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# New Jersey UMIS Program



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# New Jersey Uninsured Motorist Identification System (UMIS) Program

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# New Jersey Uninsured Motorist Identification System (UMIS) Program

## Overview

The New Jersey Uninsured Motorist Identification System (UMIS) program aims to reduce the number of uninsured vehicles on state roads, focusing on private passenger vehicles. The program is enforced by the New Jersey Department of Banking and Insurance (DOBI) and includes specific requirements for fleet policies of up to five vehicles used for business purposes.

## Contacts and Onboarding

- **Email:** [UMISBRMMVC@mvc.nj.gov](mailto:UMISBRMMVC@mvc.nj.gov)
- **Phone:** (609) 777-3894 | **Fax:** (609) 777-3741
- **Forms:** Complete and return forms to the New Jersey MVC. **Appendix E, G, and H** must be filled out to establish UMIS access and onboarding to the secure file transfer process.
  - **Download the forms here:**
    1. [Appendix E](#)
    2. [Appendix G](#)
    3. [Appendix H](#)
- **Testing:** MVC will establish testing protocols before companies go live.

Each underwriting company must use its unique 4-digit abstract code when submitting individual files. **Companies with no policy data for New Jersey must file a “No Activity Form” (Appendix F) and submit it to the UMIS hotline by the 7<sup>th</sup> of each month.** [Download the No Activity Form.](#)

## Monthly File Key Procedures

### 1. Monthly File Submission

- Insurance companies must submit new policies, cancellations, or “No Activity Forms” and endorsements by 4:00 PM ET on the 7th of each month (or the next business day if the 7th falls on a weekend). [Download the No Activity Form.](#)

### 2. Processing

- Files are logged and screened by the New Jersey Office of Information Technology (OIT).
  - **Critical errors** must be corrected and resubmitted.
  - **Non-critical errors** require updates to the insurer's database and should be resubmitted in next month's file for processing.

### 3. Validation

- Approved data undergoes a matching process, and Transaction Summary Reports and Monthly Error Reports are provided to insurers for review and updates.

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## 4. Enforcement

- The Motor Vehicle Commission (MVC) cross-checks potentially uninsured VINs against its records.
- Motorists with active registrations are notified to provide proof of insurance. Insurers may be contacted to confirm coverage.
- Insurance companies must adhere to Production Schedule deadlines to avoid penalties.

## Monthly Submissions

### Format and Data

- **Submission Method:** Data must be submitted via Movelt. Only one file per company is accepted per month.
- **Assigned Risk Pool Data:** If a servicing agent manages an assigned risk pool of drivers, this data must be merged with the regular submission before sending it to UMIS.
- **Record Requirements:**
  - A header and trailer record must be included, even if there is no data to report (see Appendix B & C).
  - Data must follow the 16-item format specified in [Appendix C- Monthly Submission Record Layout Description](#).
- **Deadlines:** Companies have 30 calendar days to report activity from the prior month to allow time for data compilation and reduce reinstatements.

### Header Records

- The header record identifies the company and the submission cycle.
- The date field must match the due date on the Production Schedule (7th of the month), even for resubmissions.
- See Appendix B for format and details.
- Sample HEADER submission: **HEADERN49041612260305202503072025**
- **Fields:**
  - “HEADER” begins in column 1.
  - File Type (“N” or “E”) column 7.
  - Company’s 4-digit Abstract Code ex:4904 (cols 8-11).
  - Time Stamp (cols 12-17): 16:12:26 (military time, EST).
  - Date Stamp (cols 18-25): 03052025 (ex: Date of file upload).
  - Cycle Due Date (cols 26-33): 03072025 (ex: March 7<sup>th</sup>, 2025).
  - Columns 34 – 200 are left blank.

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## Trailer Record:

- The Trailer Records identifies the end of the record submission.
- See Appendix C for format and details.
- Sample TRAILER submission: TRAILER490409100107022016000300000002762000002378
- **Fields:**
  - "TRAILER" begins at column 1.
  - Company Code (cols. 8–11): 4904. (Ex: 4-digit Abstract Code 4904).
  - Time Stamp (cols. 12–17): 09:10:01 (military time, EST).
  - Date Stamp (cols. 18–25): 07022016.
  - Total Records (cols. 26–33): 00030000.
  - New Policies (cols. 34–41): 00027620.
  - Cancelled Policies (cols. 42–49): 00002378.
  - Columns 50 – 200 are left blank.
  -

## Processing Overview

### 1. Effective Dates

- Files may include transactions with effective dates up to three months prior.
- Future-dated transactions are held in a pending file until valid for processing.

