li>• Multistate_Risk</li> <li>• Policy_Premium</li> <li>• Revenue_Rec_Date</li> </ul> References to the new fields are <b>highlighted in yellow</b> .
12/6/2011	Added notes on XML Import via web page to Section <a href="#">5.1</a> and <a href="#">5.2</a> . If a single XML file contains multiple filings in a web page upload then all must be valid before any are successfully submitted. A single error prevents submission. PSLA highly recommends that XML users use Search to compare the number of filings in the XML files against the number of filings successfully submitted to EFS.
10/16/2012	Updated the <a href="#">Kinds</a> and <a href="#">Class</a> lists.
4/22/2016	Changed all XML tags to lower case for EFS Next Generation.

## 2 XML FILE STRUCTURE

XML uses tags to identify information. The leading tag has the format **<tagname>** the trailing tag has the format **</tagname>** and the value is between the leading and trailing tags. For example a filing with a policy number of P1234XYZ would have the following information in the XML file.

```
<policy_number>P1234XYZ</policy_number>
```

A more complicated structure is where one piece of data hierarchically relates to another piece of data. For example, property limit, casualty limit, and premium are related to the Eligible Insurer. If a filing entered into the EFS Affidavit Form contains a single Eligible Insurer (as shown in the image below)...

MULTI-STATE RISK						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input checked="" type="radio"/> Yes <input type="radio"/> No						
ELIGIBLE INSURERS			Add Another Insurer		Remove Last Insurer	
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	22416	LLOYD'S (UNDERWRITE	\$ 1,000	\$ 10,000	\$ 100.00	\$ 200.00
Total from Eligible Insurers			\$ 1,000	\$ 10,000	\$ 100.00	\$ 200.00

...the analogous XML file contains the following.

```
<multistate_risk>1</multistate_risk>
<eligible_insurers>
  <eligible_insurer>
    <org_id>22416</org_id>
    <property_limit>1000</property_limit>
    <casualty_limit>10000</casualty_limit>
    <premium>100.00</premium>
```

```

    <policy_premium>200.00</policy_premium>
  </eligible_insurer>
</eligible_insurers>

```

If a filing entered into the EFS Affidavit Form contains multiple Eligible Insurers (as shown in the image below),

MULTI-STATE RISK						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input checked="" type="radio"/> Yes <input type="radio"/> No						
ELIGIBLE INSURERS			Add Another Insurer		Remove Last Insurer	
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	22416	LLOYD'S (UNDERWRITE	\$ 1,000	\$ 10,000	\$ 100.00	\$ 200.00
2	48123	ACE EUROPEAN GROU	\$ 2,000	\$ 20,000	\$ 150.00	\$ 300.00
Total from Eligible Insurers			\$ 3,000	\$ 30,000	\$ 250.00	\$ 500.00

the analogous XML file contains the following.

```

<multistate_risk>1</multistate_risk>
<eligible_insurers>
  <eligible_insurer>
    <org_id>22416</org_id>
    <property_limit>1000</property_limit>
    <casualty_limit>10000</casualty_limit>
    <premium>100.00</premium>
    <policy_premium>200.00</policy_premium>
  </eligible_insurer>
  <eligible_insurer>
    <org_id>48123</org_id>
    <property_limit>2000</property_limit>
    <casualty_limit>20000</casualty_limit>
    <premium>150.00</premium>
    <policy_premium>300.00</policy_premium>
  </eligible_insurer>
</eligible_insurers>

```

### 3 XML FILE FORMAT

A single XML file may contain multiple filings **but if one filing fails the validation check, none of the filings in the XML file are submitted**. In addition customers have found that it is more difficult to troubleshoot an XML file containing multiple filings. Thus while a single XML file may contain multiple filings it is recommended to only have a single filing in an XML file.

The first section in the XML file is called the "filing header" and it describes the number of filings and the total premium of all filings. EFS compares the premium listed in the filing header against the sum of premiums for each filing to ensure consistency.

- The **filing\_header** section contains the following.
  - The number of new and revised filings in the file.
  - The total amount of PA Premium (xml tag = premium) for all new filings.
- The section for each new **Filing** contains:
  - Customer ID
  - Filing Type of "New"

- XML Transaction ID. Each filing in the file must be numbered in sequential order. Validation errors will be reported against the XML Transaction ID.
- Filing Type ID. The values are:
  - 1 for 1609-SLL/1609-PR
  - 2 for 1609-B
  - 3 for 1610-A
  - 4 for 1610-B
  - 5 for 1604-E
- The remaining information needed is dependent on whether the filing type is 1609-SLL/1609-PR, 1609B, 1610-A, 1610-B, or 1604-E. Refer to the [XML Tags](#) tables for details.

Refer to the example below for an XML File that contains one New Filing.

- NOTE: the New Filing is a 1609-SLL/1609-PR so a “zipped” file of the PR image must be imported with the XML file and the PR image file name must be described in the 1609-SLL/1609-PR filing section. See section with **red** font.

