

NIC Insurance Filings Web Service Specification

Version 2.1
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Introduction

This document describes the web service for NIC Insurance Filings, formerly known as NOR MCInfo. It allows users to transmit and obtain filing data via a SOAP web service.

At a high-level, insurance company systems integrating with NIC Insurance Filings use the insertFilings method to transmit insurance filing information to NIC Insurance Filings for automatic forwarding to state agencies for review.

Next, the getFiling method is called and retrieves filing data. Insurance companies can also use the getFilingPDF method to retrieve the associated PDF document that has been generated in the system for the filing.

The third method in this document, searchFilings, searches for filings using various criteria.

Operation	Parameters	Return Value	Contract
Insert Filing	All data fields for the selected form type.	Filing ID Error, if applicable	If data meets all validation rules, then NIC Insurance Filings will forward the submitted information as a Filing Object to the state for review.
Get Filing	Policy No or Filing ID	Filing Object. Includes all filing data for the Filing ID.	Returns one filing at a time.
Get Filing PDF	Filing ID and State Name	Filing PDF Object	Returns one filing PDF at a time.
Search Filings	Filing Date, which can be limited by Filing Status and/or Notification ID	Array of Filing Objects matching the Date / Date - status / or NID Number.	Can be used for historical filing lookups for all results that match the input criteria.

Web Service Setup Process

Before web service development can take place, the insurance company must complete an agreement to register for an account. Insurer, MGA, and Filing Agent accounts all may use the web service API.

1. NIC Insurance Filings sets up web service access in the system's test environment and enables insurance administrator capabilities.
 - a. Accessing the test environment may require adjustments to your firewalls. Consult your network team for assistance.
2. NIC Insurance Filings shares Web Service Definition Language (WSDL) specification with the insurance company IT group. The WSDL, sample SOAP data, and data definitions are available for each web service method in the following pages of this document. NIC Insurance Filings supports SOAP version 1.1.
3. The insurance company IT group uses the WSDL to develop a web service client to access the NIC Insurance Filings web service. The web service client also delivers the data to the insurance company's back-end system.
 - a. The insurance company develops and tests the web service client using test credentials and sample filing data, provided by NIC Insurance Filings, and is available via the web service.
 - b. When the insurance company's testing is complete, NIC Insurance Filings walks the insurance account administrator through a simple setup to start using the system web service operation in production. Web service will involve use of credentials (user name and password) designated specifically for data communications between NIC Insurance Filings and the insurance company system.
 - c. The insurance company web service submits filings and receives status updates from NIC Insurance Filings automatically. The status updates are then applied in the insurance company's back-end system automatically.

Initial Approach Details

- Web service is currently available for filing California forms MCP 65 and MCP 66 to the California Department of Motor Vehicles. Web service options will be added for more forms and participating states in the coming months. Email support@nicinsurancefilings.com if you are interested in discussing the schedule for upcoming additions.
- The web service is available 24/7, except for maintenance windows that typically occur over the weekend and last a few hours.

NIC Insurance Filings: insertFiling Method

This document provides the NIC Insurance Filings web service method and data content for the Insert Filings web service.

WSDL: <https://mc-vapp-tst.cdc.nicusa.com/norstdataservice/searchReportData?wsdl>

Soap Request:

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/" xmlns:ser="http://server.fromjava">
```