### 2. Matching Process

- Cancellation transactions (e.g., for non-payment) are matched against new policies.
- Vehicles with matched cancellations and new policies are considered insured.
- Unmatched cancellations with valid VINs are flagged as potentially uninsured.
- VIN corrections are performed using R.L. Polk's VINA package for vehicles from 1981 onward.

### 3. Post-Cycle Processing

- After each cycle:
  - MVC receives a list of potentially uninsured motorists.
  - DOBI receives company participation reports.
  - Insurance companies receive:
    - **Insurance Company Transaction Summary Report**
    - **Insurance Company Error Detail Report**

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## Insurance Company Reports

At the end of each monthly cycle, participating insurance companies receive two key reports:

### 1. Insurance Company Transaction Summary Report

This report provides a comprehensive summary of all transactions submitted by the company during the monthly cycle. It helps companies verify the accuracy of their submissions and track their performance in the program.

#### Report Contents:

- **Overview of Submitted Transactions:**
  - Total records submitted, categorized by:
    - **Cancellations Submitted:** Policies canceled during the reporting period.
    - **New Policies Submitted:** Newly added policies for insured motorists.
    - **Unknown Type Submitted:** Transactions with unidentified or incomplete data.
  - Year-to-date totals for each category accumulated from the first cycle of the calendar year.
  - Grand total records submitted (sum of all categories).
- **Overview of Rejected Transactions:**
  - Total records rejected, categorized by:
    - **Cancellations Rejected:** Policies canceled but flagged for errors.
    - **New Policies Rejected:** New policies with errors.
    - **Unknown Type Rejected:** Transactions with incomplete or invalid data.
  - Rejection totals for the current month and year-to-date.
- **Rejection Percentages:**
  - Calculated as the ratio of total records rejected to total records submitted for the current month and year-to-date.

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## 2. Insurance Company Error Detail Report

This report lists specific errors identified in the company's submitted records, providing detailed information to assist with corrections and future compliance.

### Report Contents:

- **Transaction Errors:**
  - A detailed list of records that encountered errors during the screening and processing stages.
  - For each record, the report includes:
    - **Policy Number:** The unique identifier for the insurance policy.
    - **Error Code and Description:** Specific error type (e.g., missing VIN, invalid transaction type).
    - **Vehicle Identification Number (VIN):** The VIN associated with the error.
    - **Driver License Number (DLN):** If applicable, the associated DLN.
    - **Transaction Type:** Whether the record was a **New Policy (N)** or **Cancellation (C)**.
    - **Effective or Cancellation Date:** The date associated with the transaction, if applicable.
- **Common Error Types:**
  - Missing or Invalid NJ Driver License Number (DLN).
  - Missing or Invalid VIN: VINs must be obtained directly from the vehicle or title document. Common issues include misreading handwritten VINs or incorrectly using the letter "O" instead of the number "0."
  - Missing Transaction Type:
    - **'N' (New Policy)** requires an Effective Date but no Cancellation Date.
    - **'C' (Cancellation)** requires a Cancellation Date but no Effective Date.
  - Invalid Dates: Missing or invalid Effective or Cancellation Dates.
  - Duplicate Transactions: Records submitted more than once during the current or prior cycle.

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- **Report Layout:**
  - Records are organized by:
    - Policy Number.
    - VIN.
    - Error Code.

## Actionable Steps for Insurance Companies

1. **Review Reports:** Both reports must be reviewed promptly after receipt.
2. **Correct Errors:**
  - Corrections should be made based on the details provided in the **Error Detail Report**.
  - Resubmit corrected files by the 12th of the month.
3. **Monitor Submission Performance:**
  - Use the **Transaction Summary Report** to track error rates and year-to-date progress.
4. **Address Data Management Issues:**
  - Investigate the root causes of recurring errors, such as formatting issues or data entry errors, to improve accuracy in future submissions.
  -

## Errors and Troubleshooting

### 1. File Errors

- Common reasons for file rejection:
  - Missing or invalid VIN.
  - Missing or invalid Driver License Number.
  - Missing transaction type.
  - Invalid type/date combinations:
    - **New Policy (N)** requires an Effective Date but no Cancellation Date.
    - **Cancellation (C)** requires a Cancellation Date but no Effective Date.

### 2. Reporting Errors

- Companies with errors must resubmit corrected files by the 12<sup>th</sup> of the month.
- Duplicate transactions are automatically dropped and do not require action.

