

State: Arkansas **Filing Company:** Hartford Life and Annuity Insurance Company
TOI/Sub-TOI: A03I Individual Annuities - Deferred Variable/A03I.002 Flexible Premium
Product Name: ESV-LA
Project Name/Number: ESV-LA/LA-ESV-12

Filing at a Glance

Company: Hartford Life and Annuity Insurance Company
Product Name: ESV-LA
State: Arkansas
TOI: A03I Individual Annuities - Deferred Variable
Sub-TOI: A03I.002 Flexible Premium
Filing Type: Form
Date Submitted: 11/01/2012
SERFF Tr Num: HARL-128750498
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: IPD-LA-ESV-12

Implementation: On Approval
Date Requested:
Author(s): Jennifer Logee
Reviewer(s): Linda Bird (primary)
Disposition Date: 11/07/2012
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** Hartford Life and Annuity Insurance Company
TOI/Sub-TOI: A03I Individual Annuities - Deferred Variable/A03I.002 Flexible Premium
Product Name: ESV-LA
Project Name/Number: ESV-LA/LA-ESV-12

General Information

Project Name: ESV-LA Status of Filing in Domicile: Pending
Project Number: LA-ESV-12 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:
Overall Rate Impact: Filing Status Changed: 11/07/2012
State Status Changed: 11/07/2012
Deemer Date: Created By: Jennifer Logee
Submitted By: Jennifer Logee Corresponding Filing Tracking Number:

Filing Description:

Included in this filing is an amendatory rider for your review and approval. This rider is new and does not replace any previously approved forms.

The purpose of this rider is to be used in connection with an offer to Contract Owners to voluntarily elect to terminate their contracts and riders without penalty or fees in exchange for an Enhanced Surrender Value. This offer will be extended to those eligible Contract Owners whose contract has an optional guaranteed minimum withdrawal benefit.

This optional rider will be used with the following Individual Variable Annuity Contracts:

LA-VA03 approved by your state on 01/21/2003.
LA-VAXC03 approved by your state on 02/21/2003.
LA-ASHARE03 approved by your state on 01/29/2003.
LA-NCDSC03 approved by your state on 02/20/2003.

Please note that except for the form numbers and Company reference these forms are identical to the forms that we are submitting concurrently via a separate filing for the Hartford Life Insurance Company.

The bracketed items are variable and may be modified on a non-discriminatory basis. A Statement of Variables describing the bracketing parameters has been enclosed for each form.

Since these forms will be used with SEC registered product(s) we believe they are exempt from the language simplification requirements of your state. Unless otherwise informed, we reserve the right to alter the layout, format, color and typeface of these forms.

Your review of this submission is appreciated. Please feel free to contact me with any questions you may have.

Sincerely,
Jennifer Logee
Annuity Compliance
(860) 843-5972
Jennifer.Logee@thehartford.com

Company and Contact

State: Arkansas **Filing Company:** Hartford Life and Annuity Insurance Company
TOI/Sub-TOI: A03I Individual Annuities - Deferred Variable/A03I.002 Flexible Premium
Product Name: ESV-LA
Project Name/Number: ESV-LA/LA-ESV-12

Filing Contact Information

Jennifer Logee, Sr. Contract Specialist jennifer.logee@thehartford.com
 200 Hopmeadow St 860-843-5972 [Phone]
 Simsbury, CT 06089

Filing Company Information

Hartford Life and Annuity Insurance Company	CoCode: 71153	State of Domicile: Connecticut
200 Hopmeadow Street	Group Code: 91	Company Type: Life
Simsbury, CT 06089	Group Name:	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 39-1052598	

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: AR fee of \$50 per form
 Per Company: No

Company	Amount	Date Processed	Transaction #
Hartford Life and Annuity Insurance Company	\$50.00	11/01/2012	64489980

SERFF Tracking #:

HARL-128750498

State Tracking #:

Company Tracking #:

IPD-LA-ESV-12

State:

Arkansas

Filing Company:

Hartford Life and Annuity Insurance Company

TOI/Sub-TOI:

A031 Individual Annuities - Deferred Variable/A031.002 Flexible Premium

Product Name:

ESV-LA

Project Name/Number:

ESV-LA/LA-ESV-12

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/07/2012	11/07/2012

SERFF Tracking #:

HARL-128750498

State Tracking #:

Company Tracking #:

IPD-LA-ESV-12

State:

Arkansas

Filing Company:

Hartford Life and Annuity Insurance Company

TOI/Sub-TOI:

A031 Individual Annuities - Deferred Variable/A031.002 Flexible Premium

Product Name:

ESV-LA

Project Name/Number:

ESV-LA/LA-ESV-12

Disposition

Disposition Date: 11/07/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Enhanced Surrender Value		Yes

State: Arkansas

Filing Company:

Hartford Life and Annuity Insurance Company

TOI/Sub-TOI: A03I Individual Annuities - Deferred Variable/A03I.002 Flexible Premium

Product Name: ESV-LA

Project Name/Number: ESV-LA/LA-ESV-12

Form Schedule

Lead Form Number: LA-ESV-12

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Enhanced Surrender Value	LA-ESV-12	POLA	Initial		0.000	LA-ESV-12.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



Hartford Life and Annuity Insurance Company
200 Hopmeadow Street
Simsbury, CT 06089

AMENDATORY RIDER

**Voluntary Program
To
Surrender Contract and In Force Riders
And
Receive Enhanced Surrender Value**

This Rider is issued as part of, and amends your Contract. Capitalized terms have the meanings set forth in your Contract. "We", "us" and "our" mean Hartford Life Insurance Company or Hartford Life and Annuity Insurance Company. "You" and "your" mean the Contract Owner.

This Rider **is not effective until** after our receipt at our Administrative Offices of your signed and properly completed acknowledgement form and full surrender request to participate in the voluntary program.

When this rider becomes effective:

- (a) it supersedes any conflicting provision of your Contract;
- (b) we will pay you the Enhanced Surrender Value amount described below;
- (c) your Contract and all riders and guaranteed benefits will be fully surrendered and all insurance coverage and benefits will immediately terminate;
- (d) you may not reinstate your Contract.

The Enhanced Surrender Value is calculated as of the Valuation Day we receive your signed and properly completed acknowledgement form and full surrender request and any other administrative forms required. The Enhanced Surrender Value is the greater of:

- (a) Contract Value; or
- (b) Contract Value plus [20%] of your Payment Base, not to exceed a cap of [90%] of your Payment Base. Your Payment Base is determined as of [date]. No automatic Payment Base increases apply after [date]. The cap will be adjusted for any Partial Surrenders taken between [date] and the Valuation Day the Enhanced Surrender Value is calculated.

There may be restrictions on your ability to participate in this voluntary program. This voluntary program may be cancelled with prior notification from us.

Signed for **Hartford Life and Annuity Insurance Company**

Beth Bombara, President

Terence Shields, Corporate Secretary

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IPD-LA-ESV-12

State:

Arkansas

Filing Company:

Hartford Life and Annuity Insurance Company

TOI/Sub-TOI:

A031 Individual Annuities - Deferred Variable/A031.002 Flexible Premium

Product Name:

ESV-LA

Project Name/Number:

ESV-LA/LA-ESV-12

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Statement of Variability		
Comments:			
Attachment(s):			
LA-ESV-12 SOV.pdf			

STATEMENT OF VARIABLES

Hartford Life and Annuity Insurance Company

**Voluntary Program To
Surrender Contract and In Force Riders
And Receive Enhanced Surrender Value**

**Form Number: LA-ESV-12
November 1, 2012**

Changes in variable text will be administered by the Company pursuant to the information provided below in a non-discriminatory manner.

Variable Number	VARIABLE ITEM	DESCRIPTION
1	20%	Range: 5% - 40% When this rider is initially offered, the percent of Payment Base will be 20%. We may decide in the future to change the percent prospectively between 5 and 40%.
2	90%	Range: 70% - 100% When this rider is initially offered, the percent of Payment Base will be 90%. We may decide in the future to change the percent prospectively between 70 and 100%.
3	Date	Effective date of the voluntary program
4	SIGNATURES	The signatures and titles are those in effect and over time may change. The signatures and titles will be of those officers applicable at the time the Rider is issued.