### XML Example

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <individual_licensee_number>56142</individual_licensee_number>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample</policy_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
    <pr_image_filename>Test1609-1.pdf</pr_image_filename>
  </filing>
</filings>
```

Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):					
1609-SLL/1609-PR		must be used where other filing types do not apply			
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>					
Insured Name: JOHN SMITH					
Location of Risk			Zip	City	State
211 WELSH POOL ROAD			19341	EXTON	PA
Type of Coverage			Description of Insured's Operation		
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers		
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers		
Effective Dates (term) of Coverage					
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)		
01/01/2006			01/01/2007		
<b>MULTI-STATE RISK</b>					
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input type="radio"/> Yes <input checked="" type="radio"/> No					
<b>ELIGIBLE INSURERS</b>		Add Another Insurer		Remove Last Insurer	
Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1 48123	ACE EUROPEAN GROU	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
Total from Eligible Insurers		\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.					
Revenue Recognition Date		01/01/2006			
Tax		\$ 30.00		<input type="checkbox"/> Check here ONLY if Tax Exempt	
Total Stamping Fee		\$ 40.00		The correctly received date is 1998 days after the effective date	

## 4 XML TAG NAMES

**XML tag names are case sensitive and all tag names must be lower case.**

### XML Tags - Header

XML Tag	Data Type	Description
login	String	The Electronic Filing System Login Id (note the permission for XML Import must be enabled)
password	String	The password associated with the Login ID
number_of_filings	Integer	The total number of new and revised filings contained in the XML file.
total_of_filings_premium	Decimal	The total amount of premium for the new and revised filings contained in the XML file.

### XML Tags – New Filing

Affidavit Form Label	XML Tag	Data Type	Filing Types				
			1 1609-SLL	2 1609-B	3 1610-A	4 1610-B	5 1604-E
Customer ID	customer_id	String	Required	Required	Required	Required	Required

Affidavit Form Label	XML Tag	Data Type	Filing Types				
			1 1609-SLL	2 1609-B	3 1610-A	4 1610-B	5 1604-E
Policy Number	policy_number	String	Note 1	Note 1	Note 1	Note 1	Note 1
Binder Number	binder_number	String	Note 1	Note 1	Note 1	Note 1	Note 1
Customer Reference Number	customer_reference_number	String	Optional	Optional	Optional	Optional	Optional
Type of Filing	filing_type_id	Integer	Required	Required	Required	Required	Required
Purchasing Group	purchasing_group_id	Integer	N/A	N/A	N/A	Required	N/A
Insured Name	insured_name	String	Required	Required	Required	Required	Required
Location of Risk	location_of_risk	String	Required	Required	Required	Required	Required
City	city	String	Required	Required	Required	Required	Required
Zip	zipcode		Required	Required	Required	Required	Required
State	state	String = PA	Required	Required	Required	Required	Required
Type of Coverage	type_of_coverage	Integer – <a href="#">see list</a>	Required	Required	Required	Required	Required
Description of Insured Operation	description_of_insured_operation	Integer – <a href="#">see list</a>	Required	Required	Required	Required	Required
Effective Date	effective_date	MM/DD/YYYY	Required	Required	Required	Required	Required
Expiration Date	expiration_date	MM/DD/YYYY	Required	Required	Required	Required	Required
Multi-state Risk	multistate_risk	Boolean (1=yes, 0=no)	Required	Required	Required	Required	Required
Eligible Insurer	eligible_insurer	Integer	Required	Required	Required	Required	Required
Eligible Insurer Number	org_id		Required	required	required	required	required
Property Limit	property_limit		Note 2	Note 2	Note 2	Note 2	Note 2
Casualty Limit	casualty_limit		Note 2	Note 2	Note 2	Note 2	Note 2
Premium	premium		Note 3	Note 3	Note 3	Note 3	Note 3
Policy Premium	policy_premium		Required Note 6	Required Note 6	Required Note 6	Required Note 6	Required Note 6
For Reporting Only	reporting_only		Note 3	Note 3	Note 3	Note 3	Note 3
Check here only if Tax Exempt	tax_exempt	Boolean (T=tax exempt, F=not exempt)	Required only if tax exempt	Required only if tax exempt	Required only if tax exempt	Required only if tax exempt	Required only if tax exempt
Check here if Form 1606-A is used	Note 5						
Full explanation of why the risk could not be placed with admitted or eligible surplus lines insurers	explanation_for_1606a	String	Optional	Optional	Optional	Optional	Optional
Ineligible Insurer	ineligible_insurer		Optional	Optional	Optional	Optional	Optional
Ineligible Insurer Name	car_name	String	Optional	Optional	Optional	Optional	Optional
Surplus Lines Individual Licensee	individual_licensee_number		Required	Required	Required	Required	Required
Check here if you were unable to obtain 1609-PR Form	no_pr_available	Boolean (T=true, F=false)	Note 4	N/A	N/A	N/A	N/A



Affidavit Form Label	XML Tag	Data Type	Filing Types				
			1 1609-SLL	2 1609-B	3 1610-A	4 1610-B	5 1604-E
Producer Name	producer_name_override	string	Note 4	N/A	N/A	N/A	N/A
Producer Address	producer_address_override	string	Note 4	N/A	N/A	N/A	N/A
Select the 1609-PR scan from your system	pr_image_filename	string	Required	N/A	N/A	N/A	N/A
Revenue Recognition Date	revenue_rec_date	MM/DD/YYYY	Required	Required	Required	Required	Required

- N/A: Not applicable
- Note 1: if a policy number is not provided then a binder number is required
- Note 2: either a property limit or a casualty limit must be provided. Both cannot be \$0.
- Note 3: premium must be > \$0 unless the “for reporting only” option is checked.
- Note 4: There is a non-refundable \$50.00 Missing PR Stamping Fee if you submit a 1609-SLL/1609-PR filing without attaching the associated 1609-PR image file. This fee does not alleviate the surplus lines licensee’s responsibility to obtain and file the completed Producer Affidavit. This is a Warning Error.
- Note 5: If the tagname <ineligible\_insurer> is included in the file then the Electronic Filing System assumes the “Check here if Form 1606-A is used” box is checked. If the Ineligible Insurer tagname is not included in the file, then EFS assumes the box is unchecked. Refer to the [Multiple Eligible and Ineligible Insurers example](#).
- Note 6: if multistate\_risk=1 than policy\_premium must be greater than premium and if multi-state\_risk=0 than policy\_premium should equal to premium

## 5 PROCEDURE TO IMPORT AN XML FILE INTO EFS

### 5.1 Import Individual Filings via Email

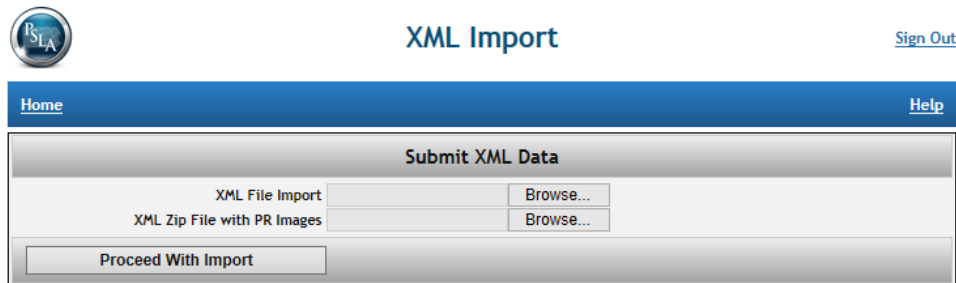
Email is the recommended method to import an XML file if the agency's computer system exports an XML file for each individual filing.

- Click new email
- Enter the email address for XML Export/Import
  - The email address will be provided by PSLA's IT Department. Contact [EFSHelp@pasla.org](mailto:EFSHelp@pasla.org) if you are interested in XML Export/Import.
- Enter the subject (i.e. policy number)
- Attach the XML text file
- If the filing type is 1609-SLL/1609-PR, attach the PR image file.
- Click send
- Electronic Filing System will:
  - Validate the Login ID has permission for XML Import
  - Validate the password
  - Validate filing information
  - Submit the filing (if there are no critical errors)
  - Send a reply email to the Login ID's email address with the results (PSLA ID if the filing was submitted or the list of errors that prevented submittal)
- **Note! PSLA strongly recommends that XML users search for filings after an XML Import to compare the number of filings that were in the XML files against the number of filings successfully submitted into EFS.**

### 5.2 Import a Batch of Filings via a Web Page

The Web Page Upload import method is recommended if the agency's computer system generates a single XML file for a batch of filings. If the XML file contains 1609-SL/1609-PR filings, the associated PR images must be uploaded as a zip file. The Web page may be used to upload individual filings but email would be more efficient.

- Open up your Internet Browser
- Go to the XML Import web page
  - The URL will be provided by PSLA's IT Department. Contact [EFSHelp@pasla.org](mailto:EFSHelp@pasla.org) if you are interested in XML Export/Import.



The screenshot shows the 'XML Import' web page. At the top left is the PSLA logo. The page title is 'XML Import' and there is a 'Sign Out' link at the top right. Below the title is a navigation bar with 'Home' and 'Help' links. The main content area is titled 'Submit XML Data' and contains two rows of input fields and 'Browse...' buttons. The first row is for 'XML File Import' and the second row is for 'XML Zip File with PR Images'. At the bottom of the form is a 'Proceed With Import' button.

- Click the **Browse** button and select the XML text file to upload.
- If the filing type is 1609-SLL/1609-PR, click the lower **Browse** button to select the zip image file containing the PR images.
- Click **Proceed with Import**.

- Electronic Filing System will:
  - Validate the Login ID in the XML fFile has permission for XML Import
  - Validate the password
  - Validate filing information
  - Submit the filing (if there are no critical errors). **WARNING! If an XML file contains multiple filings then all must be valid before any are successfully submitted. A single critical error will prevent submittal of all filings within an XML file.**
  - Display the results (PSLA ID if the filing was submitted or the list of errors that prevented submittal)