```
<soapenv:Header/>
```

```
<soapenv:Body>
```

```
<ser:insertFiling>
```

```
<ser:filingType>
```

```
<ser:filingId></ser:filingId>
```

```
<ser:policyNo></ser:policyNo>
```

```
<ser:stateId>CA</ser:stateId>
```

```
<ser:filer></ser:filer>
```

```
<ser:insurerNo></ser:insurerNo>
```

```
<ser:usdot></ser:usdot>
```

```
<ser:motorCarrierCompany>Bob</ser:motorCarrierCompany>
```

```
<ser:motorCarrierDBA></ser:motorCarrierDBA>
```

```
<ser:stateMCId>12345</ser:stateMCId>
```

```
<ser:formDesc></ser:formDesc>
```

```
<ser:status></ser:status>
```

```
<ser:formType>Form DMV 65 MCP (For CA Only)</ser:formType>
```

```
<ser:mcCompAddr>
```

```
<ser:addr1>Address</ser:addr1>
```

```
<ser:addr2></ser:addr2>
```

<ser:city>City</ser:city>
<ser:state>CA</ser:state>
<ser:zip>12345</ser:zip>
<ser:country></ser:country>
</ser:mcCompAddr>
<ser:effectiveDate></ser:effectiveDate>
<ser:expiryDate></ser:expiryDate>
<ser:filingDate></ser:filingDate>
<ser:agencyAcceptanceDate></ser:agencyAcceptanceDate>
<ser:agencyRejectionDate></ser:agencyRejectionDate>
<ser:cancellationDate></ser:cancellationDate>
<ser:rejectReason></ser:rejectReason>
<ser:cancelReason></ser:cancelReason>
<ser:reinstate></ser:reinstate>
<ser:fhwa></ser:fhwa>
<ser:filingNotes></ser:filingNotes>
<ser:insuranceCompanyName>Insurance Company</ser:insuranceCompanyName>
<ser:insDBA></ser:insDBA>
<ser:insuranceCompanyAddress>
<ser:addr1></ser:addr1>
<ser:addr2></ser:addr2>
<ser:city></ser:city>
<ser:state></ser:state>
<ser:zip></ser:zip>
<ser:country></ser:country>
</ser:insuranceCompanyAddress>
<ser:insurancePhone></ser:insurancePhone>
<ser:insurancePhoneExt></ser:insurancePhoneExt>
<ser:insuranceCSRPhone></ser:insuranceCSRPhone>

<ser:insuranceCSRPhoneExt></ser:insuranceCSRPhoneExt>
<ser:insuranceAgentId></ser:insuranceAgentId>
<ser:stateAgencyName></ser:stateAgencyName>
<ser:paymentMethod></ser:paymentMethod>
<ser:markedPendingDate></ser:markedPendingDate>
<ser:acceptanceComments></ser:acceptanceComments>
<ser:pendingComments></ser:pendingComments>
<ser:generalComments></ser:generalComments>
<ser:stateNotes></ser:stateNotes>
<ser:naic>12345</ser:naic>
<ser:timestamp></ser:timestamp>
<ser:pdfKey></ser:pdfKey>
<ser:authorizedSignatory>
 <ser:name>MG</ser:name>
 <ser:phAddr>
 <ser:addr1></ser:addr1>
 <ser:addr2></ser:addr2>
 <ser:city></ser:city>
 <ser:state></ser:state>
 <ser:zip></ser:zip>
 <ser:country></ser:country>
 </ser:phAddr>
 <ser:phone></ser:phone>
 <ser:phoneExt></ser:phoneExt>
 <ser:email></ser:email>
</ser:authorizedSignatory>
<ser:form>
 <ser:cancelCargo></ser:cancelCargo>
 <ser:cancelBIPD></ser:cancelBIPD>

<ser:underLyingLimit></ser:underLyingLimit>

<ser:liabilityLimit></ser:liabilityLimit>

</ser:form>

<ser:formCA65>

<ser:priLiability>Y</ser:priLiability>

<ser:priLiaPolicyNumber>CA65P</ser:priLiaPolicyNumber>

<ser:priLiaEffectiveDate>08/08/2020</ser:priLiaEffectiveDate>

<ser:priLiaCoverageLimit>EQUAL</ser:priLiaCoverageLimit>

<ser:priLiaCombinedSingleLimit></ser:priLiaCombinedSingleLimit>

<ser:priLiaBodilyInjuryOrDeathOnePerson>1</ser:priLiaBodilyInjuryOrDeathOnePerson>

<ser:priLiaBodilyInjuryOrDeathGroup>1</ser:priLiaBodilyInjuryOrDeathGroup>

<ser:priLiaPropertyDamage>1</ser:priLiaPropertyDamage>

<ser:exclLiability>Y</ser:exclLiability>

<ser:exclLiaPolicyNumber>CA65E</ser:exclLiaPolicyNumber>

<ser:exclLiaEffectiveDate>08/09/2020</ser:exclLiaEffectiveDate>

<ser:exclLiaCoverageLimit>ATORABOVE</ser:exclLiaCoverageLimit>

<ser:exclLiaCombinedSingleLimit></ser:exclLiaCombinedSingleLimit>

<ser:exclLiaCombinedSingleLimitInExcessOf></ser:exclLiaCombinedSingleLimitInExcessOf>

<ser:exclLiaBodilyInjuryOrDeathOnePerson>1</ser:exclLiaBodilyInjuryOrDeathOnePerson>

<ser:exclLiaBodilyInjuryOrDeathOnePersonInExcessOf>1</ser:exclLiaBodilyInjuryOrDeathOnePersonInExcessOf>

<ser:exclLiaBodilyInjuryOrDeathGroup>1</ser:exclLiaBodilyInjuryOrDeathGroup>

<ser:exclLiaBodilyInjuryOrDeathGroupInExcessOf>1</ser:exclLiaBodilyInjuryOrDeathGroupInExcessOf>

<ser:exclLiaPropertyDamage>1</ser:exclLiaPropertyDamage>

<ser:exclLiaPropertyDamageInExcessOf>1</ser:exclLiaPropertyDamageInExcessOf>

<ser:wcStatutory>Y</ser:wcStatutory>

<ser:wcStatutoryPolicyNumber>CA65W</ser:wcStatutoryPolicyNumber>

<ser:wcStatutoryEffectiveDate>08/10/2020</ser:wcStatutoryEffectiveDate>

</ser:formCA65>

<ser:formCA66>


```
<ser:originalCertificateIssuedDate></ser:originalCertificateIssuedDate>

<ser:insuranceType></ser:insuranceType>

<ser:cancellationDate></ser:cancellationDate>

</ser:formCA66>

</ser:filingType>

</ser:insertFiling>

</soapenv:Body>

</soapenv:Envelope>
```

Soap Response:

```
<S:Envelope xmlns:S="http://schemas.xmlsoap.org/soap/envelope/">

  <S:Body>

    <insertFilingResponse xmlns="http://server.fromjava">

      <return>823730</return>

    </insertFilingResponse>

  </S:Body>

</S:Envelope>
```

Data Definition

The tables below contain the data elements for the insertFiling method. Other fields not mentioned here are populated by NIC Insurance Filings. FilingID numbers are system generated, and state agencies provide status update information upon review of filings, including new status, notes from the state agency, and filing review dates. This information is retrievable using the getFiling method.

Request:

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
policyNo	The policy number provided by the insurance agent during the filing submission	1	25	String	Required for Form DMV 66 MCP (For CA Only)
stateId	State abbreviation	2	2	String	
naic	NAIC number associated with the insurance company.	1	50	String	
insurerNo	State specific ID for an insurer	0	18	String	
usdot	U.S. DOT number	0	8	String	
motorCarrierCompany	Motor carrier company name	1	50	String	
motorCarrierDBA	Motor carrier doing business as name	0	120	String	
stateMCId	Motor carrier ID	1	20	String	Required on all submissions to the CA DMV.
formType	Type of the form being submitted	1	50	String	<p>Fixed set of values:</p> <p>Currently, insurance companies can only insert or get filing information for two forms: Form DMV 65 MCP (For CA Only) Form DMV 66 MCP (For CA Only)</p> <p>More forms will become available soon, including: Form E Form H Form K</p>

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
					Form EH BMC-91 BMC-91X BMC-34 BMC35 SR-22 SR-23 SR-26
mcCompAddr	Motor carrier company address	See table below titled "Address"	See table below titled "Address"	Complex XML element	The sub element details are defined in table below titled " Address "
effectiveDate	The date the policy becomes effective	10	10	String	Format: MM/DD/YYYY Required for Form DMV 66 MCP (For CA Only)
reinstate	Reinstates the policy	0	1	String	Optional. Data is not required for submission. Possible values are 'Y', 'N', or a space (no data)
fhwa	The Federal Motor Carrier Safety Administration (formerly Federal Highway Administration) number	0	8	String	Optional. Data is not required for submission.
filingNotes	Notes provided by the filing agent	0	2000	String	Optional. Data is not required for submission
insuranceCompanyName	The insurance company's name	1	120	String	
insDBA	The insurance doing business as name	0	120	String	Optional. Data is not required for submission
insuranceCompanyAddress	The insurance company address	-NA-	-NA-	Complex XML element	N/A – Information will be populated by NIC Insurance Filings upon submission.

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
insurancePhone	The insurance company phone	0	10	String	Optional. Data is not required for submission.
authorizedSignatory	The authorized signatory for the insurance company	See table below titled "Signatory"	See table below titled "Signatory"	Complex XML element	The sub-element details are defined in the table titled " Signatory "
Form	The form specific details for this filing	See table below titled "Form"	See table below titled "Form"	Complex XML element	The sub-element details are defined in the table titled " Form "
FormCA65	The form specific details for this filing	See table below titled "FormCA65"	See table below titled "FormCA65"	Complex XML element	The sub-element details are defined in the table titled " FormCA65 "
FormCA66	The form specific details for this filing	See table below titled "FormCA66"	See table below titled "FormCA66"	Complex XML element	The sub-element details are defined in the table titled " FormCA66 "

Signatory					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
name	The name of the signatory	1	64	String	
phAddr	The signatory's address	-NA-	-NA-	Complex XML element	N/A – Information will be populated by NIC Insurance Filings upon submission.

Address					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
addr1	Address Line 1	1	64	String	
addr2	Address Line 2	0	64	String	
City	City	1	64	String	
state	State code	2	2	String	
Zip	Zip code	5	10	String	Format : #####-####
Country	Country code	0	3	String	

Form CA65						
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules	
Primary Liability elements						
priLiability	Primary Liability selected	1	1	String	Fixed set of values: Y or N	

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules
					<p>'Y' implies Primary Liability is selected</p> <p>'N' implies Primary Liability is not selected.</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must be entered as 'Y' (exLiability or wcStatutory)</p>
prLiaPolicyNumber	Primary Liability Policy Number	1	25	String	<p>Business Rules:</p> <p>Data required if prLiability = Y</p>
prLiaEffectiveDate	Primary Liability Effective Date	10	10	String	<p>Format: MM/DD/YYYY</p> <p>Business Rules:</p> <p>Data required if prLiability = Y</p>
prLiaCoverageLimit	Primary Liability Coverage Limit	5	5	String	<p>Fixed set of values:</p> <p>BELOW or EQUAL</p> <p>'BELOW' implies Coverage below statutory minimum limits</p> <p>'EQUAL' implies Coverage equal to or exceeding statutory minimum limits</p> <p>Required if Primary Liability is selected</p> <p>Business Rules:</p> <p>Data required if prLiability = Y</p>
prLiaCombinedSingleLimit	Primary Liability Combined Single Limit	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data is required if prLiability = Y and no data was provided for prLiaBodilyInjuryOrDeathOnePers</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules
					on, priLiaBodilyInjuryOrDeathGroup, and priLiaPropertyDamage If this field is used, data cannot be submitted for priLiaBodilyInjuryOrDeathOnePers on, priLiaBodilyInjuryOrDeathGroup, or priLiaPropertyDamage
priLiaBodilyInjuryOrDeathOnePerson	Primary Liability Bodily Injury Or Death(One Person)	1	8	Double	Business Rules: Values are multiplied by 1,000 in the actual filing Data is required if prLiability = Y and no data was provided for priLiaCombinedSingleLimit
priLiaBodilyInjuryOrDeathGroup	Primary Liability Bodily Injury Or Death(Grou p)	1	8	Double	Business Rules: Values are multiplied by 1,000 in the actual filing Data is required if prLiability = Y and no data was provided for priLiaCombinedSingleLimit
priLiaPropertyDamage	Primary Liability Property Damage	1	8	Double	Business Rules: Values are multiplied by 1,000 in the actual filing Data is required if prLiability = Y and no data was provided for priLiaCombinedSingleLimit
Excess Liability elements					
exclLiability	Excess Liability selected	1	1	String	Fixed set of values: Y or N 'Y' implies Excess Liability is selected

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules
					<p>'N' implies Excess Liability is not selected</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must be entered as 'Y' (priLiability or wcStatutory)</p>
excLiaPolicyNumber	Excess Liability Policy Number	1	25	String	<p>Business Rules:</p> <p>Data is required if excLiability = Y</p>
excLiaEffectiveDate	Excess Liability Effective Date	10	10	String	<p>Format: MM/DD/YYYY</p> <p>Business Rules:</p> <p>Data is required if excLiability = Y</p>
