(LOSS ADJUSTER DATA - TYPE 56) Format/Edits

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1100		_ 00			
1	Record Type	1	2	9(02)	Required. Must be 56.
2	Reporting Organization	3	2	X(02)	Required. Edit with RO/Company table.
3	Active Flag	5	1	X(01)	Required for all records.
					Must be:
					Y = Yes, Active
4	*	_	0	YZ (00)	N = No, Inactive.
4	Inactive Date	6	8	X(08)	If field $#3 = N$, then this field cannot be blank.
5	Filler	14	2	X(02)	Must be: MM/DD/YYYY format. Must be Spaces.
6	Reinsurance Year	16	4	9(04)	Must be 1999 for the 1999 the Reinsurance
O	Remsurance Tear	10	7)(U+)	Year.
7	Filler	20	1	X(01)	Must be Spaces.
8	Adjuster ID	21	9	X(09)	Required for all records. Must be left justified.
	·				Matched to adjuster ID code on 21 record.
9	Adjuster Last Name	30	20	X(20)	Required for all records. Last name of the
					adjuster. Must be left justified beginning in the
10		~0	4.0	77/10	first position.
10	Adjuster First Name	50	12	X(12)	First name of the adjuster. Must not be blank.
					Must be left justified beginning in first position.
11	Adjuster Middle Name	62	10	X(10)	Middle name of the loss adjuster. Must be left
	1 Tagasser 1 Tradere 1 Warre	02	,		justified beginning in first position.
12	Adjuster Suffix	72	5	X(05)	Name suffix of the loss adjuster (i.e. Sr, Jr,
					etc.) Must be left justified beginning in first
					position.
13	Adjuster Title	77	4	X(04)	Name title of the loss adjuster (i.e. Dr, Mr,
					etc.) Must be left justified beginning in first
14	Address State	81	2	X(02)	position. Required for all records. Must be valid alpha
14	Address State	01	2	$\Lambda(02)$	state abbreviation. If foreign country state
					enter "ZZ".
15	Filler	83	154	X(154)	Must be Spaces.
16	Social Security Number	237	9	9(09)	Required. Valid SSN for the Loss Adjuster.
				2(42)	Required for A/O expense reimbursement at
					annual settlement R&D-97-XXX.
17	Loss Adjuster Data	246	2	9(02)	Must be:
	Review Flag				00 = Not Selected for review.
					01 = Mandatory Spot Check
					02 = Mandatory Tolerance Spot Check
					03 = Tolerance Spot Check 04 = Random Spot Check
					05 = Discretionary Review
					55 Discretionary Review

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Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
18	Filler	248	87	X(87)	Must be Spaces.
19	SSN & ITS Chk Flg	335	8	X(08)	Internal Use. Postions 335 - 336 will contain the SSN validation flag and the remaining bytes will
20	Reserved - FSA Control Date	343	8	9(08)	contain the ITS error flags.