```

<?xml version="1.0" ?>
- <filing_results>
- <filing_result>
  <xml_tran_id>1</xml_tran_id>
  <valid>true</valid>
  <type>new</type>
  <psla_id>891978</psla_id>
</filing_result>
</filing_results>

```

- Submitted filings may be viewed in EFS. Use the Search page to search for the PSLA ID

**Search for Affidavit/Endorsement** [Sign Out](#)

Home Signed in as Vic Lim [agencyuser] on UAT. Last successful login was 4/28/2016 8:49 AM Help

**Enter Search Information**

Customer ID: 0753  
 Policy No.:  
 Binder No.:  
 Cust. Ref. No.:  
 Insured Name:  
 Tax Status: Select a Tax Status  
 PSLA ID:  
 Multi-state Risk:  Multi-state Risk  
 Resident State: Select a Resident State  
 Late Filings:  Filings with Late Fees  
 Omissions:  Filings with Omissions

Entry Date Range: 04/28/2016 to 04/28/2016  
 Eff. Date Range: to  
 Exp. Date Range: to  
 SL Individ. Lic. No.: Select the Individual Licensee  
 Producer Lic. No.:  
 Type of Coverage: Select the type of coverage  
 Filing Status: Select a Filing Status  
 Unable to Obtain PR:  Filings with Missing PR Stamping Fee  
 Filing Type: Select a Filing Type  
 Rev. Rec. Date Range: to

Search For Policy New Search

Show 10 entries Search:

	Policy No.	PSLA ID	FS	Entry Date	Insured Name	Eff. Date	Exp. Date	Property Limit	Casualty Limit	PA Premium
<input type="radio"/>	<a href="#">Web-16095LL-NoPR-Apr28</a>	1554852	NW	04-28-16	XML ORIGINAL FILING	01-01-10	01-01-11	0	12,345	1,000.01

Showing 1 to 1 of 1 entries Previous 1 Next

Revise Filing History After CN Submit Endorsement Submit Original Filing  
 Inactivate Cancel Reinstate Renew View Renew Delete DR Export Resu

- **Note! PSLA strongly recommends that XML users search for filings after an XML Import to compare the number of filings that were in the XML files against the number of filings successfully submitted into EFS.**

## 6 XML EXPORT/IMPORT FILE EXAMPLES

### 6.1 Filing Type 1609-SLL/1609-PR

Below is a sample XML file for a new filing of type 1609-SLL/1609-PR. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums listed in the XML file. In this example there is only one filing and the premium is \$1000.
  - NOTE: enter the integer value of the premium. Do not use “\$” or “commas”.
- Filing Type 1609-SLL/1609-PR requires an attached image. The image must be “zipped” and the field “pr\_image\_filename” must be included in the XML file. The PR image filename is “XML\_Example-PRImage” in the example below.
- The value for filing\_type\_id is 1 for a 1609-SLL/1609-PR filing type.

File Name = XMLExample-1609-SLL.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample-1609-SLL</policy_number>
    <binder_number>XMLExample-1609-SLL</binder_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
    <pr_image_filename>XML_Example-PRImage.pdf</pr_image_filename>
```

</filing>  
</filings>

Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):						
1609-SLL/1609-PR		must be used where other filing types do not apply				
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>						
Insured Name: JOHN SMITH						
Location of Risk			Zip	City	State	
211 WELSH POOL ROAD			19341	EXTON	PA	
Type of Coverage			Description of Insured's Operation			
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers			
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)			
01/01/2006			01/01/2007			
<b>MULTI-STATE RISK</b>						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input type="radio"/> Yes <input checked="" type="radio"/> No						
<b>ELIGIBLE INSURERS</b>			Add Another Insurer		Remove Last Insurer	
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROUPE	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
Total from Eligible Insurers			\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date		01/01/2006				
Tax		\$ 30.00		<input type="checkbox"/> Check here ONLY if Tax Exempt		
Total Stamping Fee		\$ 40.00		The correctly received date is 1998 days after the effective date		

## 6.2 Filing Type 1609-SLL/1609-PR – Unable to Obtain PR Image

Below is a sample XML file for a new filing of type 1609-SLL/1609-PR where the agency was unable to obtain a signed PR image from the Producer. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums listed in the XML file. In this example there is only one filing and the premium is \$1000.
  - NOTE: enter the integer value of the premium. Do not use “\$” or “commas”.
- The value for filing\_type\_id is 1.
- The fields “no\_pr\_available”, “producer\_name\_override”, and “producer\_address\_override” are required as shown below.

```
<no_pr_available>T</no_pr_available>    {The "T" is for "True"}
<producer_name_override>Bad Boy</producer_name_override>
<producer_address_override>12345 Street Philadelphia PA</producer_address_override>
```
- These filings can be submitted but they are reported to the Pennsylvania Insurance Department as missing a PR image.

File Name = XML Example-1609-SLL-noPR.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample-1609-SLL-noPR</policy_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
    <no_pr_available>T</no_pr_available>
```

```

<producer_name_override>Bad Boy</producer_name_override>
<producer_address_override>12345 Street Philadelphia PA</producer_address_override>
</filing>
</filings>

```

Below is an image of the filing after it was successfully imported into EFS. Please note the **unable to obtain the 1609-PR form** box is checked and the producer name and address is filled in.

DECLARATION BY SURPLUS LINES LICENSEE						
Insured Name <input type="text" value="JOHN SMITH"/>						
Location of Risk <input type="text" value="211 WELSH POOL ROAD"/>			Zip <input type="text" value="19341"/>	City <input type="text" value="EXTON"/>	State PA	
Type of Coverage <input type="text" value="Umbrella or Excess Liab. Follow Form - CAS"/> <input type="text" value="Umbrella or Excess Liab. Follow Form - CAS"/>			Description of Insured's Operation <input type="text" value="Commercial Truck - Explosive Haulers"/> <input type="text" value="Commercial Truck - Explosive Haulers"/>			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy) <input type="text" value="01/01/2006"/>			Expiration Date (mm/dd/yyyy) <input type="text" value="01/01/2007"/>			
With respect to the risk described above, I hereby declare under the penalties provided for perjury that I am not aware of how the coverage can be procured from licensed insurers. I have, therefore, affected the insurance described below with the following eligible surplus line insurer(s). [This is only applicable to the 1609-SLL/1609-PR type of filing.]						
MULTI-STATE RISK						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input type="radio"/> Yes <input checked="" type="radio"/> No						
ELIGIBLE INSURERS			Add Another Insurer	Remove Last Insurer		
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	<input type="text" value="48123"/>	ACE EUROPEAN GROU	\$ <input type="text" value="10,000,000"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="1,000.00"/>	\$ <input type="text" value="1,000.00"/>
Total from Eligible Insurers			\$ <input type="text" value="10,000,000"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="1,000.00"/>	\$ <input type="text" value="1,000.00"/>
I further declare under the penalties provided for perjury, that at the time of presenting a quotation to the insured, the insured was given notice in writing, either directly or through the producer, that:						
The insurer with whom the insurance is to be placed is not admitted to transact business in this Commonwealth and is subject to limited regulation by the Department; and in the event of the insolvency of the insurer, losses will not be paid by the Pennsylvania Property and Casualty Insurance Guaranty Association.						
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date <input type="text" value="01/01/2006"/>						
Tax \$ <input type="text" value="30.00"/>			<input type="checkbox"/> Check here ONLY if <a href="#">Tax Exempt</a>			
Stamping Fee \$ <input type="text" value="40.00"/>			<input type="checkbox"/> The correctly received date is 1998 days after the effective date			
Missing PR Stamping Fee \$ <input type="text" value="50.00"/>			<input type="checkbox"/> The Missing PR Stamping Fee is non-refundable.			
Total Stamping Fee \$ <input type="text" value="90.00"/>			<input type="checkbox"/> The correctly received date is 1998 days after the effective date			

## 6.3 Filing Type 1609-SLL/1609-PR with Multi-state Risk

Below is a sample XML file for a new filing of type 1609-SLL/1609-PR that has a multi-state risk. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums (PA portion) listed in the XML file. In this example there is only one filing, the PA Portion of the premium is \$1000, and the policy premium is \$5,000.
  - The policy premium is \$5,000.
  - The policy covers risks in multiple states.
  - The home state is PA.
  - The portion of the policy premium that is associated with the risk located in PA is \$1,000.
- The revenue recognition date for tax reporting is the same as the policy effective date.
- Filing Type 1609-SLL/1609-PR requires an attached image. The image must be “zipped” and the field “**pr\_image\_filename**” must be included in the XML file. The PR image filename is “XML\_Example-PRImage” in the example below.
- The value for filing\_type\_id is 1 for a 1609-SLL/1609-PR filing type.

File Name = XMLExample-1609-SLL.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample-1609-Multistate</policy_number>
    <binder_number>XMLExample-1609-Multistate</binder_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>1</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>5000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
  </filing>
</filings>
```



```

<revenue_rec_date>01/01/2006</revenue_rec_date>
<pr_image_filename>Test-1609-1.pdf</pr_image_filename>
</filing>
</filings>