excLiaCoverageLimit	Excess Liability Coverage Limit	5	5	String	<p>Fixed set of values:</p> <p>ATORABOVE or BETWEEN</p> <p>'ATORABOVE' implies Coverage provided at or above statutory minimum limits</p> <p>'BETWEEN' implies Coverage between statutory minimum coverage and statutory minimum limits</p> <p>Required if Excess Liability is selected</p> <p>Business Rules:</p> <p>Data is required if excLiability = Y</p>
excLiaCombinedSingleLimit	Excess Liability Combined Single Limit	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if excLiability = Y and excLiaCombinedSingleLimitInExcessOf are completed</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules
excliaCombinedSingleLimitInExcessOf	Excess Liability Combined Single Limit In Excess Of	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and excliaCombinedSingleLimit are completed</p>
excliaBodilyInjuryOrDeathOnePerson	Excess Liability Bodily Injury Or Death(One Person)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excliaBodilyInjuryOrDeathOnePersonIn ExcessOf	Excess Liability Bodily Injury Or Death In Excess Of(One Person)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excliaBodilyInjuryOrDeathGroup	Excess Liability Bodily Injury Or Death(Grou p)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excliaBodilyInjuryOrDeathGroupInExce ssOf	Excess Liability Bodily Injury Or Death In Excess Of(Group)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excliaPropertyDamage	Excess Liability Property Damage	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information and Business Rules
excliaPropertyDamageInExcessOf	Excess Liability Property Damage In Excess Of	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000</p> <p>Data is required if exclLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
Workers' Compensation (WC) Statutory Limits fields					
wcStatutory	WC Statutory Limits selected	1	1	String	<p>Fixed set of values:</p> <p>Y or N</p> <p>'Y' implies WC Statutory Limits is selected</p> <p>'N' implies WC Statutory Limits is not selected</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must be entered as 'Y' (priLiability or exclLiability)</p>
wcStatutoryPolicyNumber	WC Statutory Policy Number	1	25	String	<p>Business Rules:</p> <p>Data is required if wcStatutory = Y</p>
wcStatutoryEffectiveDate	WC Statutory Effective Date	10	10	String	<p>Format: MM/DD/YYYY</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must be entered as 'Y' (priLiability or exclLiability)</p>

Form CA66					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
originalCertificateIssuedDate	The date the original certificate was issued	10	10	String	Format: MM/DD/YYYY
insuranceType	The type of insurance	1	1	String	Fixed set of values: B, E, or W 'B' implies Bodily Injury Liability and Property Damage Liability Insurance 'E' implies Excess Liability Insurance. 'W' implies Workers' Compensation Insurance
cancellationDate	The date of cancellation	10	10	String	Format: MM/DD/YYYY

insertFiling Error Messages

Below is a list of error messages that you might receive when attempting to submit a filing, and actions to remediate errors and submit filings successfully.

Error Message	Source	Remediation
public static final String ERRMSGDBASE_INSERTADDRESS = "Database Issue: Insert Address"	Database	Address any other errors and attempt your filing again. If you continue to receive this error, please contact NIC Insurance Filings for assistance.
public static final String ERRMSGDBASE_INSERTFILING = "Database Issue: Insert Filing";	Database	Address any other errors and attempt your filing again. If you continue to receive this error, please contact NIC Insurance Filings for assistance.
public static final String ERRMSGDBASE_INSERTFORMCA65 = "Database Issue: Insert Form CA65";	Database	Address any other errors and attempt your filing again. If you continue to receive this error, please contact NIC Insurance Filings for assistance.
public static final String ERRMSGDBASE_INSERTFORMCA66 = "Database Issue: Insert Form CA66";	Database	Address any other errors and attempt your filing again. If you continue to receive this error, please contact NIC Insurance Filings for assistance.
Filing - Authorized Signatory Name cannot be blank	Any Form Submission	Enter/populate and submit an authorized signer name.
Filing - Authorized Signatory Name no exact match found	Any Form Submission	The data provided does not exactly match one authorized signatory name in your company's account. The data might match multiple authorized signers, or no authorized signers. Consult your company admin or NIC Insurance Filings support for assistance.
Filing - Authorized Signatory Name not found	Any Form Submission	This error usually indicates an issue related to the ID number associated with the data provided. Contact NIC Insurance Filings support for assistance.
Filing cannot be blank	Any Form Submission	Enter/populate and submit filing information.
Filing - Effective Date cannot be blank	Any Form Submission	Enter/populate and submit an effective date (MM/DD/YYYY).
Filing - Effective Date format should be mm/dd/yyyy	Any Form Submission	Enter/populate and submit an effective date in the correct format (MM/DD/YYYY).
Currently supported forms are Form DMV 65 MCP (For CA Only) and Form DMV 66 MCP (For CA Only)	Any Form Submission	Only submit data for forms CA 65 or CA 66. Enter form type data exactly as shown below: <ul style="list-style-type: none"> • Form DMV 65 MCP (For CA Only) • Form DMV 66 MCP (For CA Only)
Filing – form type cannot be blank	Any Form Submission	Enter/populate and submit form data. At this time, only CA 65 and CA 66 are supported.

Error Message	Source	Remediation
Filing - Insurance Company Name cannot be blank	Any Form Submission	Enter/populate and submit name of insurance company responsible for this filing. Consult your company admin or NIC Insurance Filings to review filing companies registered to your company.
Filing – Insurance Company Name no exact match found	Any Form Submission	The data provided does not exactly match one insurance company name associated with your company’s account. The data might match multiple company names, or no company names. Consult your company admin or NIC Insurance Filings support for assistance.
Filing – Insurance Company Name not found	Any Form Submission	This error usually indicates an issue related to the ID number associated with the data provided. Contact NIC Insurance Filings support for assistance.
Filing - Motor Carrier Company Name cannot be blank	Any Form Submission	Enter/populate and submit data for the motor carrier company name that should appear on the form.
Filing - Motor Carrier State MC Id cannot be blank	Any Form Submission	Enter/populate and submit data for Motor Carrier State MC ID. This number is required for California. Look up California state ID numbers at https://www.dmv.ca.gov/portal/vehicle-industry-services/motor-carrier-services-mcs/motor-carrier-permits/active-motor-carriers/ .
Filing - Motor Carrier Company Address - Address1 cannot be blank	Any Form Submission	Enter/populate and submit motor carrier company address information that should appear on the form.
Filing - Motor Carrier Company Address - City cannot be blank	Any Form Submission	Enter/populate and submit motor carrier company city information that should appear on the form.
Filing - Motor Carrier Company Address - State cannot be blank	Any Form Submission	Enter/populate and submit motor carrier company state/province information that should appear on the form.
