

SERFF Tracking Number: HCAP-125328470 State: Arkansas
First Filing Company: West American Insurance Company, ... State Tracking Number: AR-PC-07-026522
Company Tracking Number: PL20070065R
TOI: 09.0 Inland Marine Sub-TOI: 09.0006 Other Personal Inland Marine
Product Name: Personal Inland Marine
Project Name/Number: Rules Revision/PL20070065R

Filing at a Glance

Companies: West American Insurance Company, American Fire and Casualty Company, The Ohio Casualty Insurance Company

Product Name: Personal Inland Marine SERFF Tr Num: HCAP-125328470 State: Arkansas
TOI: 09.0 Inland Marine SERFF Status: Closed State Tr Num: AR-PC-07-026522
Sub-TOI: 09.0006 Other Personal Inland Marine Co Tr Num: PL20070065R State Status:
Filing Type: Rule Co Status: Reviewer(s): Becky Harrington, Betty Montesi
Author: Linda Baker Disposition Date: 10/24/2007
Date Submitted: 10/22/2007 Disposition Status: Filed
Effective Date Requested (New): 01/25/2008 Effective Date (New): 01/25/2008
Effective Date Requested (Renewal): 01/25/2008 Effective Date (Renewal): 01/25/2008

General Information

Project Name: Rules Revision Status of Filing in Domicile: Not Filed
Project Number: PL20070065R Domicile Status Comments: These changes have not yet been file in the state of domicile.
Reference Organization: N/A Reference Number: N/A
Reference Title: N/A Advisory Org. Circular: N/A
Filing Status Changed: 10/24/2007
State Status Changed: 10/23/2007 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
In accordance with the file and use filing requirements of your state, we submit for your review revisions to our Personal Inland Marine Program. We are revising various manual rules. The revisions are explained in detail in the attached Rules Summary attached to our Cover Letter.

We are converting to a new policy administration system. Some of these revisions are to accommodate this conversion. Others are editorial in nature.

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These rule revisions correspond to form revisions submitted under separate cover under forms filing file number PL20070065F.

These revisions will apply to all new business and renewal policies written on or after January 25, 2008.

Company and Contact

Filing Contact Information

Linda Baker, Product Analyst Linda.Baker@ocas.com
 9450 Seward Road (800) 843-6446 [Phone]
 Fairfield, OH 45014-5456 (513) 603-2160[FAX]

Filing Company Information

West American Insurance Company	CoCode: 44393	State of Domicile: Indiana
9450 Seward Road	Group Code: 111	Company Type:
Fairfield, OH 45014-5456	Group Name:	State ID Number:
(800) 843-6446 ext. [Phone]	FEIN Number: 31-0624491	

American Fire and Casualty Company	CoCode: 24066	State of Domicile: Ohio
9450 Seward Road	Group Code: 111	Company Type:
Fairfield, OH 45014-5456	Group Name:	State ID Number:
(800) 843-6446 ext. [Phone]	FEIN Number: 59-0141790	

The Ohio Casualty Insurance Company	CoCode: 24074	State of Domicile: Ohio
9450 Seward Road	Group Code: 111	Company Type:
Fairfield, OH 45014-5456	Group Name:	State ID Number:
(800) 843-6446 ext. [Phone]	FEIN Number: 31-0396250	

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25.00 per rules filing.
 Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Fire and Casualty Company	\$0.00	10/22/2007	
The Ohio Casualty Insurance Company	\$25.00	10/22/2007	16225621
West American Insurance Company	\$0.00	10/22/2007	

SERFF Tracking Number: *HCAP-125328470* State: *Arkansas*
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TOI: *09.0 Inland Marine* Sub-TOI: *09.0006 Other Personal Inland Marine*
Product Name: *Personal Inland Marine*
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	10/24/2007	10/24/2007

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Disposition

Disposition Date: 10/24/2007
Effective Date (New): 01/25/2008
Effective Date (Renewal): 01/25/2008
Status: Filed
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC loss cost data entry document		No
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp		No
Supporting Document	Cover Letter and Rules Summary	Filed	Yes
Rate	Group Discount	Filed	Yes
Rate	Eligible Coverages	Filed	Yes
Rate	Minimum Premium Rule	Filed	Yes
Rate	Policy Term	Filed	Yes
Rate	Whole Dollar Premium Rule	Filed	Yes
Rate	Miscellaneous Items Rate Page	Filed	Yes
Rate	Sports Equipment Rate Page	Filed	Yes
Rate	Wedding Presents Rate Page	Filed	Yes

SERFF Tracking Number: *HCAP-125328470* *State:* *Arkansas*
First Filing Company: *West American Insurance Company, ...* *State Tracking Number:* *AR-PC-07-026522*
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TOI: *09.0 Inland Marine* *Sub-TOI:* *09.0006 Other Personal Inland Marine*
Product Name: *Personal Inland Marine*
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Rate Information

Rate data does NOT apply to filing.

