



**LOUISIANA DWELLING SUPPLEMENT  
LOSS SETTLEMENT - FOR USE WITH DWG 1**

PRODUCER     CODE: AGENCY CUSTOMER ID	APPLICANT'S NAME AND MAILING ADDRESS (Include county & ZIP)		FEIN OR SOCIAL SECURITY #		
	COMPANY		ACCOUNT NUMBER		
	SUBCODE:		POLICY NUMBER	<input type="checkbox"/> NEW <input type="checkbox"/> RNWL	EFFECTIVE 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 not more than the amount required to repair or replace the damaged property.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Producer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**LA PLANS DWG 9001 (10/95)**

ACORD 60 LA (4/98)

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