Filing - Motor Carrier Company Address - Zip cannot be blank	Any Form Submission	Enter/populate and submit motor carrier company zip/postal code information that should appear on the form.
Filing - NAIC Number cannot be blank	Any Form Submission	Enter/populate and submit NAIC number for filing insurance company. Consult your company admin or NIC Insurance Filings for assistance.
Filing - Policy Number cannot be blank	Any Form Submission	Enter/populate and submit policy number information that should appear on the form.
Filing - State Agency Name multiple found	Any Form Submission	Adjust data to differentiate from other state agencies. Consult NIC Insurance Filings for assistance.
Filing - State Agency Name not found	Any Form Submission	Confirm that the correct stateID was entered. If you continue to receive this error, consult NIC Insurance Filings for assistance.
Filing - State Id cannot be blank	Any Form Submission	Enter/populate and submit state Id information.

Error Message	Source	Remediation
Filing - Form CA65 cannot be blank	CA 65 Form Filing	Enter/populate and submit data required for a CA 65 form.
Filing - Form CA65 - Excess Liability Coverage Limit Must Be BETWEEN or ATORABOVE	CA 65 Form Filing	If excLiability = Y, data for excLiaCoverageLimit is required. <ul style="list-style-type: none"> Enter and submit 'N' for excLiability field; OR Enter and submit 'ATORABOVE' or 'BETWEEN' for excLiaCoverageLimit
Filing - Form CA65 - Excess Liability Coverage Limit cannot be blank	CA 65 Form Filing	If excLiability = Y, data for excLiaCoverageLimit is required. <ul style="list-style-type: none"> Enter and submit 'N' for excLiability field; OR Enter and submit 'ATORABOVE' or 'BETWEEN' for excLiaCoverageLimit
Filing - Form CA65 - Excess Liability Effective Date cannot be blank	CA 65 Form Filing	If excLiability = Y, data for excLiaEffectiveDate is required. Enter and submit date.
Filing - Form CA65 - Excess Liability Effective Date format should be mm/dd/yyyy	CA 65 Form Filing	Enter/populate and submit excLiaEffectiveDate in MM/DD/YYYY format.
For The Excess Liability Limits EITHER (the Combined Single Limit AND Combined Single Limit In Excess Of) OR (the Bodily Injury Or Death One Person AND the Bodily Injury Or Death One Person In Excess Of AND the Bodily Injury Or Death Group AND the Bodily Injury Or Death Group In Excess Of AND the Property Damage And the Property Damage In Excess Of) Must Be Entered	CA 65 Form Filing	Provide one of the following data combinations: <ul style="list-style-type: none"> excLiaCombinedSingleLimit and excLiaCombinedSingleLimitInExcessOf; OR excLiaBodilyInjuryOrDeathOnePerson, excLiaBodilyInjuryOrDeathOnePersonInExcessOf, excLiaBodilyInjuryOrDeathGroup, excLiaBodilyInjuryOrDeathGroupInExcessOf, excLiaPropertyDamage, and excLiaPropertyDamageInExcessOf
Filing - Form CA65 - Excess Liability Policy Number cannot be blank	CA 65 Form Filing	If excLiability = Y, data for excLiaPolicyNumber is required. Enter and submit policy number.
Filing - Form CA65 - Primary Liability, Excess Liability or WC Statutory Must Be Selected.	CA 65 Form Filing	A liability type is required for CA 65. Enter 'Y' for priLiability, excLiability, or wcStatutory.
Filing - Form CA65 - Primary Liability Coverage Limit Must Be BELOW or EQUAL	CA 65 Form Filing	If priLiability = Y, data for priLiaCoverageLimit is required. <ul style="list-style-type: none"> Enter and submit 'N' for priLiability field; OR Enter and submit 'ATORABOVE' or 'EQUAL' for priLiaCoverageLimit
Filing - Form CA65 - Primary Liability Coverage Limit cannot be blank	CA 65 Form Filing	If priLiability = Y, data for priLiaCoverageLimit is required. <ul style="list-style-type: none"> Enter and submit 'N' for priLiability field; OR Enter and submit 'ATORABOVE' or 'EQUAL' for priLiaCoverageLimit
Filing - Form CA65 - Primary Liability Effective Date cannot be blank	CA 65 Form Filing	If priLiability = Y, data for priLiaEffectiveDate is required. Enter/populate and submit date.

Error Message	Source	Remediation
Filing - Form CA65 - Primary Liability Effective Date format should be mm/dd/yyyy	CA 65 Form Filing	Enter/populate and submit priLiaEffectiveDate in MM/DD/YYYY format.
For The Primary Liability Limits EITHER (the Combined Single Limit) OR (the Bodily Injury Or Death One Person AND the Bodily Injury Or Death Group AND the Property Damage) Must Be Entered	CA 65 Form Filing	Provide one of the following data combinations: <ul style="list-style-type: none"> priLiaCombinedSingleLimit OR priLiaBodilyInjuryOrDeathOnePerson, priLiaBodilyInjuryOrDeathGroup, and priLiaPropertyDamage
Filing - Form CA65 - Primary Liability Policy Number cannot be blank	CA 65 Form Filing	If priLiability = Y, data for priLiaPolicyNumber is required. Enter and submit policy number.
Filing - Form CA65 - WC Statutory Limits Policy Number cannot be blank	CA 65 Form Filing	If wcStatutory = Y, data for wcStatutoryPolicyNumber is required. Enter and submit policy number.
Filing - Form CA65 - WC Statutory Limits Effective Date cannot be blank	CA 65 Form Filing	If wcStatutory = Y, data for wcStatutoryEffectiveDate is required. Enter and submit date.
Filing - Form CA65 - WC Statutory Limits Effective Date format should be mm/dd/yyyy	CA 65 Form Filing	Enter/populate and submit wcStatutoryEffectiveDate in MM/DD/YYYY format.
Filing - Form CA66 cannot be blank	CA 66 Form Filing	Enter/populate and submit data required for a CA 66 form.
Filing - Form CA66 - Cancellation Date cannot be blank	CA 66 Form Filing	Enter/populate and submit cancellationDate in MM/DD/YYYY format.
Filing - Form CA66 - Cancellation Date format should be mm/dd/yyyy	CA 66 Form Filing	Enter/populate and submit cancellationDate in MM/DD/YYYY format.
Filing - Form CA66 - Original Certificate Issued Date cannot be blank	CA 66 Form Filing	Enter/populate and submit OriginalCertificateIssuedDate in MM/DD/YYYY format.
Filing - Form CA66 - Original Certificate Issued Date format should be mm/dd/yyyy	CA 66 Form Filing	Enter/populate and submit OriginalCertificateIssuedDate in MM/DD/YYYY format.
Filing - Form CA66 - Insurance Type cannot be blank	CA 66 Form Filing	InsuranceType is a required field. Enter and submit insuranceType = B, E, or W.
Filing - Form CA66 - Insurance Type Must Be B, E or W	CA 66 Form Filing	Enter/populate and submit insuranceType = B, E, or W. <ul style="list-style-type: none"> 'B' implies Bodily Injury Liability and Property Damage Liability Insurance. 'E' implies Excess Liability Insurance. 'W' implies Workers' Compensation Insurance.

NIC Insurance Filings: getFiling Method

This document provides the NIC Insurance Filings web service method and data content for the Get Filing web service. The code samples below reference one form type (Form E), but this method allows users to pull data for any form types and elements supported by NIC Insurance Filings.

WSDL: <https://mc-vapp-tst.cdc.nicusa.com/norstdataservice/searchReportData?wsdl>

Soap Request:

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/" xmlns:ser="http://server.fromjava/">
  <soapenv:Header/>
  <soapenv:Body>
    <ser:getFiling>
      <!--Optional-->
      <filingId>806683</filingId>
      <!--Optional-->
      <policyNo></policyNo>
    </ser:getFiling>
  </soapenv:Body>
</soapenv:Envelope>
```

