

SERFF Tracking Number: TRVD-125322318 State: Arkansas
 First Filing Company: NIPPONKOA Insurance Company State Tracking Number: AR-PC-07-026503
 Ltd.,(U.S.Branch), ...
 Company Tracking Number: 2007-10-0010-F
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
 Product Name: Deluxe Property Green Building Coverage
 Project Name/Number: Deluxe Property Green Building Coverage/2007-10-0010-F

For a detailed explanation of our form, please refer to the enclosed forms transmittal supplement.
 As this is a new optional coverage for green buildings, there is no rate impact associated with this filing.

Company and Contact

Filing Contact Information

Margaret Salsbury, Senior Regulatory Analyst MSALSBUR@travelers.com
 One Tower Square (860) 277-6470 [Phone]
 Hartford, CT 06183 (860) 954-0580[FAX]

Filing Company Information

NIPPONKOA Insurance Company Ltd.,(U.S.Branch) One Tower Square Hartford, CT 06183 (860) 277-6470 ext. [Phone]	CoCode: 27073 Group Code: 2558 Group Name: FEIN Number: 98-0032627 -----	State of Domicile: New York Company Type: State ID Number:
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The Charter Oak Fire Insurance Company One Tower Square Hartford, CT 06183 (860) 277-6470 ext. [Phone]	CoCode: 25615 Group Code: 3548 Group Name: FEIN Number: 06-0291290 -----	State of Domicile: Connecticut Company Type: State ID Number:
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The Phoenix Insurance Company One Tower Square Hartford, CT 06183 (860) 277-6470 ext. [Phone]	CoCode: 25623 Group Code: 3548 Group Name: FEIN Number: 06-0303275 -----	State of Domicile: Connecticut Company Type: State ID Number:
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The Travelers Indemnity Company One Tower Square Hartford, CT 06183 (860) 277-6470 ext. [Phone]	CoCode: 25658 Group Code: 3548 Group Name: FEIN Number: 06-0566050 -----	State of Domicile: Connecticut Company Type: State ID Number:
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The Travelers Indemnity Company of America	CoCode: 25666	State of Domicile: Connecticut
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One Tower Square
Hartford, CT 01683
(860) 277-6470 ext. [Phone]

Group Code: 3548
Group Name:
FEIN Number: 58-6020487

Company Type:
State ID Number:

The Travelers Indemnity Company Of
Connecticut
One Tower Square
Hartford, CT 06183
(860) 277-6470 ext. [Phone]

CoCode: 25682
Group Code: 3548
Group Name:
FEIN Number: 06-0336212

State of Domicile: Connecticut

Company Type:
State ID Number:

Travelers Property Casualty Company of
America
One Tower Square
Hartford, CT 06183
(860) 277-6470 ext. [Phone]

CoCode: 25674
Group Code: 3548
Group Name:
FEIN Number: 36-2719165

State of Domicile: Connecticut

Company Type:
State ID Number:

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Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Charter Oak Fire Insurance Company	\$50.00	10/19/2007	16204880
The Phoenix Insurance Company	\$0.00	10/19/2007	
The Travelers Indemnity Company	\$0.00	10/19/2007	
The Travelers Indemnity Company of America	\$0.00	10/19/2007	
Travelers Property Casualty Company of America	\$0.00	10/19/2007	
The Travelers Indemnity Company Of Connecticut	\$0.00	10/19/2007	
NIPPONKOA Insurance Company Ltd.,(U.S.Branch)	\$0.00	10/19/2007	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	10/25/2007	10/25/2007

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Disposition

Disposition Date: 10/25/2007
Effective Date (New): 12/01/2007
Effective Date (Renewal): 12/01/2007
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	Cover Letter	Approved	Yes
Form	Green Building Coverage Enhancements	Approved	Yes

SERFF Tracking Number: TRVD-125322318 State: Arkansas
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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Green Building Coverage Enhancements	DX T4 12 12 07	12-2007	Endorsement/Amendment/Conditions		0.00	Form Transmittal DX T4 12 12 07.pdf DX T4 12 12 07 Final Version.pdf