```

Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):						
1609-SLL/1609-PR		must be used where other filing types do not apply				
REPORT OF TRANSACTION WITH UNLICENSED INSURER(S) IN ACCORDANCE WITH SECTIONS 1604, 1606, 1608 AND 1609 OF ARTICLE XVI, SURPLUS LINES, OF THE INSURANCE COMPANY LAW, ACT OF MAY 17, 1921, P.L. 682, NO. 284, AS AMENDED						
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>						
Insured Name: JOHN SMITH						
Location of Risk		Zip	City	State		
211 WELSH POOL ROAD		19341	EXTON	PA		
Type of Coverage			Description of Insured's Operation			
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers			
Umbrella or Excess Liab. Follow Form - CAS			Commercial Truck - Explosive Haulers			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)			
01/01/2006			01/01/2007			
With respect to the risk described above, I hereby declare under the penalties provided for perjury that I am not aware of how the coverage can be procured from licensed insurers. I have, therefore, affected the insurance described below with the following eligible surplus line insurer(s). [This is only applicable to the 1609-SLL/1609-PR type of filing.]						
<b>MULTI-STATE RISK</b>						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input checked="" type="radio"/> Yes <input type="radio"/> No						
<b>ELIGIBLE INSURERS</b>		Add Another Insurer		Remove Last Insurer		
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROUF	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 5,000.00
Total from Eligible Insurers			\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 5,000.00
I further declare under the penalties provided for perjury, that at the time of presenting a quotation to the insured, the insured was given notice in writing, either directly or through the producer, that:						
The insurer with whom the insurance is to be placed is not admitted to transact business in this Commonwealth and is subject to limited regulation by the Department; and in the event of the insolvency of the insurer, losses will not be paid by the Pennsylvania Property and Casualty Insurance Guaranty Association.						
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date		01/01/2006				
Tax	\$ 30.00	<input type="checkbox"/> Check here ONLY if Tax Exempt				
Total Stamping Fee	\$ 40.00	The correctly received date is 1998 days after the effective date				

## 6.4 Filing Type 1609-B

Below is a sample XML file for a new filing of type 1609-B. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums listed in the XML file. In this example there is only one filing and the premium is \$1000.
  - NOTE: enter the integer value of the premium. Do not use “\$” or “commas”.
- The value for filing\_type\_id is 2.

File Name = XMLExample-1609-B.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>2</filing_type_id>
    <policy_number>XMLExample-1609-B</policy_number>
    <binder_number>XMLExample-1609-B</binder_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>19</type_of_coverage>
    <description_of_insured_operation>17</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
  </filing>
</filings>
```

Below is an image of the filing after it was successfully imported into EFS.

**Type of Filing** (please select one):  
 1609-B for use after continuous surplus lines placement per Surplus Lines Law Section 1609(b)

REPORT OF TRANSACTION WITH UNLICENSED INSURER(S) IN ACCORDANCE WITH SECTIONS 1604, 1606, 1608 AND 1609 OF ARTICLE XVI, SURPLUS LINES, OF THE INSURANCE COMPANY LAW, ACT OF MAY 17, 1921, P.L. 682, NO. 284, AS AMENDED

**DECLARATION BY SURPLUS LINES LICENSEE**

**Insured Name** JOHN SMITH

**Location of Risk** 211 WELSH POOL ROAD  
**Zip** 19341  
**City** EXTON  
**State** PA

**Type of Coverage** Professional Liab. (E&O/Malpractice) - CAS  
 Professional Liab. (E&O/Malpractice) - CAS  
**Description of Insured's Operation** Service - Miscellaneous  
 Service - Miscellaneous

**Effective Dates (term) of Coverage**  
**Effective Date** (mm/dd/yyyy) 01/01/2006  
**Expiration Date** (mm/dd/yyyy) 01/01/2007

With respect to the risk described above, I hereby declare under the penalties provided for perjury that I am not aware of how the coverage can be procured from licensed insurers. I have, therefore, affected the insurance described below with the following eligible surplus line insurer(s). [This is only applicable to the 1609-SLL/1609-PR type of filing.]

**MULTI-STATE RISK**

Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory?  Yes  No

**ELIGIBLE INSURERS** Add Another Insurer Remove Last Insurer

	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROUF	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
<b>Total from Eligible Insurers</b>			\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00

I further declare under the penalties provided for perjury, that at the time of presenting a quotation to the insured, the insured was given notice in writing, either directly or through the producer, that:

The insurer with whom the insurance is to be placed is not admitted to transact business in this Commonwealth and is subject to limited regulation by the Department; and in the event of the insolvency of the insurer, losses will not be paid by the Pennsylvania Property and Casualty Insurance Guaranty Association.

**Omissions** : the Omissions box is not available after 12/31/2010.

**Revenue Recognition Date** 01/01/2006

Tax \$ 30.00  Check here ONLY if **Tax Exempt**

**Total Stamping Fee** \$ 40.00 The correctly received date is 1998 days after the effective date

## 6.5 Filing Type 1610-A with Multi-state Risk

Below is a sample XML file for a new filing of type 1610-A that has risks in multiple states. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of the PA portion of premiums listed in the XML file.
  - The policy premium is \$5,000 (i.e. policy\_premium = 5000)
  - The policy covers risks in multiple states (i.e. multistate\_risk = 1)
  - PA is the home state.
  - The premium associated with the risk located in PA is \$1,000 (i.e. premium = 1000)
- The value for filing\_type\_id is 3.

File Name = XML Example-1610-A.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>3</filing_type_id>
    <policy_number>XMLExample-1610-A</policy_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>19</type_of_coverage>
    <description_of_insured_operation>17</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>1</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>5000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
  </filing>
</filings>
```

Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):						
1610-A		for use with large accounts when qualifying per Surplus Lines Law Section 1610(a)				
REPORT OF TRANSACTION WITH UNLICENSED INSURER(S) IN ACCORDANCE WITH SECTIONS 1604, 1606, 1608 AND 1609 OF ARTICLE XVI, SURPLUS LINES, OF THE INSURANCE COMPANY LAW, ACT OF MAY 17, 1921, P.L. 682, NO. 284, AS AMENDED						
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>						
Insured Name: JOHN SMITH						
Location of Risk			Zip	City	State	
211 WELSH POOL ROAD			19341	EXTON	PA	
Type of Coverage			Description of Insured's Operation			
Professional Liab. (E&O/Malpractice) - CAS			Service - Miscellaneous			
Professional Liab. (E&O/Malpractice) - CAS			Service - Miscellaneous			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)			
01/01/2006			01/01/2007			
With respect to the risk described above, I hereby declare under the penalties provided for perjury that I am not aware of how the coverage can be procured from licensed insurers. I have, therefore, affected the insurance described below with the following eligible surplus line insurer(s). [This is only applicable to the 1609-SLL/1609-PR type of filing.]						
<b>MULTI-STATE RISK</b>						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input checked="" type="radio"/> Yes <input type="radio"/> No						
<b>ELIGIBLE INSURERS</b>		Add Another Insurer		Remove Last Insurer		
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROUF	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 5,000.00
Total from Eligible Insurers			\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 5,000.00
I further declare under the penalties provided for perjury, that at the time of presenting a quotation to the insured, the insured was given notice in writing, either directly or through the producer, that:						
The insurer with whom the insurance is to be placed is not admitted to transact business in this Commonwealth and is subject to limited regulation by the Department; and in the event of the insolvency of the insurer, losses will not be paid by the Pennsylvania Property and Casualty Insurance Guaranty Association.						
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date		01/01/2006				
Tax		\$ 30.00		<input type="checkbox"/> Check here ONLY if Tax Exempt		
Total Stamping Fee		\$ 40.00		The correctly received date is 1998 days after the effective date		

## 6.6 Filing Type 1610-B

Below is a sample XML file for a new filing of type 1610-B. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums listed in the XML file. In this example there is only one filing and the premium is \$1000.
  - NOTE: enter the integer value of the premium. Do not use “\$” or “commas”.
- The value for filing\_type\_id is 4.
- A value for the “purchasing\_group” field is required. Refer to the Purchasing Group Table to find the value associated with the purchasing group name.