Soap Response:

```
<S:Envelope xmlns:S="http://schemas.xmlsoap.org/soap/envelope/">
  <S:Body>
    <ns2:getFilingResponse xmlns:ns2="http://server.fromjava/">
      <return>
        <filingId>806683</filingId>
        <policyNo>WSUPDATETEST-3</policyNo>
        <stateId>IL</stateId>
        <filer>apiusr7406</filer>
      </return>
    </ns2:getFilingResponse>
  </S:Body>
</S:Envelope>
```


<insurerNo>556677</insurerNo>
<usdot>1234</usdot>
<motorCarrierCompany>Slow Movers</motorCarrierCompany>
<motorCarrierDBA>Very Fast Movers</motorCarrierDBA>
<stateMCId>33445566</stateMCId>
<status>REJ</status>
<formType>Form E</formType>
<mcCompAddr>
 <addr1>Smart Lane</addr1>
 <city>Salty</city>
 <state>HI</state>
 <zip>23456</zip>
 <country>US</country>
</mcCompAddr>
<effectiveDate>2012-09-19T00:00:00-04:00</effectiveDate>
<filingDate>2012-07-03T00:00:00-04:00</filingDate>
<agencyRejectionDate>2012-07-03T00:00:00-04:00</agencyRejectionDate>
<rejectReason>Finally Rejected</rejectReason>
<reinstate>Y</reinstate>
<fhwa>4567</fhwa>
<filingNotes>Please approve soon</filingNotes>
<insuranceCompanyName>Adriatic Insurance Company</insuranceCompanyName>
<insDBA>Adriatic Insurance Company</insDBA>
<insuranceCompanyAddress>
 <addr1>3501 N. Causeway Blvd Suite 1000</addr1>
 <city>Metairie</city>
 <state>LA</state>
 <zip>70002</zip>
</insuranceCompanyAddress>
<insurancePhone>5048388100</insurancePhone>
<stateAgencyName>Illinois Commerce Commission</stateAgencyName>

```
<markedPendingDate>2012-07-03T00:00:00-04:00</markedPendingDate>
<pendingComments>Testing pending action</pendingComments>
<generalComments>Finally Rejected</generalComments>
<authorizedSignatory>
  <name>Pat Wilson</name>
  <phAddr>
    <addr1>3501 N. Causeway Blvd. Suite 1000</addr1>
    <city>Metairie</city>
    <state>LA</state>
    <zip>70002</zip>
  </phAddr>
</authorizedSignatory>
<form>
  <underLyingLimit>1.0</underLyingLimit>
  <liabilityLimit>2.0</liabilityLimit>
</form>
</return>
</ns2:getFilingResponse>
</S:Body>
</S:Envelope>
```

Data Definition

Request:

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
filingId	NIC Insurance Filings system defined unique ID for each filing	1	9999999999	INTEGER	Optional parameter. Not required if policyNo is provided.
policyNo	The policy number provided by insurance agent while submitting the filing through the NIC Insurance Filings system	1	25	String	Optional parameter. Not required if filingId is provided.

Note: Either filingId or policyNo must be provided. **The search criteria fields build a Boolean “AND” query not an “OR” query.**

Response: Returns only one filing object matching the given search criteria. If no matching filing objects are found, then the web service a fault is generated.

All of the data elements below are available via the getFiling method; however, the insurance company might create a getFiling call that only requests a subset of these elements. The getFiling responses will omit elements for which no data is contained in the identified filing.

Note:

1. The Min Value/Size column indicates the lower value range of the numeric data types. The minimum string length indicates the lower value range in case of the String data type.
2. For the String data type, a minimum size of zero indicates that the field can be empty.

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
filingId	NIC Insurance Filings system defined unique ID for each filing	1	9999999999	Integer	
policyNo	The policy number provided by the insurance agent during the filing submission	1	25	String	

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
stateId	State abbreviation	2	2	String	
filer	The submitting insurance agent	1	20	String	<p>If the filing was submitted via the web service, this data will contain the web service admin user information</p> <p>If the filing was submitted manually using the NIC Insurance Filings app, then this field will include the user name of the filer</p>
insurerNo	State specific ID for an insurer	0	18	String	This field is optional for most states and may not contain data
usdot	U.S. DOT number	0	8	String	This field is optional for most states and may not contain data
motorCarrierCompany	Motor carrier company name	1	50	String	
motorCarrierDBA	Motor carrier doing business as name	0	120	String	This field is optional and may not contain data
stateMCId	Motor carrier ID	0	20	String	This field is optional for most states and may not contain data
status	Indicates the processing status of filing in the NIC Insurance Filings system	3	3	String	<p>Fixed set of values:</p> <p>REC: New Filing PEN: Pending REJ: Rejected by state ACC: Accepted/Approved by state</p> <p>'REC' implies that the filing has been recently submitted by insurer.</p> <p>'PEN' implies the state user has moved the filing to a pending queue.</p> <p>In either of these statuses, the filing is open for acceptance or rejection by the state.</p>
formType	Type of the form submitted	1	50	String	<p>Fixed set of values:</p> <p>Currently, insurance companies can only insert or get filing information for two forms:</p>

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
					CA MCP 65 (CA DMV only) CA MCP 66 (CA DMV only) More forms will become available soon, including: Form E Form H Form K Form EH BMC-91 BMC-91X BMC-34 BMC35 SR-22 SR-23 SR-26
mcCompAddr	Motor carrier company address	-NA-	-NA-	Complex XML element	The sub element details are defined in table below titled "Address"
effectiveDate	The date the policy becomes effective	10	10	String	Format: MM/DD/YYYY Alternative effective date fields apply for CA 65 and CA 66. See form-specific tables.
filingDate	The date the form was filed	10	10	String	Format: MM/DD/YYYY
agencyRejectionDate	The date the policy was rejected by the state, if applicable	10	10	String	Format: MM/DD/YYYY
rejectReason	A description of the reason the policy was rejected, if applicable. This is entered in the NIC Insurance Filings system by the state user	1	255	String	
reinstate	Reinstates the policy	0	1	String	Optional. Data is not required for submission. Possible values are 'Y', 'N' or a space (no data)

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
Fhwa	The Federal Motor Carrier Safety Administration (formerly Federal Highway Administration) number	0	8	String	
filingNotes	Notes provided by the filing agent	0	2000	String	
insuranceCompanyName	The insurance company's name	1	120	String	
insDBA	The insurance doing business as name	1	120	String	
insuranceCompanyAddress	The insurance company address	-NA-	-NA-	Complex XML element	The sub element details are defined in table below titled "Address"
insurancePhone	The insurance company phone	1	10	String	
stateAgencyName	The name of the state agency to which the policy was filed. This is relevant to only those states that have more than one agency with whom a user can file	1	80	String	
markedPendingDate	The date when the filing was marked as pending by the state	10	10	String	Format: MM/DD/YYYY
pendingComments	Comments entered by the state in the NIC Insurance Filings system when this filing was marked "Pending"	1	255	String	
agencyAcceptanceDate	The date the policy was rejected by the state	10	10	String	Format: MM/DD/YYYY

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
acceptanceComments	Comments entered by the state in the NIC Insurance Filings system when this filing was accepted	1	255	String	
pdfKey	An encrypted string that is sent as a request parameter to download a PDF				Please contact NIC Insurance Filings Support at support@nicinsurancefilings.com for additional details on http download of filing PDFs.
authorizedSignatory	The authorized signatory for the insurance company	-NA-	-NA-	Complex XML element	The sub-element details are defined in the table titled " Signatory "
Form	The form specific details for this filing	-NA-	-NA-	Complex XML element	The sub-element details are defined in the " Form " tables below