EXHIBIT 1
DEPARTMENT OF INSURANCE
PROPERTY - CASUALTY
FORMS TRANSMITTAL SUPPLEMENT

FORM TITLE	NEW FORM #	OLD FORM #	TYPE OF FORM	DESCRIPTION OF FORM REVISION
Green Building Coverage Enhancements	DX T4 12 12 07	NA	E-PR-O	<p>This is a new optional endorsement for use on our Deluxe Property Coverage Part. This endorsement contains coverage for additional costs incurred to repair or replace damaged buildings using green products. The endorsement also covers specified additional expenses incurred to re-attain a pre-loss level of green building certification. Coverage is provided for loss by a Covered Cause of Loss to vegetative roofs on buildings. With regard to vegetative roofs, the endorsement clarifies that the cost to repair or replace does not include increased costs to re-attain a pre-loss level of green building certification.</p> <p>The endorsement also amends the Deluxe Business Income Coverage Forms and Extra Expense Coverage forms by providing Increased Period of Restoration coverage up to a maximum of 30 additional days to reflect an increased period required to repair or replace damaged buildings using green products. The endorsement also clarifies that the period of restoration does not include an increased period required to re-attain a pre-loss level of green building certification.</p>

The following explains the Coding Items used in this Forms Transmittal Supplement:

Type of Form	D-PR-M or O	D = Declarations (or Schedule)
		PR = Property Line of Business
		M or O = Mandatory or Optional
	C -PR-M or O	C = Coverage Form
		PR = Property Line of Business
		M or O = Mandatory or Optional
	E -PR- O	E = Endorsement
		PR = Property Line of Business
		M or O = Mandatory or Optional
[C]	Clarification	
[B]	Broadening	
[R]	Restriction	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
DELUXE PROPERTY COVERAGE PART AMENDATORY ENDORSEMENT
GREEN BUILDING COVERAGE ENHANCEMENTS

This endorsement modifies insurance provided under the following:

DELUXE PROPERTY COVERAGE FORM
DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE)
DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE) - COLLEGES AND
SCHOOLS
DELUXE BUSINESS INCOME COVERAGE FORM (WITHOUT EXTRA EXPENSE)
DELUXE EXTRA EXPENSE COVERAGE FORM
DELUXE EXTRA EXPENSE COVERAGE FORM - COLLEGES AND SCHOOLS

SCHEDULE

Green Building Alternatives - Increased Cost Percentage: _____%

A. DEFINITIONS

As used in this endorsement:

1. **“Green”** means products, materials, methods and processes that conserve natural resources, reduce energy or water consumption, avoid toxic or other polluting emissions or otherwise minimize the environmental impact.
2. **“Green Authority”** means a recognized authority on green building or green products, materials or processes.

B. CHANGES TO THE DELUXE PROPERTY COVERAGE FORM

1. The following coverages are added to Section A.4., **Additional Coverages**:
 - a. **Green Building Alternatives – Increased Cost**
 - (1) If direct physical loss or damage by a Covered Cause of Loss occurs to a Covered Building, we will pay for:
 - (a) The reasonable additional cost you incur to repair or replace the lost or damaged portions of the building using products or materials that:
 - (i) Are “green” alternatives to the products or

materials of the lost or damaged property, in accordance with the documented standards of a “Green Authority”; and

- (ii) Are otherwise of comparable quality and function to the damaged property;

and

- (b) The reasonable additional cost you incur to employ “green” methods or processes of construction, disposal or recycling in the course of the repair and replacement of the lost or damaged building, in accordance with the documented standards of a “Green Authority”.

- (2) The insurance provided under this Additional Coverage applies only if replacement cost valuation applies to the lost or damaged building and then only if the building is actually repaired or replaced as soon as reasonably possible after the loss or damage.

- (3) The insurance provided under this Additional Coverage does not apply to any building that has been vacant for more than 60 consecutive days before the loss or damage occurs.

Under this Additional Coverage, a building is considered vacant when less than 31% of its square footage is:

- (a) Rented to a lessee or sub-lessee and used by the lessee or sub-lessee to conduct its customary operations; or
 - (b) Used by the building owner to conduct customary operations.
- (4) The most we will pay for the additional cost incurred with respect to each building in any one occurrence under this Additional Coverage is determined by multiplying:
- (a) The Green Building Alternatives - Increased Cost Percentage shown in the Schedule of this Endorsement; times
 - (b) The lesser of:
 - (i) The amount we would otherwise pay for the direct physical loss of or damage to the building, prior to application of any applicable deductible; or
 - (ii) The value you reported to us for the building, as stated on the latest Statement of Value or other documentation on file with us prior to the loss or damage.