### File Name = XML\_Example-1610-B.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>4</filing_type_id>
    <policy_number>XMLExample-1610-B</policy_number>
    <binder_number>XMLExample-1610-B</binder_number>
    <purchasing_group_id>36828</purchasing_group_id>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>19</type_of_coverage>
    <description_of_insured_operation>17</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
  </filing>
</filings>
```

Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):						
1610-B		for use with Purchasing Groups per Surplus Lines Law Section 1610(b)				
Name of <input type="text" value="ACA INTERNATIONAL"/>						
Purchasing Group: <input type="text" value="ACA INTERNATIONAL"/>						
REPORT OF TRANSACTION WITH UNLICENSED INSURER(S) IN ACCORDANCE WITH SECTIONS 1604, 1606, 1608 AND 1609 OF ARTICLE XVI, SURPLUS LINES, OF THE INSURANCE COMPANY LAW, ACT OF MAY 17, 1921, P.L. 682, NO. 284, AS AMENDED						
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>						
Insured Name <input type="text" value="JOHN SMITH"/>						
Location of Risk			Zip	City	State	
<input type="text" value="211 WELSH POOL ROAD"/>			<input type="text" value="19341"/>	<input type="text" value="EXTON"/>	<input type="text" value="PA"/>	
Type of Coverage			Description of Insured's Operation			
<input type="text" value="Professional Liab. (E&amp;O/Malpractice) - CAS"/>			<input type="text" value="Service - Miscellaneous"/>			
<input type="text" value="Professional Liab. (E&amp;O/Malpractice) - CAS"/>			<input type="text" value="Service - Miscellaneous"/>			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)			
<input type="text" value="01/01/2006"/>			<input type="text" value="01/01/2007"/>			
With respect to the risk described above, I hereby declare under the penalties provided for perjury that I am not aware of how the coverage can be procured from licensed insurers. I have, therefore, affected the insurance described below with the following eligible surplus line insurer(s). [This is only applicable to the 1609-SLL/1609-PR type of filing.]						
<b>MULTI-STATE RISK</b>						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input checked="" type="radio"/> Yes <input type="radio"/> No						
<b>ELIGIBLE INSURERS</b>		Add Another Insurer		Remove Last Insurer		
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	<input type="text" value="48123"/>	<input type="text" value="ACE EUROPEAN GROUF"/>	<input type="text" value="\$ 10,000,000"/>	<input type="text" value="\$ 0"/>	<input type="text" value="\$ 1,000.00"/>	<input type="text" value="\$ 5,000.00"/>
Total from Eligible Insurers			<input type="text" value="\$ 10,000,000"/>	<input type="text" value="\$ 0"/>	<input type="text" value="\$ 1,000.00"/>	<input type="text" value="\$ 5,000.00"/>
I further declare under the penalties provided for perjury, that at the time of presenting a quotation to the insured, the insured was given notice in writing, either directly or through the producer, that:						
The insurer with whom the insurance is to be placed is not admitted to transact business in this Commonwealth and is subject to limited regulation by the Department; and in the event of the insolvency of the insurer, losses will not be paid by the Pennsylvania Property and Casualty Insurance Guaranty Association.						
<input type="checkbox"/> Omissions : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date		<input type="text" value="01/01/2006"/>				

## 6.7 Filing Type 1604-E

Below is a sample XML file for a new filing of type 1604-E. Please note the following.

- The “customer\_id” field is required for all filings.
- The premium listed in the field called “filing\_header” must be the total of all premiums listed in the XML file. In this example there is only one filing and the premium is \$1000.
  - NOTE: enter the integer value of the premium. Do not use “\$” or “commas”.
- The value for filing\_type\_id is 5.
- The field for individual\_licensee\_number is not required.
- Either the [Type of Coverage](#) (Kind) or the [Description of Insured's Operation](#) (Class) must be found on the Export List. Please click on the hyperlink to display the list from www.pasla.org.

File Name = XML\_Example-1604-E.xml

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1000</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>5</filing_type_id>
    <policy_number>XMLExample-1604-E</policy_number>
    <binder_number>XMLExample-1604-E</binder_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>17</type_of_coverage>
    <description_of_insured_operation>57</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
  </filing>
</filings>
```



Below is an image of the filing after it was successfully imported into EFS.

<b>Type of Filing</b> (please select one):						
1604-E (Export) ▼		for use in reporting Export Filings that qualify per Surplus Lines Law Section 1604(2)(ii)				
REPORT OF TRANSACTION WITH UNLICENSED INSURER(S) IN ACCORDANCE WITH SECTIONS 1604, 1606, 1608 AND 1609 OF ARTICLE XVI, SURPLUS LINES, OF THE INSURANCE COMPANY LAW, ACT OF MAY 17, 1921, P.L. 682, NO. 284, AS AMENDED						
<b>DECLARATION BY SURPLUS LINES LICENSEE</b>						
Insured Name: JOHN SMITH						
Location of Risk		Zip	City	State		
211 WELSH POOL ROAD		19341	EXTON	PA		
Type of Coverage			Description of Insured's Operation			
Employer Practices Liability - CAS			Medical - Home Health Service			
Employer Practices Liability - CAS ▼			Medical - Home Health Service ▼			
Effective Dates (term) of Coverage						
Effective Date (mm/dd/yyyy)			Expiration Date (mm/dd/yyyy)			
01/01/2006			01/01/2007			
<b>MULTI-STATE RISK</b>						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input type="radio"/> Yes <input checked="" type="radio"/> No						
<b>ELIGIBLE INSURERS</b>						
<input type="button" value="Add Another Insurer"/> <input type="button" value="Remove Last Insurer"/>						
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROUF	\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
Total from Eligible Insurers			\$ 10,000,000	\$ 0	\$ 1,000.00	\$ 1,000.00
<input type="checkbox"/> <b>Omissions</b> : the Omissions box is not available after 12/31/2010.						
Revenue Recognition Date		01/01/2006				
Tax		\$ 30.00		<input type="checkbox"/> Check here ONLY if <b>Tax Exempt</b>		
Total Stamping Fee		\$ 40.00		The correctly received date is 1998 days after the effective date		
<input type="checkbox"/> Check here if <b>FORM 1606-A</b> is attached as a portion of the risk has been assigned in accordance with Section 1606 to a non-admitted insurer not on the Pennsylvania Insurance Department's current list of eligible surplus lines insurers.						

## 6.8 Multiple Filings in a Single XML File

Below is a sample XML file that contains five filings. Please note the following.

- The “customer\_id” field is required for each filing.
- The Number of Filings value must be the total number of filings (5 in this example).
- The Total of Premiums value must be the sum of the five filings (15000.15 in this example).
- The values for Trans ID should be 1 through 5.

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>5</number_of_filings>
    <total_of_filing_premiums>15000.15</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample-1609-SLL-m</policy_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>0</casualty_limit>
        <premium>1000.01</premium>
        <policy_premium>1000.01</policy_premium>
      </eligible_insurer>
    </eligible_insurers>
    <revenue_rec_date>01/01/2006</revenue_rec_date>
    <pr_image_filename>Test1609-1.pdf</pr_image_filename>
  </filing>
  <filing type="new" xml_tran_id="2">
    <customer_id>0753</customer_id>
    <filing_type_id>2</filing_type_id>
    <policy_number>XMLExample-1609-B-m</policy_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>19</type_of_coverage>
```

```

<description_of_insured_operation>17</description_of_insured_operation>
<insured_name>John Smith</insured_name>
<location_of_risk>211 Welsh Pool Road</location_of_risk>
<city>Exton</city>
<state>PA</state>
<zipcode>19341</zipcode>
<multistate_risk>0</multistate_risk>
<eligible_insurers>
  <eligible_insurer>
    <org_id>48123</org_id>
    <property_limit>10000000</property_limit>
    <casualty_limit>0</casualty_limit>
    <premium>2000.02</premium>
    <policy_premium>2000.02</policy_premium>
  </eligible_insurer>
</eligible_insurers>
<revenue_rec_date>01/01/2006</revenue_rec_date>
</filing>
<filing type="new" xml_tran_id="3">
  <customer_id>0753</customer_id>
  <filing_type_id>3</filing_type_id>
  <policy_number>XMLExample-1610-A-m</policy_number>
  <individual_licensee_number>56142</individual_licensee_number>
  <effective_date>01/01/2006</effective_date>
  <expiration_date>01/01/2007</expiration_date>
  <type_of_coverage>19</type_of_coverage>
  <description_of_insured_operation>17</description_of_insured_operation>
  <insured_name>John Smith</insured_name>
  <location_of_risk>211 Welsh Pool Road</location_of_risk>
  <city>Exton</city>
  <state>PA</state>
  <zipcode>19341</zipcode>
  <multistate_risk>0</multistate_risk>
  <eligible_insurers>
    <eligible_insurer>
      <org_id>48123</org_id>
      <property_limit>10000000</property_limit>
      <casualty_limit>0</casualty_limit>
      <premium>3000.03</premium>
      <policy_premium>3000.03</policy_premium>
    </eligible_insurer>
  </eligible_insurers>
  <revenue_rec_date>01/01/2006</revenue_rec_date>
</filing>
<filing type="new" xml_tran_id="4">
  <customer_id>0753</customer_id>
  <filing_type_id>4</filing_type_id>
  <policy_number>XMLExample-1610-B-m</policy_number>
  <purchasing_group_id>36828</purchasing_group_id>
  <individual_licensee_number>56142</individual_licensee_number>
  <effective_date>01/01/2006</effective_date>
  <expiration_date>01/01/2007</expiration_date>
  <type_of_coverage>19</type_of_coverage>
  <description_of_insured_operation>17</description_of_insured_operation>
  <insured_name>John Smith</insured_name>
  <location_of_risk>211 Welsh Pool Road</location_of_risk>

```

