

**Maryland MVA Trading Partner Info Sheet**

|  |  |   |
|--|--|---|
| Company Name:  | NAIC Code:   | RETURN COMPLETED FORM TO:<br>Media Processing Unit<br>Maryland Motor Vehicle Administration<br>Insurance Compliance Division, Room 140<br>6601 Ritchie Highway, NE<br>Glen Burnie, MD 21062<br>410-768-7487 |
| Group Name:  |  |   |
| Maryland MVA Code/Self-Insurance Certificate Number: |  |   |
| Address 1:   |  |   |
| Address 2:   | Questions About Reporting, contact:<br>Media Processing Unit<br>Phone: 410-768-7487<br>Fax: 410-768-7073 |   |
| City, State, Zip Code:                               |  |   |
| Main Phone:  |  |   |

| Contact Type   | Contact Name | Email Address & Mailing Address if Different from Above | Phone Number | Reporting Method                            |
|--|--------------|---|--------------|---|
| Laws/Regulations & Bulletins                               |              |   |              | Choose One:<br>EDI<br>FTP<br>Diskette/Email |
| Business Processes<br>Issues Related to FR19 & FR19 Filing |              |   |              |   |
| Media Processing   |              |   |              |   |
| Media Processing<br>Personal Lines                         |              |   |              |   |
| Commercial Lines   |              |   |              |   |
| Telephone Verification of Insurance                        |              |   |              |   |

| EDI Coordinator | EDI Information (If Applicable) | EDI System Information |
|-----------------|---------------------------------|------------------------|
| Name:           | Hardware:                       | EDI Sender Qualifier:  |
| Address:        | Operating System:               | EDI Sender ID:         |
| Phone:          |                                 |                        |
| Fax:            | EDI Application and Version:    | Test EDI Sender ID:    |
| Email:          |                                 |                        |