This is additional insurance.

b. Green Building Reengineering and Recertification Expense

- (1) If, as a result of direct physical loss or damage by a Covered Cause of Loss to a Covered Building, the pre-loss level of "green" building certification by

a "Green Authority" on the building is lost, we will pay for the following reasonable additional expenses you incur to re-attain the pre-loss level of "green" building certification from that "Green Authority":

- (a) The reasonable additional expense you incur to hire a qualified engineer or other professional required by the "Green Authority" to be involved in:
 - (i) Designing, overseeing or documenting the repair or replacement of the lost or damaged building; or
 - (ii) Testing and recalibrating the systems and mechanicals of the lost or damaged building to verify that the systems and mechanicals are performing in accordance with the design of such systems and mechanicals or the specifications of the manufacturer;

and

- (b) The reasonable registration and recertification fees charged by the "Green Authority".

- (2) This Additional Coverage applies to the additional expenses described above that you incur to achieve the pre-loss level of "green" building certification in accordance with the standards of the "Green Authority" that exist at the time of repair or replacement, even if the standards have changed since the original certification was achieved.
- (3) The most we will pay in any one occurrence under this Additional Coverage for:

(a) All expenses incurred with respect to each building is 5% of the sum of:

(i) The amount we pay for the direct physical loss of or damage to the building, including any amount paid under the Green Building Alternatives - Increased Cost Additional Coverage; and

(ii) The deductible amount applied to the loss payment for direct physical loss or damage to the building;

(b) All expenses incurred, regardless of the number of buildings involved, is \$25,000.

This is additional insurance.

2. The following coverage is added to Section **A.5., Coverage Extensions:**

Vegetative Roofs

a. When this policy covers Building(s), you may extend the insurance that applies to Covered Buildings to apply to direct physical loss of or damage to vegetative roofs on the Covered Buildings caused by or resulting from a Covered Cause of Loss.

b. Under the Deluxe Property Coverage Form, the:

(1) Exclusion of trees, shrubs plants and lawns outside of buildings under paragraph p. of Section **A.3.**, Property and Costs Not Covered; and

(2) The insurance provided for trees, shrubs plants and lawns outside of buildings under the Outdoor Property Coverage Extension in Section **A.4.f.**;

do not apply to vegetative roofs.

c. All of the exclusions that apply to loss or damage to Buildings apply to loss or damage to vegetative roofs on such buildings. In addition, we will not pay for loss or damage to

vegetative roofs caused by or resulting from:

(1) Dampness or dryness of atmosphere;

(2) Changes in or extremes of temperature; or

(3) Rain, snow, sand, dust, ice or sleet.

d. The insurance provided under this Extension is included in, and does not increase, the Limit of Insurance that applies to the building that the vegetative roof is on.

3. The following provision is added to the Loss Payment Loss Condition in Section **F.4.** :

Except as specifically provided under the:

a. Green Building Alternatives – Increased Costs Additional Coverage; and

b. Green Building Reengineering and Recertification Expense Additional Coverage;

the cost to repair, rebuild or replace does not include any increased cost incurred to re-attain a pre-loss level of “green” building certification from a “Green Authority”.

C. CHANGES TO THE DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE), THE DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE) – COLLEGES AND SCHOOLS, THE DELUXE BUSINESS INCOME COVERAGE FORM (WITHOUT EXTRA EXPENSE), THE DELUXE EXTRA EXPENSE COVERAGE FORM AND THE DELUXE EXTRA EXPENSE COVERAGE FORM – COLLEGES AND SCHOOLS

1. The following coverage is added to Section **A.3., Additional Coverages:**

Green Building Alternatives – Increased Period of Restoration

If direct physical loss or damage by a Covered Cause of Loss occurs to a building at the described premises, coverage is extended to include the amount of actual and necessary loss you sustain during the reasonable and

necessary increase in the "period of restoration" that is incurred to:

- a. Repair or replace the lost or damaged portions of the building using products or materials that:
 - (1) Are "green" alternatives to the products or materials of the lost or damaged property, in accordance with the documented standards of a "Green Authority"; and
 - (2) Are otherwise of comparable quality and function to the damaged property;
- and
- b. Employ "green" methods or processes of construction, disposal or recycling in the course of the repair and replacement of the lost or damaged building, in accordance with the documented standards of a "Green Authority";

subject to a maximum of 30 additional days from the date the "period of restoration" would otherwise have ended.

This Additional Coverage is included in, and does not increase, the applicable Limit of Insurance.

