ACORD LOSS SETTLEMENT - FOR USE WITH DWG 1						
PRODUCER		APPLICANT'S NAME AND MAILING ADDRESS (Include county & ZIP)  FEIN OR SOC SEC #:				
		COMPANY	ACCOUNT NUMBER			
CODE:	SUBCODE:					
AGENCY CUSTOMER I	D	POLICY NUMBER		NEW RNWL	EFFECTIVE DATE	EXPIRATION DATE
I acknowledge that in accordance with Act 850 of 1991 enacting R.S. 22:695 the insurance policy for which I have made application contains the following provisions and method of loss computation:  Loss Settlement. Covered property losses are settled at actual cash value at the time of loss but no more than the amount required to repair or replace the damaged property.						
A	Applicant's Signature		Date _			
F	Producer's Signature					
ACODD 60 LA /4	(00)				ACORD CORD	ODATION 4004

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