

SERFF Tracking Number: CMPX-125351456 State: Arkansas
Filing Company: Companion Property & Casualty Insurance Company State Tracking Number: NC \$0
Company Tracking Number: P#07074
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Commercial Package Policy
Project Name/Number: MU ML Interline Forms Revision 10/1/07/P#07074

Filing at a Glance

Company: Companion Property & Casualty Insurance Company

Product Name: Commercial Package Policy SERFF Tr Num: CMPX-125351456 State: Arkansas
TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: NC \$0
Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: P#07074 State Status: Fees verified
Filing Type: Form Co Status: Reviewer(s): Betty Montesi,
Llyweyia Rawlins, Brittany Yielding
Author: SPI CompanionPCGroup Disposition Date: 11/08/2007
Date Submitted: 11/07/2007 Disposition Status: Non-Adoption
Effective Date Requested (New): 10/01/2007 Effective Date (New): 10/01/2007
Effective Date Requested (Renewal): Effective Date (Renewal):

General Information

Project Name: MU ML Interline Forms Revision 10/1/07 Status of Filing in Domicile:
Project Number: P#07074 Domicile Status Comments:
Reference Organization: ISO Reference Number: CL-2006-OLOB1
Reference Title: Advisory Org. Circular:
Filing Status Changed: 11/08/2007 Deemer Date:
State Status Changed: 11/08/2007
Corresponding Filing Tracking Number:
Filing Description:
Companion Property and Casualty Insurance Company wishes to non-adopt ISO filing reference
CL-2006-OLOB1 indefinitely.

Company and Contact

Filing Contact Information

LaTonya Ivey, Regulatory Compliance Analyst latonya.ivey@companiongroup.com

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II

P.O. Box 100165 (803) 795-7770 [Phone]
Columbia, SC 29202 (803) 865-3155[FAX]

Filing Company Information

Companion Property & Casualty Insurance CoCode: 12157 State of Domicile: South Carolina
Company
P.O. Box 100165 Group Code: 661 Company Type:
Columbia, SC 29202 Group Name: State ID Number:
(800) 845-2724 ext. [Phone] FEIN Number: 57-0768836

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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Non-Adoption	Llyweyia Rawlins	11/08/2007	11/08/2007

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Non-adoption	Yes
Supporting Document	Cover Letter	Non-adoption	Yes
Form	Calculation of Premium	Non-adoption	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Non-adoption	Calculation of Premium	IL 00 03	09/07	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 IL 00 03 Previous Filing #:		

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Non-adoption 11/08/2007

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Satisfied -Name: Cover Letter **Review Status:** Non-adoption 11/08/2007

Comments:

Attachment:

Cover 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: <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #
	661

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Companion Property & Casualty Insurance Company	SC	12157	57-0768836	

5. Company Tracking Number	P#07074
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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
	LaTonya Ivey P.O. Box 100165 Columbia SC 29202	Regulatory Compliance Analyst II	800-845-2724	803 865-3155	latonya.ivey@companion group.com
7.	Signature of authorized filer				
8.	Please print name of authorized filer		LaTonya Ivey		

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

9.	Type of Insurance (TOI)	35.0 Interline Filings
10.	Sub-Type of Insurance (Sub-TOI)	35.0002 Commercial Interline Filings
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	COMMERCIAL PACKAGE POLICY; COMMERCIAL AUTO; GENERAL LIABILITY
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: N/A Renewal: N/A
15.	Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	Reference Organization (if applicable)	ISO
17.	Reference Organization # & Title	CL-2006-OLOB1
18.	Company's Date of Filing	11/7/07
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	P#07074
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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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Companion Property and Casualty Insurance Company wishes to non-adopt ISO filing reference CL-2006-OLOB1 indefinitely.

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

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



Companion Property & Casualty Group

Companion Property & Casualty
Insurance Company

Companion Commercial
Insurance Company

November 7, 2007

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

Attn: Property & Casualty Division

RE: Companion Property & Casualty Insurance Company NAIC#: 661-12157 FEIN#: 57-0768836
Commercial Fire - MU ML Interline Forms Revision 10/1/07
Company Filing: P#07074
Proposed Effective Date: Non-Adopt Indefinitely

Dear Commissioner Benafield Bowman:

Companion Property and Casualty Insurance Company wishes to non-adopt ISO filing reference CL-2006-OLOB1 indefinitely.

If you should have any questions or need additional information, please do not hesitate to contact me.

Sincerely

LaTonya Ivey
Regulatory Compliance Analyst II

Phone: 803-795-7770
Fax: 803 865-3155
Email: latonya.ivey@companiongroup.com