```

<city>Exton</city>
<state>PA</state>
<zipcode>19341</zipcode>
<multistate_risk>0</multistate_risk>
<eligible_insurers>
  <eligible_insurer>
    <org_id>48123</org_id>
    <property_limit>10000000</property_limit>
    <casualty_limit>0</casualty_limit>
    <premium>4000.04</premium>
    <policy_premium>4000.04</policy_premium>
  </eligible_insurer>
</eligible_insurers>
<revenue_rec_date>01/01/2006</revenue_rec_date>
</filing>
<filing type="new" xml_tran_id="5">
  <customer_id>0753</customer_id>
  <filing_type_id>5</filing_type_id>
  <policy_number>XMLExample-1604-E-M</policy_number>
  <effective_date>01/01/2006</effective_date>
  <expiration_date>01/01/2007</expiration_date>
  <type_of_coverage>22</type_of_coverage>
  <description_of_insured_operation>21</description_of_insured_operation>
  <insured_name>John Smith</insured_name>
  <location_of_risk>211 Welsh Pool Road</location_of_risk>
  <city>Exton</city>
  <state>PA</state>
  <zipcode>19341</zipcode>
  <multistate_risk>0</multistate_risk>
  <eligible_insurers>
    <eligible_insurer>
      <org_id>48123</org_id>
      <property_limit>10000000</property_limit>
      <casualty_limit>0</casualty_limit>
      <premium>5000.05</premium>
      <policy_premium>5000.05</policy_premium>
    </eligible_insurer>
  </eligible_insurers>
  <revenue_rec_date>01/01/2006</revenue_rec_date>
</filing>
</filings>

```

## 6.9 Multiple Eligible Insurers and Ineligible Insurers

Below is a sample XML file that contains a filing with five eligible insurers and three ineligible insurers. Please note the following.

- The “customer\_id” field is required for each filing.
- The **Total of Filing Premiums** in the File Header section must be the total premium for eligible and ineligible insurers.
- The maximum number of eligible insurers is ten.
- If there are any ineligible insurers, the tag **Explanation\_for\_1606A** must be included in the file.
- The maximum number of ineligible insurers is three.
- The name of each ineligible insurer must be provided.

```
<?xml version="1.0" ?>
<filings>
  <filing_header>
    <login>jane.doe@agencyname.com</login>
    <password>abcd1234</password>
    <filing_version>1</filing_version>
    <number_of_filings>1</number_of_filings>
    <total_of_filing_premiums>1111111.10</total_of_filing_premiums>
  </filing_header>
  <filing type="new" xml_tran_id="1">
    <customer_id>0753</customer_id>
    <filing_type_id>1</filing_type_id>
    <policy_number>XMLExample-MultipleInsurers6</policy_number>
    <individual_licensee_number>56142</individual_licensee_number>
    <effective_date>01/01/2006</effective_date>
    <expiration_date>01/01/2007</expiration_date>
    <type_of_coverage>29</type_of_coverage>
    <description_of_insured_operation>21</description_of_insured_operation>
    <insured_name>John Smith</insured_name>
    <location_of_risk>211 Welsh Pool Road</location_of_risk>
    <city>Exton</city>
    <state>PA</state>
    <zipcode>19341</zipcode>
    <multistate_risk>0</multistate_risk>
    <eligible_insurers>
      <eligible_insurer>
        <org_id>48123</org_id>
        <property_limit>1000</property_limit>
        <casualty_limit>1000</casualty_limit>
        <premium>100</premium>
        <policy_premium>100</policy_premium>
      </eligible_insurer>
      <eligible_insurer>
        <org_id>10512</org_id>
        <property_limit>10000</property_limit>
        <casualty_limit>10000</casualty_limit>
        <premium>1000</premium>
        <policy_premium>1000</policy_premium>
      </eligible_insurer>
      <eligible_insurer>

```