Signatory					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
name	The name of the signatory	1	64	String	
phAddr	The signatory's address	-NA-	-NA-	Complex XML element	The sub-element details are defined in the table titled " Address "

Address					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
addr1	Address Line 1	1	64	String	
addr2	Address Line 2	0	64	String	
City	City	1	64	String	
state	State code	2	2	String	
Zip	Zip code	5	10	String	Format : #####-####
Country	Country code	0	3	String	

Form CA65						
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules	
Primary Liability elements						
priLiability	Primary Liability selected	1	1	String	Fixed set of values: Y or N 'Y' implies Primary Liability is selected 'N' implies Primary Liability is not selected. Business Rules: If 'N,' then data for another type of liability must exist (Excess Liability or WC Statutory Limits)	
priLiaPolicyNumber	Primary Liability Policy Number	1	25	String	Business Rules: Required if prLiability = Y	
priLiaEffectiveDate	Primary Liability	10	10	String	Format: MM/DD/YYYY Business Rules:	

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
	Effective Date				Required if prLiability = Y
prLiaCoverageLimit	Primary Liability Coverage Limit	5	5	String	<p>Fixed set of values:</p> <p>BELOW or EQUAL</p> <p>'BELOW' implies Coverage below statutory minimum limits</p> <p>'EQUAL' implies Coverage equal to or exceeding statutory minimum limits</p> <p>Business Rules:</p> <p>Required if prLiability = Y</p>
prLiaCombinedSingleLimit	Primary Liability Combined Single Limit	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will exist if prLiability = Y and no data was provided for prLiaBodilyInjuryOrDeathOnePerson, prLiaBodilyInjuryOrDeathGroup, and prLiaPropertyDamage</p> <p>If this field is used, data will not be present for prLiaBodilyInjuryOrDeathOnePerson, prLiaBodilyInjuryOrDeathGroup, or prLiaPropertyDamage</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
priLiaBodilyInjuryOrDeathOnePerson	Primary Liability Bodily Injury Or Death(One Person)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will exist if prLiability = Y and no data was provided for priLiaCombinedSingleLimit</p>
priLiaBodilyInjuryOrDeathGroup	Primary Liability Bodily Injury Or Death(Grou p)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will exist if prLiability = Y and no data was provided for priLiaCombinedSingleLimit</p>
priLiaPropertyDamage	Primary Liability Property Damage	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will exist if prLiability = Y and no data was provided for priLiaCombinedSingleLimit</p>
Excess Liability elements					
exclLiability	Excess Liability selected	1	1	String	<p>Fixed set of values:</p> <p>Y or N</p> <p>'Y' implies Excess Liability is selected</p> <p>'N' implies Excess Liability is not selected</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must exist (Primary Liability or WC Statutory Limits)</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
excLiaPolicyNumber	Excess Liability Policy Number	1	25	String	Business Rules: Data will be present if excLiability = Y
excLiaEffectiveDate	Excess Liability Effective Date	10	10	String	Format: MM/DD/YYYY Business Rules: Data will be present if excLiability = Y
excLiaCoverageLimit	Excess Liability Coverage Limit	5	5	String	Fixed set of values: ATORABOVE or BETWEEN 'ATORABOVE' implies Coverage provided at or above statutory minimum limits 'BETWEEN' implies Coverage between statutory minimum coverage and statutory minimum limits Required if Excess Liability is selected Business Rules: Data will be present if excLiability = Y
excLiaCombinedSingleLimit	Excess Liability Combined Single Limit	1	8	Double	Business Rules: Values are multiplied by 1,000 Data will be present if excLiability = Y and excLiaCombinedSingleLimit InExcessOf is completed

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
excLiaCombinedSingleLimitInExcessOf	Excess Liability Combined Single Limit In Excess Of	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and excLiaCombinedSingleLimitInExcessOf is completed</p>
excLiaBodilyInjuryOrDeathOnePerson	Excess Liability Bodily Injury Or Death(One Person)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excLiaBodilyInjuryOrDeathOnePersonInExcessOf	Excess Liability Bodily Injury Or Death In Excess Of(One Person)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excLiaBodilyInjuryOrDeathGroup	Excess Liability Bodily Injury Or Death(Group)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>

Form CA65

Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
excLiaBodilyInjuryOrDeathGroupInExcessOf	Excess Liability Bodily Injury Or Death In Excess Of(Group)	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excLiaPropertyDamage	Excess Liability Property Damage	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
excLiaPropertyDamageInExcessOf	Excess Liability Property Damage In Excess Of	1	8	Double	<p>Business Rules:</p> <p>Values are multiplied by 1,000 in the actual filing</p> <p>Data will be present if excLiability = Y and all Bodily Injury and Property Damage fields are completed</p>
Workers Compensation (WC) Statutory Limit fields					
wcStatutory	WC Statutory Limits selected	1	1	String	<p>Fixed set of values:Y or N</p> <p>'Y' implies WC Statutory Limits is selected</p> <p>'N' implies WC Statutory Limits is not selected.</p> <p>Business Rules:</p> <p>If 'N,' then another type of liability must be selected</p>

Form CA65					
Element Name	Description/ Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Info and Business Rules
					(Primary Liability or Excess Liability)
wcStatutoryPolicyNumber	WC Statutory Policy Number	1	25	String	Business Rules: Data will be present if wcStatutory = Y
wcStatutoryEffectiveDate	WC Statutory Effective Date	10	10	String	Format: MM/DD/YYYY Business Rules: Data will be present if wcStatutory = Y

FormCA66					
Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
originalCertificateIssuedDate	The date the original certificate was issued	10	10	String	Format: MM/DD/YYYY
insuranceType	The type of insurance	1	1	String	Fixed set of values: B, E, or W 'B' implies Bodily Injury Liability and Property Damage Liability Insurance 'E' implies Excess Liability Insurance. 'W' implies Workers' Compensation Insurance
cancellationDate	The date of cancellation	10	10	String	Format: MM/DD/YYYY

Other considerations for the method:

1. The request is accompanied with an http header providing two values:
 - a. Username
 - b. Password

The credentials are defined in NIC Insurance Filings system. The user has the Insurance Admin role.