# Appendix Items

## Appendix A: Glossary

- **Critical Error:** A data error on an insurance company's original submission, that prevents proper processing. It can be caused by inability to transfer or process a Movelt File, a bad date on the HEADER record, or key matching fields are missing on the individual data records (missing VIN, transaction type, or effective date).
- **DOBI:** Department of Banking and Insurance for the State of New Jersey.
- **NJMVC:** New Jersey Motor Vehicle Commission
- **Endorsement:** Any private passenger automobile addition/replacement to an existing policy.
- **Fleet Policy:** A policy insuring multiple private passenger vehicles for a business 5 or more taxis, limousines, etc.
- **Hit:** A VIN record submitted by an insurance company or servicing agent which matches the MVC vehicle registration.
- **Insurance Company Code:** The same 4-digit code assigned by the State of New Jersey for an insurance company's abstract requests. This ID code is a unique identification key per company in the UMIS system.
- **Monthly Process:** A special purpose matching by VIN of all insurance companies' new policies and cancellations within a particular month's effective dates.
- **Non-Critical Error:** After UMIS processing is complete, records that remain unmatched are checked for potential bad VIN or bad NJ Driver's License number that precluded a match. R. L. Polk's VIN EDIT package is used to validate the VIN number and records that fail are listed on the returned Error Report at month's end. These records should be followed up and corrected on the insurance company's database and resubmitted to eliminate these problems in future submissions. The 3 Non-Critical Errors include: Invalid VIN, Invalid Driver License Number and Duplicate Record; see prior sections for details.
- **OIT** – New Jersey's Office of Information Technology.
- **Servicing Agent:** Any person or organization duly designated by an insurance company to prepare, transmit or deliver records on behalf of that company.

# Appendix Items

## Appendix B - Monthly Submission Header Record Layout Description

Field	Field Name	Column	Type & Length	Description	Comments
1	Record Name	1	Alpha Numeric (6)	Must contain the word 'HEADER'	Indicates FIRST record in the file
2	File Type	7	Alpha Numeric (1)	'N' for a normal file submission 'E' for a corrected error file resubmission	
3	Insurance Company Code	8	numeric (4)	MVR Abstract code assigned by NJMVC.	
4	Time Stamp	12	numeric (6)	File creation time	HHMMSS
5	Date Stamp	18	numeric (8)	File creation date	MMDDYYYY
6	Cycle Due Date	26	numeric (8)	7th Day of production schedule.	MMDDYYYY
7	Filler	34	Alpha Numeric (167)		

# Appendix Items

## Appendix C - Monthly Submission Trailer Record Layout Description

Field #	Field Name	Start Column	Type & Length	Description	Comments
1	Record Name	1	alpha numeric (7)	Must contain the word "TRAILER"	To indicate the LAST record in the file
2	Insurance Company Code	8	numeric (4)	MVR Abstract code assigned by NJMVC for driver abstracts and same as code header record.	
3	Time Stamp	12	numeric (6)	File Creation Time	HHMMSS
4	Date Stamp	18	numeric (8)	File creation date	MMDDYYYY
5	Total Records Count	26	numeric (8)	The total number of records in the file including the header and trailer records.	
6	Total New Policies	34	numeric (8)	The total count of records with a transaction type of 'N' in the file	
7	Total Cancelled Policies	42	numeric (8)	The total count of records with a transaction type of 'C' in the file	
8	Filler	50	alpha numeric (151)	Space fill	