```

        <org_id>10513</org_id>
        <property_limit>100000</property_limit>
        <casualty_limit>100000</casualty_limit>
        <premium>10000</premium>
        <policy_premium>10000</policy_premium>
    </eligible_insurer>
    <eligible_insurer>
        <org_id>39908</org_id>
        <property_limit>1000000</property_limit>
        <casualty_limit>1000000</casualty_limit>
        <premium>100000</premium>
        <policy_premium>100000</policy_premium>
    </eligible_insurer>
    <eligible_insurer>
        <org_id>40659</org_id>
        <property_limit>10000000</property_limit>
        <casualty_limit>10000000</casualty_limit>
        <premium>1000000</premium>
        <policy_premium>1000000</policy_premium>
    </eligible_insurer>
</eligible_insurers>
<explanation_for_1606A>This text explains why non-admitted were
used</explanation_for_1606A>
<ineligible_insurers>
    <ineligible_insurer>
        <car_name>Insurance Company A</car_name>
        <property_limit>10</property_limit>
        <casualty_limit>10</casualty_limit>
        <premium>10</premium>
        <policy_premium>10</policy_premium>
    </ineligible_insurer>
    <ineligible_insurer>
        <car_name>Insurance Company B</car_name>
        <property_limit>1</property_limit>
        <casualty_limit>1</casualty_limit>
        <premium>1.00</premium>
        <policy_premium>1.00</policy_premium>
    </ineligible_insurer>
    <ineligible_insurer>
        <car_name>Insurance Company C</car_name>
        <property_limit>2</property_limit>
        <casualty_limit>2</casualty_limit>
        <premium>0.10</premium>
        <policy_premium>0.10</policy_premium>
    </ineligible_insurer>
</ineligible_insurers>
<revenue_rec_date>01/01/2006</revenue_rec_date>
<pr_image_filename>Test1609-1.pdf</pr_image_filename>
</filing>
</filings>

```

Below is the Eligible Insurer portion of the filing after it was successfully imported.

MULTI-STATE RISK						
Does the policy cover risks in the Commonwealth of Pennsylvania plus one or more other state or territory? <input type="radio"/> Yes <input checked="" type="radio"/> No						
ELIGIBLE INSURERS		Add Another Insurer		Remove Last Insurer		
	Eligible Insurer Number	Eligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	48123	ACE EUROPEAN GROU	\$ 1,000	\$ 1,000	\$ 100.00	\$ 100.00
2	10512	ADMIRAL INSURANCE C	\$ 10,000	\$ 10,000	\$ 1,000.00	\$ 1,000.00
3	10513	ADRIATIC INSURANCE C	\$ 100,000	\$ 100,000	\$ 10,000.00	\$ 10,000.00
4	39908	ALEA LONDON LIMITED	\$ 1,000,000	\$ 1,000,000	\$ 100,000.00	\$ 100,000.00
5	40659	TORUS SPECIALTY INSL	\$ 10,000,000	\$ 10,000,000	\$ 1,000,000.00	\$ 1,000,000.00
Total from Eligible Insurers			\$ 11,111,000	\$ 11,111,000	\$ 1,111,100.00	\$ 1,111,100.00

Below is the Ineligible Insurer portion of the filing after it was successfully imported.

	Ineligible Insurer	Property Limit	Casualty Limit	PA Premium	Policy Premium
1	INSURANCE COMPANY A	\$ 10	\$ 10	\$ 10.00	\$ 10.00
2	INSURANCE COMPANY B	\$ 1	\$ 1	\$ 1.00	\$ 1.00
3	INSURANCE COMPANY C	\$ 2	\$ 2	\$ 0.10	\$ 0.10
Total from Eligible and Ineligible Insurers		\$ 11,111,013	\$ 11,111,013	\$ 1,111,111.10	\$ 1,111,111.10
<a href="#">Full explanation</a> of why the risk could not be placed with admitted or eligible surplus lines insurers					
THIS TEXT EXPLAINS WHY NON-ADMITTED WERE USED					

## 7 TYPE OF COVERAGE (KIND)

kind_id	kind_name	active
0	Not Indicated	N
2	Fire/EC/All Risk - PROP	Y
3	Difference In Conditions - PROP	Y
4	Auto Physical Damage/Private Pass >60k - PROP	Y
5	Auto Physical Damage/Commercial >60k - PROP	Y
6	Aircraft Phys Damage (Hull/Cargo) - PROP	Y
7	Watercraft Physical Damage/Hull - PROP	Y
8	Ocean Marine (Hull/Cargo) - PROP	Y
9	Inland Marine - PROP	Y
10	General Liability - CAS	Y
11	Asbestos Abatement Liability - CAS	Y
12	Lead Abatement Liability - CAS	Y
13	Lead Liability - CAS	Y
14	Hazardous Waste Site Mitigation Liab. - CAS	Y
15	Hazardous Waste Disposal Site Liab. - CAS	Y
16	Nuclear Energy Liability - CAS	Y
17	Employer Practices Liability - CAS	Y
18	Product Liability - CAS	Y
19	Professional Liab. (E&O/Malpractice) - CAS	Y
20	Directors and Officers Liability - CAS	Y
21	Public Officials Liability - CAS	Y
22	Liquor Law Liability (Monoline) - CAS/EXP	Y
23	Aircraft Liability (Monoline) - CAS	Y

kind_id	kind_name	active
24	Watercraft Liability - CAS	Y
25	Ocean Marine (Protection/Indemnity) - CAS	Y
26	Environmental Impairment Liability - CAS	Y
27	Fidelity/Crime - CAS	Y
28	Special Coverage (K and R) - CAS/EXP	Y
29	Umbrella or Excess Liab. Follow Form - CAS	Y
30	Railroad Liability - CAS/EXP	Y
31	Homeowners - PROP/CAS	Y
32	BOP/SMP - PROP/CAS	Y
33	Auto Physical Damage/Private Passenger - PROP	Y
34	Auto Physical Damage/Commercial - PROP	Y
35	Excess Auto Liability/Private Passenger - CAS	Y
36	Excess Auto Liability/Commercial - CAS	Y
37	Earthquake (Monoline) - PROP	Y
38	Flood (Non N.F.I.P.) - PROP/EXP	Y
39	Primary Auto Liability/Commercial - CAS	Y
40	Garage Liability - CAS	Y
41	Garage Physical Damage - PROP	Y
42	Accident & Health - CAS	Y
43	Animal Mortality - PROP	Y
44	Credit - CAS	Y
45	Builders Risk - PROP	Y
46	Crop - PROP	Y
47	Products - Recall - PROP	Y
48	Business Interruption - PROP	Y
49	Boiler And Machinery - PROP	Y
50	Unemployment Compensation - CAS	Y
51	Excess Workers Compensation - CAS	Y
52	Excess Medical Plan Coverage - CAS	Y
53	Garage Package - PROP/CAS	Y
54	Political Action Committee Liability - CAS	Y
55	Law Enforcement Liability - CAS	Y
56	Hacker Coverage - PROP	Y
57	Demolition Contractors Liability - CAS/EXP	Y
58	Security Professional - CAS/EXP	Y
59	Patent Infringement - CAS	Y
60	Sexual Molestation/Other - CAS	Y
61	Hole In One - PROP	Y
62	Motor Cargo - PROP	Y
63	Railroad Physical Damage/Cargo - PROP/EXP	Y
64	Airport Liability - CAS	Y
65	Mortgage Impairment - PROP	Y
66	Day Care Liab (Inc. Sex Abuse) - CAS/EXP	N
67	Hacker Package - PROP/CAS	Y
68	Hacker Security Liability - CAS	Y
69	Warehouseman Legal Liability - PROP	Y
999	Not Listed	N
1001	Warranty Coverage - CAS	Y
1010	Nursing Home Liability - CAS/EXP	Y



kind_id	kind_name	active
1011	Terrorism Liability - CAS	Y
1012	Terrorism Physical Damage - PROP	Y
1013	Terrorism Combination - PROP/CAS	Y
1014	Financial Guarantee - PROP	Y
1015	Taxicab Liability - CAS/EXP	Y
1016	Medical Malpractice Liability - CAS/EXP	Y
1017	Real-Estate Env. Impair. Coverage - CAS/EXP	Y
1018	Business Owners - PROP/CAS	Y
1019	Commercial Auto - CAS	Y
1020	Commercial Inland Marine- PROP	Y
1021	Commercial Property - PROP	Y
1022	Commercial Umbrella - CAS	Y
1023	Cyber Security Coverage - PROP/CAS	Y
1024	Dwelling Liab. (Incl. Person. Umbrella) - CAS	Y
1025	Dwelling Program - PROP	Y
1026	E&O Liability - CAS	n
1027	E-Commerce/Cyber/Media - CAS	Y
1028	Equipment Breakdown - PROP	Y
1029	Event Cancellation - PROP	Y
1030	Farm Owners - PROP/CAS	Y
1031	Financial Institutions - CAS	Y
1032	Personal Auto - Private Passenger - CAS	Y
1033	Personal Inland Marine - PROP	Y
1034	Professional Liability - CAS	n
1035	Watercraft - PROP/CAS	Y
1036	Crane Rental Liability	y
1037	Crop Dusters – Aircraft Liability - CAS/EXP	Y
1038	Crop Dusters – Hull Only - PROP/EXP	Y
1039	Crane&Rigging Contractor –Phys Damage–CAS/EXP	Y
1040	Fuel & Explosive Hauler – Liability – CAS/EXP	Y
1041	Fuel & Explosive Hauler – Physical – PROP/EXP	Y
1042	Hazardous Waste Haulers – Liability – CAS/EXP	Y
1043	Hazardous Waste Haulers – Phys. - PROP/EXP	Y
1044	Hazardous Waste Storage/Disposal – CAS/EXP	Y
1045	Crane&Rigging Contractor – Liability -CAS/EXP	Y
1046	Product Liability – Aircraft/Parts – CAS/EXP	Y