2. This method returns data for only one filing per request.

NIC Insurance Filings: getFilingPDF Method

This document provides the NIC Insurance Filings web service method and data content for the Get Filing PDF web service.

WSDL: <https://mc-vapp-tst.cdc.nicusa.com/norstdataservice/searchReportData?wsdl>

Soap Request:

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/" xmlns:ser="http://server.fromjava/">
  <soapenv:Header/>
  <soapenv:Body>
    <ser:getFilingPDF>
      <filingId>111111</filingId>
      <stateName>California</stateName>
    </ser:getFilingPDF>
  </soapenv:Body>
</soapenv:Envelope>
```

Soap Response:

```
<S:Envelope xmlns:S="http://schemas.xmlsoap.org/soap/envelope/">
  <S:Body>
    <getFilingPDFResponse xmlns="http://server.fromjava/">
      <return> JVBERi0xLjIKJBqLTAuMjIKJUdlbmVvYXRIZCB3aXRoIHQIDAuMjIKSIENvcHlyaWdodCAoQykgMTk5OC</return>
    </getFilingPDFResponse>
  </S:Body>
</S:Envelope>
```


Data Definition

Request:

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
filingId	NIC Insurance Filings system defined unique ID for each filing	1	9999999999	INTEGER	Required
stateName	The state the filing has been filed to	1	25	String	Required

Note: Both filingID and stateName must be provided. The search criteria fields build a Boolean “AND” query not an “OR” query.

Response: Returns only one PDF object matching the given search criteria. If no matching PDF objects are found, then a “No pdf matched the given criteria” message will be returned.

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
return	PDF String formatted as a base 64 binary.	1	none	String	

Other considerations for the method:

1. The request is accompanied with an http header providing two values:
 - a. Username
 - b. Password

The credentials are defined in NIC Insurance Filings system. The user has the Insurance Admin role.

2. This method returns data for only one PDF per request.

NIC Insurance Filings: searchFilings Method

This document provides the NIC Insurance Filings web service method and data content for the Search Filings web service. The code samples below reference one form type (Form E), but this method allows users to search for data for any form types and elements supported by NIC Insurance Filings.

WSDL: <https://mc-vapp-tst.cdc.nicusa.com/norstdataservice/searchReportData?wsdl>

Soap Request:

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/" xmlns:ser="http://server.fromjava/">
  <soapenv:Header/>
  <soapenv:Body>
    <ser:searchFilings>
      <!--Optional-->
      <filingDate></filingDate>
      <!--Optional-->
      <processingStatus></processingStatus>
      <!--Optional-->
      <wsNotificationId>61</wsNotificationId>
    </ser:searchFilings>
  </soapenv:Body>
</soapenv:Envelope>
```

Soap Response:

```
<S:Envelope xmlns:S="http://schemas.xmlsoap.org/soap/envelope/">
  <S:Body>
    <ns2:searchFilingsResponse xmlns:ns2="http://server.fromjava/">
      <return>
        <filingId>806683</filingId>
      </return>
    </ns2:searchFilingsResponse>
  </S:Body>
</S:Envelope>
```

<policyNo>WSUPDATETEST-3</policyNo>
<stateId>IL</stateId>
<filer>apiusr7406</filer>
<insurerNo>556677</insurerNo>
<usdot>1234</usdot>
<motorCarrierCompany>Slow Movers</motorCarrierCompany>
<motorCarrierDBA>Very Fast Movers</motorCarrierDBA>
<stateMCId>33445566</stateMCId>
<status>REJ</status>
<formType>Form E</formType>
<mcCompAddr>
 <addr1>Smart Lane</addr1>
 <city>Salty</city>
 <state>HI</state>
 <zip>23456</zip>
 <country>US</country>
</mcCompAddr>
<effectiveDate>2012-09-19T00:00:00-04:00</effectiveDate>
<filingDate>2012-07-03T00:00:00-04:00</filingDate>
<agencyRejectionDate>2012-07-03T00:00:00-04:00</agencyRejectionDate>
<rejectReason>Finally Rejected</rejectReason>
<reinstate>Y</reinstate>
<fhwa>4567</fhwa>
<filingNotes>Please approve soon</filingNotes>
<insuranceCompanyName>Adriatic Insurance Company</insuranceCompanyName>
<insDBA>Adriatic Insurance Company</insDBA>
<insuranceCompanyAddress>
 <addr1>3501 N. Causeway Blvd Suite 1000</addr1>
 <city>Metairie</city>
 <state>LA</state>
 <zip>70002</zip>

```
</insuranceCompanyAddress>
<insurancePhone>5048388100</insurancePhone>
<stateAgencyName>Illinois Commerce Commission</stateAgencyName>
<markedPendingDate>2012-07-03T00:00:00-04:00</markedPendingDate>
<pendingComments>Testing pending action</pendingComments>
<generalComments>Finally Rejected</generalComments>
<authorizedSignatory>
  <name>Pat Wilson</name>
  <phAddr>
    <addr1>3501 N. Causeway Blvd. Suite 1000</addr1>
    <city>Metairie</city>
    <state>LA</state>
    <zip>70002</zip>
  </phAddr>
</authorizedSignatory>
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Data Definition

Request:

The searchFilings method is currently designed to work with the criteria below. Please contact NIC Insurance Filings to discuss adding other search criteria options.

Element Name	Description/Purpose	Min Value/Size	Max Value/Size	Data Type	Additional Information
filingDate	The date the filing was submitted	0	10	String	Format: MM/DD/YYYY This is an optional parameter; however, it is required when the processingStatus has a value
processingStatus	Indicates the processing status of filing in the NIC Insurance Filings system	0	3	String	Fixed set of values: REC: New Filing PEN: Pending REJ: Rejected by state ACC: Accepted/Approved by state 'REC' implies that the filing has been recently submitted by insurer 'PEN' implies the state user has exclusively moved the filing to a pending queue In either of these statuses, the filing is open for acceptance or rejection by the state This is an optional parameter and must be accompanied by a valid value in the filingDate parameter

Note: The search criteria fields build a Boolean "AND" query not an "OR" query.

Response:

This method returns a list of filing objects. The XML structure of the filing object is defined in documentation for getFiling method.

Important:

1. The request is accompanied with an http header providing two values:
 - a. Username
 - b. Password

The credentials are defined in the NIC Insurance Filings system. The user has the Insurance Admin role.

2. This method returns an array of filings. The search criteria are either:
 - a. wsNotificationId and filingDate; or
 - b. processingStatus and filingDate.

Using the search criteria helps restrict the number of filings returned.