# Appendix Items

## Appendix D - Monthly Submission Record Layout Description

Field	Field Name	Start Column	Type/Length	Description	Comments
1	VIN	1	Alpha numeric (19)	If the vehicle manufacture year is 1981 or newer. This field must have 17 positions	Left justify
2	DLN/Corp Code	20	Alpha numeric (15)	Owner of vehicle or primary DLN.	Left justify
3	Make of Car	35	Alpha numeric (5)	National Crime Information Center (NCIC) standard or (ISO) standard vehicle make code	Left justify
4	Year of Car	40	numeric (4)	Vehicle model year	YYYY
5	Model of Car	44	Alpha numeric (5)	National Crime Information Center (NCIC) standard vehicle make code.	Left justify, Optional
6	Insurance Company Code	49	numeric (4)	Code assigned by NJMVC.	
7	Policy Owner Street Address	53	Alpha numeric (30)		Left justify
8	Policy Owner City	83	Alpha numeric (20)		Left justify
9	Policy owner State	103	Alpha numeric (2)		
10	Policy Owner Zip Code	105	Alpha numeric (9)	Zip Code of policy holder. 5 digits required but 9 digits preferred	Left justify. Last 4 digits must be filled with spaces if not 9 digits.
11	Transaction Type Code	114	Alpha numeric (1)	'C' for cancellations; 'N' if new policy	
12	Policy Effective Date	115	numeric (8)	The date the new policy became effective. Required for 'N' transactions only.	MMDDYYYY if noy 'N' trans, then must default to zeros
13	Policy Cancellation Date	123	numeric (8)	The date the policy was cancelled. Required for 'C' transaction type. Otherwise, zero fill instead	MMDDYYYY if not 'C' trans, then must default to zeros.
14	Date Stamp	131	numeric (8)	Format with the creation date/ date submitted	MMDDYYYY
15	Policy Number	139	Alpha numeric (30)	Insurance company's unique policy identification number. must fill with spaces if unused.	Left justify. Optional
16	Filler	169	Alpha Numeric (31)	Space Fill	

## Establishing UMIS Access

**Please provide the required information below to establish access for UMIS. Should you have any questions, please call the UMIS hotline at 609-777-3894 (fax: 609-777-3941) or email [umisbrmmvc@mvc.nj.gov](mailto:umisbrmmvc@mvc.nj.gov).**

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Attention: \_\_\_\_\_

Contact Name of Person Requesting Access: \_\_\_\_\_  
(if more than one name, please place it in the additional information section)

Insurance Company Contact Name: \_\_\_\_\_

Insurance Company Contact Phone Number: \_\_\_\_\_

Insurance Company Contact Email Address: \_\_\_\_\_

**OR**

Vendor Contact or Business Name: \_\_\_\_\_

Vendor Contact or Business Phone Number: \_\_\_\_\_  
(technical contact)

Vendor Contact or Business Email Address: \_\_\_\_\_  
(for file transfers)

Access Desired: \_\_\_\_\_

### Additional Contact Information

Name, Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_





## MVC MOVEit Testing Information

Please provide the required information below. Should you have any questions, please call the UMIS hotline at 609-777-3894 (fax: 609-777-3941) or email [umisbrmmvc@mvc.nj.gov](mailto:umisbrmmvc@mvc.nj.gov).

**ALL FIELDS ARE MANDATORY**

Company Name: \_\_\_\_\_

4-Digit Abstract Number: \_\_\_\_\_

3-Digit DOBI Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Mailing Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Individual's Contact Email Address: \_\_\_\_\_

(File Transfer Notifications) Group Email Address: \_\_\_\_\_

**Section Below to be Completed by your Technical Staff**

If transferring files to NJMVC, please provide the name of the file:

\_\_\_\_\_

(file type examples: filename.txt, filename.dat, etc.)

Please provide the number of records to be sent in TEST file: \_\_\_\_\_

Please provide a timeframe of when to expect the file: \_\_\_\_\_

(ex. 12am – 2pm, 2pm – 4pm)

**Please Check Only 1 Option Below**

Indicate if File Transfers will be (Manual)

Indicate if File Transfers will be (Automated using Service Account)

Via IP Address

Via Public Key

**NOTE: (\*Service Accounts)**

**\*Accounts with a group email will be set up as a service account and will require a password reset every 365 days. Individual account passwords will be required to reset every 90 days.**

**\*NJMVC recommends group emails as opposed to individual emails in representing the Company account as this reduces downtime when adding or removing users.**

## No Activity Report

In lieu of a monthly or semi-annual data submission, this form must be mailed by the deadline date. Should you have any questions, please call the UMIS hotline at 609-777-3894 (fax: 609-777-3941).

Three-digit code: \_\_\_\_\_

N.A.I.C.: \_\_\_\_\_

Insurance Company Code: \_\_\_\_\_  
(4-digit MVR Code New Jersey assigned to driver abstract)

Insurance Company Name: \_\_\_\_\_

Cycle Due Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month day year

The above-mentioned company has no policy or cancelled policy information to report for the current monthly cycle of the New Jersey Uninsured Motorist Identification System.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Company Representative)

Email to:  
[umisbrmmvc@mvc.nj.gov](mailto:umisbrmmvc@mvc.nj.gov)

or

Mail to:  
State of New Jersey OIT Hub Data  
Center 1 Schwartzkopf Dr.  
Trenton, NJ 08625-0113  
Attn: UMIS