1047	Product Liability – Auto/Parts – CAS/EXP	Y
1048	Product Liability – Farm/Ind. Equip. –CAS/EXP	Y
1049	Product Liability – Firearms – CAS/EXP	Y
1050	Product Liability – Medical Equip. – CAS/EXP	Y
1051	Product Liability – Petrochemicals – CAS/EXP	Y
1052	Product Liability – Pharmaceuticals – CAS/EXP	Y
1053	Product Recall – Aircraft/Parts – PROP/EXP	Y
1054	Product Recall – Auto/Parts – PROP/EXP	Y
1055	Product Recall – Farm/Ind. Equip. – PROP/EXP	Y
1056	Product Recall – Firearms – PROP/EXP	Y
1057	Product Recall – Medical Equipment – PROP/EXP	Y
1058	Product Recall – Petrochemicals – PROP/EXP	Y
1059	Product Recall – Pharmaceuticals – PROP/EXP	Y

kind_id	kind_name	active
1060	Comm. Auto Phy. Dam/Comm. Ex. Auto Liab P/C	Y
1061	Bridge and Tunnel Contractors Liab. – CAS/EXP	Y
1062	Guide and Outfitters – Liab. Only – CAS/EXP	Y
1063	Cyber Security Coverage - 1st Party - PROP	Y
1064	Cyber Security Coverage - 3rd Party - CAS	Y
1065	Pest Control (Exterminators) Liab. CAS/EXP	Y
1066	Tattoo Parlors Liability - CAS/EXP	N
1067	Misc. E & O or Prof. Liability - CAS/EXP	Y
1069	Paint – Coating Manufacturers Liab. – CAS/EXP	Y
1071	Pollution Liab/Environ. Impair. Cov.– CAS/EXP	Y

## 8 DESCRIPTION OF INSURED'S OPERATION (CLASS)

class_id	class_name	active
5	Manufacturing - Automotive	Y
6	Mining/Drilling	Y
9	Manufacturing - Petrochemical	Y
10	Manufacturing - Pharmaceutical	Y
11	Government	Y
12	Charitable Institution	Y
13	Personal Lines - Other	Y
14	Contracting - Chemical Spray/Drift - Export	Y
15	Contracting - Demolition	Y
16	Environmental	Y
17	Service - Miscellaneous	Y
18	Manufacturing - Explosives	Y
19	Manufacturing - Miscellaneous	Y
20	Commercial Truck - Miscellaneous	Y
21	Commercial Truck - Explosive Haulers	Y
22	Armored Car Service	Y
23	Marine	Y
24	Railroad - Inclu. Consultants - Export	Y
25	Real Estate Commercial	Y
26	Utilities	Y
27	Amusements - Miscellaneous	Y
28	Carnival Rides	Y
29	Amusement Parks/Devices - Export	Y
30	Auto Racing/Race Tracks	Y
31	Golf Courses/Driving Ranges	Y
32	Midget Autos/Go Carts	Y
33	Animal Rides - Export	Y
34	Rodeos/Horse Shows	Y
35	Balloon Rides - Hot Air/Gas	Y
36	Recreational/Sporting Events - Export	Y
37	Guide/Lodge/Outfitters	Y
38	Horseback Riding Establishment	Y
39	Hunting Clubs - Export	Y
40	Special Short - Term Events - Export	Y

<b>class_id</b>	<b>class_name</b>	<b>active</b>
41	Skating Rink/SkateBoard Park	Y
42	Ski Resort - Owners/Operators	Y
43	Theatrical Presentations - Export	Y
44	Financial Institution	Y
45	Vacant Properties - Export	Y
46	Dwellings - Tenant Occupied	Y
47	Animal (all classes)	Y
48	Professional - Architects	Y
49	Professional - Engineers	Y
50	Medical - Nursing Home	Y
51	Medical - Day Care	Y
52	Professional - Accountants	Y
53	Professional - Attorneys	Y
54	Professional - Educators	Y
55	Health Club/Gym	Y
56	Gas/Oil Dealer	Y
57	Medical - Home Health Service	Y
58	Manufacturing - Ladder/Scaffold	Y
59	Medical - Social/Human Services	Y
60	Stadium/Arenas	Y
61	Boat Rentals	Y
62	Aviation	Y
63	Agriculture	Y
64	Medical - Hospitals	Y
65	Medical - Doctors	Y
66	Medical - Dentists	Y
67	Medical - Clinics	Y
68	Medical - Blood Banks (Including Organ)	Y
69	Professional - Insurance Agent/Broker	Y
70	Personal Lines - Automotive	Y
71	Manufacturing - Steel or Aluminum	Y
72	Manufacturing - Foods & Edibles	Y
73	Commercial Truck - Petro Haulers	Y
74	Commercial Truck - Hazardous Waste	Y
75	Automotive - Dealer	Y
76	Automotive - Repair/Service	Y
77	Contracting - Alarm/Sprinkler	Y
78	Contracting - House Movers	Y
79	Contracting - Electrical	Y
80	Contracting - Roofing	Y
81	Contracting - Plumbing	Y
82	Contracting - HVAC	Y
83	Contracting - Painting	Y
84	Contracting - Lead Remediation	Y
85	Contracting - Hazardous Waste	Y
86	Contracting - Asbestos	Y
87	Swimming Pools/Clubs	Y
88	Automotive - Miscellaneous	Y
89	Medical - Miscellaneous	Y

<b>class_id</b>	<b>class_name</b>	<b>active</b>
90	Restaurant	Y
91	Bar/Saloon	Y
92	Barber/Beauty Salon	Y
93	Retail Store	Y
94	Habitational Properties - Hotel/Motel/Inn	Y
95	Societies/Clubs	Y
96	Jeweler	Y
97	Furrier	Y
98	Fine Arts Dealer/Galleries/Museums	Y
99	Contracting - Miscellaneous	Y
100	Contracting - Carpenter	Y
101	Professional - Schools/Colleges	Y
102	Professional - Police Department	Y
103	Airports/FBO - Export	Y
104	Service - Security/Detective/Patrol - Export	Y
105	Professional - Miscellaneous	Y
0	Not Indicated	N
999	Not Listed	N
1002	Anonymous (K&R) - Export	Y
1003	Automotive - Livery	Y
1004	Churches	Y
1006	Commercial Truck - Trash & Waste Removal	Y
1017	Habitational Properties - Condos/Co-ops/H.O. Assn.	Y
1010	Habitational Properties - Apartments	Y
1011	Professional - Property Inspector	Y
1012	Service - Janitorial and Cleaning	Y
1013	Service - Laundromats/Dry Cleaning	Y
1014	Contracting - Landscaping/Tree-Trim/Snow Removal	Y
1016	Night Clubs	Y
1018	Logging and Sawmills	Y
1019	Service - Catering	Y
1020	Welding	Y
1022	Contracting - Ground Applicators Chemical	Y
1023	Camps/Camp Grounds	Y
1024	Trailer Park	Y
1025	Personal Lines - Homeowners	Y
1026	Habitational Properties - Boarding House	Y
1027	Contracting - Excavation	Y
1028	Warehousing/Distribution/Self-Storage	Y
1029	Contracting - Cable/Satellite Installation	Y
1030	Contracting - Concrete Construction	Y
1031	Contracting - Drywall	Y
1032	Contracting - Exterminator	Y
1033	Contracting - Floor/Wall Covering Installation	Y
1034	Contracting - Masonry	Y
1035	Contracting - Rigging	Y
1036	Contracting - Swimming Pool Installation	Y
1037	Daycare Centers incl. Sexual Abuse Cov. - Export	Y
1038	Exhibitions/Expositions	Y

class_id	class_name	active
1039	Funeral Home	Y
1040	Manufacturing - Scientific/Medical Equipment	Y
1041	Medical - Personal Care	Y
1042	Professional - Financial Managers	Y
1043	Professional - Real Estate	Y
1044	Professional - Staffing Agency	Y
1045	Radio/TV Towers	Y
1046	Supermarket	Y
1047	Technology	Y
1048	Firework Sales/Manufacturing-Export	Y
1049	Tattoo Parlors - Export	Y

## 9 XML INTERFACE ERRORS

The Electronic Filing System has three types of error checking.

- User Interface Errors: these are web page errors detected immediately upon entry. For example, if an incorrect date is entered (1/32/2009) the web page will immediately reject the entry.
- XML Interface Errors: these are XML Import data errors detected during processing of the XML text file.
- Validation Errors: these are invalid logic errors. Please refer to the appendix in the [Procedures Manual](#) for a list.

Below is the list of XML Interface Errors.

XML Errors List (Non-Validation)	
xml_data	unable to parse xml data
xml_data	unable to parse xml file [xml_file.PostedFile.FileName]
xml_data	XML file was not uploaded!
xml_data	Login information for [filing_check.GetLoginId()] was not valid
xml_data	User [filing_check.GetLoginId()] does not have permission to file via XML
xml_data	Filing_header information was not valid
image_file	Unable to unzip images file
image_file	Images file must be a .zip file
xml_tran_id	An xml_tran_id was not supplied
xml_tran_id	A duplicate xml_tran_id was supplied
psla_id	A psla_id was not supplied
psla_id	Unable to find policy with PSLA ID [curr_aff_id]
<any field>	Invalid data type for field, expecting [schema_mapping.destination_field_type]
kind_text	Could not find match for text: [affidavit.Affidavit[0].kind_text]
class_text	Could not find match for text: [affidavit.Affidavit[0].class_text]
sll_indv_id	Could not find SLL Individual ID for [affidavit.Affidavit[0].sll_indv_lic_num]
sll_indv_id	No Individual License number was entered