2. Under the **DEFINITIONS** in:

- a. Section **H.** of the **DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE)**, the **DELUXE BUSINESS INCOME COVERAGE FORM (AND EXTRA EXPENSE) – COLLEGES AND SCHOOLS** and the **DELUXE BUSINESS INCOME COVERAGE FORM (WITHOUT EXTRA EXPENSE)**; and
- b. Section **E.** of the **DELUXE EXTRA EXPENSE COVERAGE FORM** and the **DELUXE EXTRA EXPENSE COVERAGE FORM – COLLEGES AND SCHOOLS**;

the following is added to the definition of "period of restoration":

"Period of restoration" does not include any increased period required to re-attain a pre-loss level of "green" building certification from a "Green Authority". But this does not apply to any increase in the "period of restoration" otherwise insured under the Green Building Alternatives – Increased Period of Restoration Additional Coverage.

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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 10/25/2007
Comments:
Attachments:
NAIC Transmittal.pdf
NAIC - Form Filing Schedule - 2007-10-0010 - F.pdf

Satisfied -Name: Cover Letter
Review Status: Approved 10/25/2007
Comments:
Attachment:
AR - 2007-10-0010 - F -.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 #
The Travelers Companies, Inc.					3548
NIPPONKOA Insurance Company, Ltd.					2558
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #	
The Travelers Indemnity Company	CT	25658	06-0566050		
The Charter Oak Fire Insurance Company	CT	25615	06-0291290		
The Travelers Indemnity Company of Connecticut	CT	25682	06-0336212		
The Travelers Indemnity Company of America	CT	25666	58-6020487		
The Phoenix Insurance Company	CT	25623	06-0303275		
Travelers Property Casualty Company of America	CT	25674	36-2719165		
NIPPONKOA Insurance Company, Ltd.	NY	27073	98-0032627		
5. Company Tracking Number		2007-10-0010-F			
Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]					
6. Name and address	Title	Telephone #s	FAX #	e-mail	
Margaret M. Salsbury Travelers One Tower Square Hartford, CT 06183	Senior Regulatory Analyst	(860) 277-6470	(860) 954-0580	MSALSBUR@Travelers.com	
7. Signature of authorized filer		<i>Margaret M. Salsbury</i>			
8. Please print name of authorized filer		Margaret M. Salsbury			
Filing information (see General Instructions for descriptions of these fields)					
9. Type of Insurance (TOI)	01.0				
10. Sub-Type of Insurance (Sub-TOI)	01.0001				
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A				
12. Company Program Title (Marketing title)	N/A				
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: 12/01/2007 Renewal: 12/01/2007				
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	10/19/2007				
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved				

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	2007-10-0010-F
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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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In compliance with the insurance laws and regulations in your state, our companies respectfully submit one new optional form – Green Building Coverage Enhancements – DX T4 12 12 07 to be used with our Deluxe Property program.

For a detailed explanation of our form, please refer to the enclosed forms transmittal supplement. As this is a new optional coverage for green buildings, there is no rate impact associated with this filing.

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 #	2007-10-0010 - F			
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	Green Building Coverage Enhancements	DX T4 12 12 07	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
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		



Margaret M. Salsbury
Senior Regulatory Analyst
Regulatory Affairs, Business Insurance
Direct: (860) 277-6470; Fax: (860) 954-0580
One Tower Square, 0000-MN08A
Hartford CT, 06183
MSALSBUR@travelers.com

October 19, 2007

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

The Travelers Indemnity Company	3548-25658
The Charter Oak Fire Insurance Company	3548-25615
The Travelers Indemnity Company of Connecticut	3548-25682
The Travelers Indemnity Company of America	3548-25666
The Phoenix Insurance Company	3548-25623
Travelers Property Casualty Company of America	3548-25674
NIPPONKOA Insurance Company, Ltd. (U.S. Branch)	2558-27073

Commercial Property
Deluxe Property – Form Filing
Company Filing Number: 2007-10-0010-F

Dear Commissioner Bowman:

In compliance with the insurance laws and regulations in your state, our companies respectfully submit one new optional form – Green Building Coverage Enhancements – DX T4 12 12 07 to be used with our Deluxe Property program.

For a detailed explanation of our form, please refer to the enclosed forms transmittal supplement. As this is a new optional coverage for green buildings, there is no rate impact associated with this filing.

We plan to implement these changes with respect to policies effective on or after December 1, 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,

Margaret M. Salsbury
Senior Regulatory Analyst
MS/ts
Enclosures