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Group Discount	A.3.	New	PIM Addl Rule A.3. 01 08.pdf
Filed	Eligible Coverages	Rule 2	Replacement	PIM Rule 2 06 07.pdf
Filed	Minimum Premium Rule	Rule 5	Replacement	PIM Rule 5 06 07.pdf
Filed	Policy Term	Rule 7	Replacement	PIM Rule 7 06 07.pdf
Filed	Whole Dollar Premium Rule	Rule 10	Replacement	PIM Rule 10 06 07.pdf
Filed	Miscellaneous Items Rate Page	Rule 22	Replacement	PIM Rates Rule 22 01 08.pdf
Filed	Sports Equipment Rate Page	Rule 26	Replacement	PIM Rates Rule 26 01 08.pdf
Filed	Wedding Presents Rate Page	Rule 28	Replacement	PIM Rates Rule 28 01 08.pdf

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM MANUAL
ADDITIONAL RULES**

**RULE-A.3.
ADDITIONAL RULE - GROUP DISCOUNT**

A. ELIGIBILITY

1. Lines of Business.

- a. Homeowners
- b. Homeowners - Fam Pak
- c. Dwelling Fire
- d. Personal Liability
- e. Pleasure Boat
- f. Inland Marine

2. Participants

All full time permanent employees and retirees of the Ohio Casualty Group and its wholly owned subsidiaries are eligible including spouse, resident members of immediate family and children away at college. Surviving spouses of deceased employees and retirees also qualify.

B. Applicable Discount

- 1. A 15% discount applies to participants insured directly with the Ohio Casualty Group.

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
GENERAL RULES**

**RULE-2.
ELIGIBLE COVERAGES**

Bicycles
*Cameras
*Coins
*Collections
*Fine Arts
*Furs
*Golf Equipment
*Jewelry
Miscellaneous Items
*Musical Instruments
Recreational Vehicles (Golf Carts)
*Silverware
Sports Equipment
*Stamps
Wedding Presents

***Blanket Coverage is also available.**

All risk coverage is provided on all of the above classes except fire and burglary only on golf balls covered under the Golf Equipment class.

COUNTRYWIDE 06-07

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
GENERAL RULES**

**RULE-5.
MINIMUM PREMIUM**

There is no minimum premium.

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
GENERAL RULES**

**RULE-7.
POLICY TERM (NEW AND RENEWAL BUSINESS)**

A separate inland marine policy may be issued for a term of 6 months or 1 year.

COUNTRYWIDE 06-07

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
GENERAL RULES**

**RULE-10.
WHOLE DOLLAR PREMIUM RULE**

Premiums will not be rounded.

In the event of cancellation by the company, the return premium may be carried to the next higher whole dollar.

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
STATE RATES**

**RULE-22.
MISCELLANEOUS ITEMS**

C.	Premium	
	Annual rate per \$100	\$2.00

**OHIO CASUALTY GROUP®
PERSONAL INLAND MARINE 2000 PROGRAM
STATE RATES**

**RULE-26.
SPORTS EQUIPMENT**

C. Premium

Annual rate per \$100\$2.50

OHIO CASUALTY GROUPSM
PERSONAL INLAND MARINE 2000 PROGRAM
STATE RATES

RULE-28.
WEDDING PRESENTS

C. Premium

Annual rate per \$100\$2.00

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Filed 10/24/2007

Comments:

See attached Transmittal and Rate/Rule Filing Schedule.

Attachments:

PCTD-1 PIM Rules.pdf
PCRRFS-1 PIM Rules.pdf

Satisfied -Name: Cover Letter and Rules Summary **Review Status:** Filed 10/24/2007

Comments:

We are attaching a cover letter and rules summary describing revisions to rules.

Attachment:

Paris PIM filing letter RULES.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only <div style="border: 1px solid black; height: 150px; width: 100%;"></div>	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: New Business Renewal Business f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #			
Liberty Mutual Group	0111			
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
The Ohio Casualty Insurance Company	Ohio	0111-24074	31-0396250	
West American Insurance Company	Indiana	0111-44393	31-0624491	
American Fire and Casualty Company	Ohio	0111-24066	59-0141790	

5. Company Tracking Number	PL20070065R
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Linda Baker 9450 Seward Road Fairfield, Ohio 45014	PL Prod. Analyst	1-800-843-6446 Ext. 2120	513-603- 2160	linda.baker@ocas.com
7. Signature of authorized filer		<i>Linda Baker</i>		
8. Please print name of authorized filer		Linda Baker		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	09.0 Inland Marine
10. Sub-Type of Insurance (Sub-TOI)	09.0006 Other Personal Inland Marine
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Personal Inland Marine
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 01/25/2008 Renewal: 01/25/2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	October 22, 2007
19. Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

We are revising various manual rules. The revisions are explained below.

We are converting to a new policy administration system. Some of these revisions are to accommodate this conversion. Others are editorial in nature.

These rule revisions correspond to form revisions submitted under separate cover under forms filing file number PL20070065F.

NEW RULE

Rule A.3. (01-08) Group Discount This new rule is being added to provide a rule of application for our employee discount.

REVISED RULES

PIM Rule 2

(06-07) Eligible Coverages Revised to delete indication that wedding presents are eligible for blanket coverage. Replaces 05-01 edition.

