

PRIVATE CARRIER DATA ORDER FORM

This file lists all effective insurance policies filed with the PUC for private carriers. The file is in standard ASCII (American Standard Code for Information Interchange), semicolon delimited format, consisting of the following information:

- Carrier ID Number
- Carrier DBA Name
- Attention Name
- Mailing address including county and zip codes
- Carrier phone number (where available)
- Carrier type (F=property; P=Proprietary; FP=both property and proprietary)
- Insurance Company NAIC Number (a printout will be included to match the NAIC number to the insurance company).
- Insurance Policy Type
- Insurance Policy Number
- Effective Date of Policy (in YYYYMMDD format)
- Surplus line number (a printout will be included to match the surplus line number to the name of the broker)

COST: \$500.00 PROCESSING FEE IS NON-REFUNDABLE

[The Data will be provided on a 3.5" (1.44 MB High Density Disk)]

Mail this form with your check or money order (payable to the PUC) to:

**California Public Utilities Commission
Rail Safety and Carriers Division**
Attention: Suong Le, Area 2-D (415) 703-1216
505 Van Ness Avenue
San Francisco, CA 94102

Please print or type the following:

Company Name : _____

Attention: _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____