

SERFF Tracking Number: TRVD-125317011 State: Arkansas
First Filing Company: St. Paul Fire and Marine Insurance Company, ... State Tracking Number: AR-PC-07-026394
Company Tracking Number: 2007-09-0002
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability
Product Name: 1st Choice for Real Estate Professionals
Project Name/Number: Real Estate Form/2007-09-0002

Filing at a Glance

Companies: St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company

Product Name: 1st Choice for Real Estate Professionals SERFF Tr Num: TRVD-125317011 State: Arkansas

TOI: 17.1 Other Liability - Claims Made Only SERFF Status: Closed State Tr Num: AR-PC-07-026394
Sub-TOI: 17.1019 Professional Errors & Omissions Liability Co Tr Num: 2007-09-0002 State Status:

Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding

Authors: Carrie Acuna, Carol Letendre Disposition Date: 10/18/2007

Date Submitted: 10/10/2007 Disposition Status: Approved

Effective Date Requested (New): 11/09/2007

Effective Date (New):

Effective Date Requested (Renewal): 11/09/2007

Effective Date (Renewal):

General Information

Project Name: Real Estate Form

Status of Filing in Domicile: Not Filed

Project Number: 2007-09-0002

Domicile Status Comments: Not required to be filed in Minnesota.

Reference Organization: N/A

Reference Number: N/A

Reference Title: N/A

Advisory Org. Circular: N/A

Filing Status Changed: 10/18/2007

State Status Changed: 10/11/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

This filing places on file revised form P0667 Rev. 9-07, Limited Sale of Owned Residential Property Endorsement. This endorsement will replace the current 02-2007 edition filed and approved under Company Filing 2006-11-0080. The revisions made were for readability/clarity and to correct a typographical error with respect to the construction of the residential property.

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Company and Contact

Filing Contact Information

Carol Letendre, Senior Regulatory Analyst CLETENDR@travelers.com
 385 Washington Street (651) 310-7110 [Phone]
 St. Paul, MN 55102 (651) 310-4361[FAX]

Filing Company Information

St. Paul Fire and Marine Insurance Company	CoCode: 24767	State of Domicile: Minnesota
385 Washington Street	Group Code: 3548	Company Type:
St. Paul, MN 55102	Group Name:	State ID Number:
(651) 310-7782 ext. [Phone]	FEIN Number: 41-0406690	

St. Paul Guardian Insurance Company	CoCode: 24775	State of Domicile: Minnesota
385 Washington Street	Group Code: 3548	Company Type:
St. Paul, MN 55102	Group Name:	State ID Number:
(651) 310-7782 ext. [Phone]	FEIN Number: 41-0963301	

St. Paul Mercury Insurance Company	CoCode: 24791	State of Domicile: Minnesota
385 Washington Street	Group Code: 3548	Company Type:
St. Paul, MN 55102	Group Name:	State ID Number:
(651) 310-7782 ext. [Phone]	FEIN Number: 41-0881659	

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: 50.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
St. Paul Fire and Marine Insurance Company	\$50.00	10/10/2007	16042021
St. Paul Guardian Insurance Company	\$0.00	10/10/2007	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	10/18/2007	10/18/2007

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Disposition

Disposition Date: 10/18/2007

Effective Date (New):

Effective Date (Renewal):

Status: Approved

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	Approved	Yes
Supporting Document	AR Filing Letter	Approved	Yes
Form	Limited Sale of Owned Residential Property Endorsement	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Limited Sale of Owned Residential Property Endorsement	P0667	9-07	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 P0667, 02-2007 Previous Filing #: Dept. Filing No.: AR-PC-07-023614; Our Co. Filing No.: 2006-11-0080		P0667F_0907.pdf

LIMITED SALE OF OWNED RESIDENTIAL PROPERTY ENDORSEMENT

This endorsement changes your Real Estate Agents Or Brokers Professional Liability Protection - Claims-Made.

How Coverage Is Changed

The following is added to the Property purchased, or owned-property sold by, protected persons exclusion. This change broadens coverage.