PIM Rule 5

(06-07) Minimum Premium Rule Revised rule to indicate that there is no minimum premium for Monoline PIM policies. Replaces 05-01 edition

PIM Rule 7

(06-07) Policy Term Deleted sentence indicating there is a \$.50 charge for a 6 month policy. Replaces 05-01 edition.

PIM Rule 10

(06-07) Whole Dollar Premium Rule Revised rule to indicate premiums are not rounded.

Replaces 05-01 edition.

PIM Rule 22 Rates (01-08) Miscellaneous Items Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.

PIM Rule 26 Rates (01-08) Sports Equipment Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.

PIM Rule 28 - State Rate Page (01-08) Wedding Presents Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.

[View Complete Filing Description](#)

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: EFT

Amount: \$25.00

\$25

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

Effective March 1, 2007

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	PL20070065R
2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	PL20070065F

Rate Increase Rate Decrease Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File and Use
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4a. Rate Change by Company (As Proposed)							
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
The Ohio Casualty Ins. Co	N/A	0.1%	\$0	3	\$203	0.7%	-0.2%
West American Ins.Co.	N/A	0.3%	+\$48	92	\$14,545	13.4%	-18.3%
American Fire & Casualty Co.	N/A	0.0%	\$0	14	\$3292	2.5%	-0.7%

4b. Rate Change by Company (As Accepted) For State Use Only							
Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
		COMPANY USE	STATE USE
5a.	Overall percentage rate indication (when applicable)	N/A	
5b.	Overall percentage rate impact for this filing	+0.3%	
5c.	Effect of Rate Filing – Written premium change for this program	+\$48	
5d.	Effect of Rate Filing – Number of policyholders affected	109	

6.	Overall percentage of last rate revision	-23.9%
7.	Effective Date of last rate revision	8/1/92 (new), 9/25/92 (renewal)
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use

9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	Rule A.3. (01-08) Group Discount	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02	Rule 2. (06-07) Eligible Coverages	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03	Rule 5. (06-07) Minimum Premium	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
04	Rule 7. (06-07) Policy Term	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement	

		<input type="checkbox"/> Withdrawn	
05	Rule 10. (06-07) Whole Dollar Premium Rule	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
06	Rule 22. Rate Page (01-08) Miscellaneous Items	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
07	Rule 26. Rate Page (01-08) Sports Equipment	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
08	Rule 28. Rate Page (01-08) Wedding Presents	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

PC RRF5-1



October 22, 2007

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201-1904

RE: THE OHIO CASUALTY INSURANCE COMPANY NAIC #111-24074 FEIN# 31-0396250
WEST AMERICAN INSURANCE COMPANY NAIC #111-44393 FEIN# 31-0624491
AMERICAN FIRE AND CASUALTY COMPANY NAIC #111-24066 FEIN# 59-0141790
PERSONAL INLAND MARINE PROGRAM
RULE REVISIONS
OUR FILE NO.: PL20070065R

In accordance with the file and use filing requirements of your state, we submit for your review revisions to our Personal Inland Marine Program. We are revising various manual rules. The revisions are explained in detail in the attached filing exhibits.

We are converting to a new policy administration system. Some of these revisions are to accommodate this conversion. Others are editorial in nature.

These rule revisions correspond to form revisions submitted under separate cover under forms filing file number PL20070065F.

These revisions will apply to all new business and renewal policies written on or after January 25, 2008.

Should you have questions regarding these revisions or require additional information pertaining to this submission, please do not hesitate to contact me at the number provided below.

To the best of our knowledge, information and belief, this filing is in compliance with the provisions of the insurance statutes, rules and regulations of the state of Arkansas.

Sincerely,

A handwritten signature in cursive script that reads 'Linda M. Baker'.

Linda Baker, CPCU, AU
Product Analyst
Personal Lines Product Management
1-800-843-6446, Ext, 2120
FAX (513) 603-2160
linda.baker@ocas.com

**RULES SUMMARY
PERSONAL INLAND MARINE**

NEW RULE

Rule A.3. (01-08)	Group Discount	This new rule is being added to provide a rule of application for our employee discount.
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REVISED RULES

PIM Rule 2 (06-07)	Eligible Coverages	Revised to delete indication that wedding presents are eligible for blanket coverage. Replaces 05-01 edition.
PIM Rule 5 (06-07)	Minimum Premium Rule	Revised rule to indicate that there is no minimum premium for Monoline PIM policies. Replaces 05-01 edition
PIM Rule 7 (06-07)	Policy Term	Deleted sentence indicating there is a \$.50 charge for a 6 month policy. Replaces 05-01 edition.
PIM Rule 10 (06-07)	Whole Dollar Premium Rule	Revised rule to indicate premiums are not rounded. Replaces 05-01 edition.
PIM Rule 22 Rates (01-08)	Miscellaneous Items	Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.
PIM Rule 26 Rates (01-08)	Sports Equipment	Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.
PIM Rule 28 - State Rate Page (01-08)	Wedding Presents	Revised to delete reference to blanket coverage. Rate is only applicable to scheduled coverage. Replaces 08-02 edition.