Nor will we apply this exclusion to loss that results from performing, or failing to perform, any real estate professional services in connection with selling or the sale of residential property that any protected person didn't construct or develop or that was constructed or developed by a business entity (other than you) owned by a protected person:

- in which the combined ownership interest for such residential property by all protected persons is less than 10% at the time of the sale; or
- in which the combined ownership interest for such residential property by all protected persons is 10% or more at the time of the sale provided that all sale of owned property conditions are met in connection with such sale.

Sale of owned property conditions means all of the following:

- A written property inspection report was issued in connection with the subject transaction.
- A home warranty policy was purchased in connection with the subject property.
- A property disclosure, an ownership-interest disclosure, and an agency-representation disclosure were made to, and accepted in writing by, the purchaser of such property as soon as possible prior to the date of closing, and executed copies of such disclosure statements are made available to us as part of the investigation of any claim, suit, or proceeding resulting from such transaction.

Other Terms

All other terms of your policy remain the same.

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Liability

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty **Review Status:** Approved 10/18/2007

Comments:

Attachments:

NAIC Transmittal Doc.pdf
NAIC Form Filing Schedule.pdf

Satisfied -Name: AR Filing Letter **Review Status:** Approved 10/18/2007

Comments:

Attachment:

AR Filing Letter.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	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

3. Group Name	Group NAIC #
Travelers	3548

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
St. Paul Fire and Marine Insurance Company	MN	24767	41-0406690	
St. Paul Mercury Insurance Company	MN	24791	41-0881659	
St. Paul Guardian Insurance Company	MN	24775	41-0963301	

5. Company Tracking Number	2007-09-0002
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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
Carol Letendre	Senior Regulatory Analyst	651-310-7110 800-328-2189, Ext 07110	651-310-4361	cletendr@travelers.com
7. Signature of authorized filer	<i>Carol Letendre</i>			
8. Please print name of authorized filer	Carol Letendre			

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

9. Type of Insurance (TOI)	17.00000 Other Liability
10. Sub-Type of Insurance (Sub-TOI)	17.10000 Other Liability – Claims-Made
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	1 st Choice for Real Estate Professionals
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" 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: November 9, 2007 Renewal: November 9, 2007
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 10, 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 #	2007-09-0002
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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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 #: N/A - EFT
Amount: \$50.00

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.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do **not** refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	2007-09-0002			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A			
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Limited Sale of Owned Residential Property Endorsement	P0667 Rev. 9-07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	P0667 Ed. 02-2007	Dept. Filing No.: AR-PC-07-023614 Our Co. Filing No.: 2006-11-0080
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



Carol Letendre
Senior Regulatory Analyst
Regulatory Affairs, Business Insurance
Toll Free: 800.328.2189 Ext. 07110
Direct: 651.310.7110; Fax: 651.310.4361
385 Washington Street, MC 9275-NB14L
St. Paul, MN 55102
Email: cletendr@travelers.com

October 10, 2007

Commissioner Julie Benafield Bowman
Commissioner of Insurance
State of Arkansas
1200 West Third Street
3rd and Cross
Little Rock, AR 72201-1904

ST. PAUL FIRE AND MARINE INSURANCE COMPANY – 3548-24767
ST. PAUL MERCURY INSURANCE COMPANY – 3548-24791
ST. PAUL GUARDIAN INSURANCE COMPANY – 3548-24775

Professional Liability
1st Choice for Real Estate Professionals
Form Filing – P0667 Rev. 9-07
Our Company Filing Number: 2007-09-0002

Dear Commissioner:

In compliance with the insurance laws and regulations in your state, our company respectfully submits the enclosed revised endorsement for your review.

This filing places on file revised form P0667 Rev. 9-07, Limited Sale of Owned Residential Property Endorsement. This endorsement will replace the current 02-2007 edition filed and approved under Company Filing 2006-11-0080. The revisions made were for readability/clarity and to correct a typographical error with respect to the construction of the residential property.

We plan to implement this filing with respect to policies effective on or after November 9, 2007. Your approval of this filing will be appreciated. Should you have any questions regarding this submission, please feel free to contact me at your convenience.

Sincerely,

Carol Letendre
Senior Regulatory Analyst
Regulatory Affairs, Business Insurance
CL/jrk
Encl.