

SERFF Tracking Number: FFDC-125391414 State: Arkansas
First Filing Company: American Automobile Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number: NARGL1007
TOI: 17.2 Other Liability - Occurrence Only Sub-TOI: 17.2019 Professional Errors & Omissions Liability
Product Name: Hospitality Services Coverage
Project Name/Number: Hospitality Services Coverage/NWGL1007

Filing at a Glance

Companies: American Automobile Insurance Company, Associated Indemnity Corporation, Fireman's Fund Insurance Company, National Surety Corporation, The American Insurance Company

Product Name: Hospitality Services Coverage SERFF Tr Num: FFDC-125391414 State: Arkansas
TOI: 17.2 Other Liability - Occurrence Only SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 17.2019 Professional Errors & Omissions Liability Co Tr Num: NARGL1007 State Status: Fees verified and received
Filing Type: Form Co Status: Pending Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
Authors: Gina Bondanza, Hilary Cheda Disposition Date: 12/26/2007
Date Submitted: 12/20/2007 Disposition Status: Approved
Effective Date Requested (New): 02/01/2008 Effective Date (New):
Effective Date Requested (Renewal): 02/01/2008 Effective Date (Renewal):
State Filing Description:

General Information

Project Name: Hospitality Services Coverage Status of Filing in Domicile: Pending
Project Number: NWGL1007 Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 12/26/2007
State Status Changed: 12/26/2007 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
Dear Sir or Madam:

On behalf of Fireman's Fund Insurance Companies®, enclosed for your review is our Hospitality Services Coverage for CG 72 49 12 07. This new coverage form replaces CG 72 49 03 05.

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This is a form filing only, and there is no overall premium or rate impact associated with this filing.

Enclosed in support of this filing are the following documents:

- Hospitality Services Coverage CG 72 49 12 07
- Explanatory Memorandum
- State Specific Checklists/Certifications

We look forward to the Department's acknowledgement of this filing to become effective February 1, 2008.

Company and Contact

Filing Contact Information

Hilary Cheda, hcheda@ffic.com
 777 San Marin Drive (415) 899-6968 [Phone]
 Novato, CA 94998 (866) 290-0671[FAX]

Filing Company Information

American Automobile Insurance Company	CoCode: 21849	State of Domicile: Missouri
777 San Marin Drive	Group Code: 761	Company Type:
Novato, CA 94998	Group Name:	State ID Number:
(415) 899-2817 ext. [Phone]	FEIN Number: 22-1608585	

Associated Indemnity Corporation	CoCode: 21865	State of Domicile: California
777 San Marin Drive	Group Code: 761	Company Type:
Novato, CA 94998	Group Name:	State ID Number:
(415) 899-2817 ext. [Phone]	FEIN Number: 22-1708002	

Fireman's Fund Insurance Company	CoCode: 21873	State of Domicile: California
777 San Marin Drive	Group Code: 761	Company Type:
Novato, CA 94998	Group Name:	State ID Number:
(415) 899-3290 ext. [Phone]	FEIN Number: 94-1610280	

National Surety Corporation	CoCode: 21881	State of Domicile: Illinois
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777 San Marin Drive
Novato, CA 94998
(415) 899-2817 ext. [Phone]

Group Code: 761
Group Name:
FEIN Number: 36-2704643

Company Type:
State ID Number:

The American Insurance Company
777 San Marin Drive
Novato, CA 94998
(415) 899-2817 ext. [Phone]

CoCode: 21857
Group Code: 761
Group Name:
FEIN Number: 22-0731810

State of Domicile: Nebraska
Company Type:
State ID Number:

SERFF Tracking Number: *FFDC-125391414* *State:* *Arkansas*
First Filing Company: *American Automobile Insurance Company, ...* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *NARGL1007*
TOI: *17.2 Other Liability - Occurrence Only* *Sub-TOI:* *17.2019 Professional Errors & Omissions Liability*

Product Name: *Hospitality Services Coverage*
Project Name/Number: *Hospitality Services Coverage/NWGL1007*

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Automobile Insurance Company	\$0.00	12/20/2007	
National Surety Corporation	\$0.00	12/20/2007	
The American Insurance Company	\$0.00	12/20/2007	
Fireman's Fund Insurance Company	\$50.00	12/20/2007	17205555
Associated Indemnity Corporation	\$0.00	12/20/2007	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	12/26/2007	12/26/2007

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Disposition

Disposition Date: 12/26/2007

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	P&C Form Filing Schedule	Approved	Yes
Supporting Document	Side by Side	Approved	Yes
Form	Hospitality Services Coverage	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Hospitality Services Coverage	CG 72 49	12 07	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 CG 72 49 03 05 Previous Filing #: NWGL0505PK		CG 72 49 12 07.pdf

Hospitality Services Coverage – CG 72 49 12 07

Policy Amendment(s) Commercial General Liability Coverage Form

The following provisions are added to the Commercial General Coverage Part:

A. The following forms if attached to this policy are deleted and replaced by this endorsement:

Exclusion – Specified Therapeutic or Cosmetic Services CG 22 45
Professional Liability Exclusion – Health or Exercise Clubs or Commercially Operated Health or
Exercise Facilities CG 22 76
Professional Liability Exclusion – Spas or Personal Enhancement Facilities CG 22 90
Real Estate Agents or Brokers Errors or Omissions CG 23 01

B. The following exclusion is added to Paragraph 2. Exclusions of **Section I – Coverage A – Bodily Injury and Property Damage Liability** and Paragraph 2. of **Section I – Coverage B – Personal Injury and Advertising Injury Liability**:

With respect to **hospitality services**, this insurance does not apply to **bodily injury, property damage, or personal and advertising injury** due to or arising out of the rendering or failure to render any of the following services, treatments, instructions or advice:

1. The following Beautician and Spa services:

- a. Body piercing other than ear piercing;
- b. Tattooing or permanent makeup;
- c. Ear candling or coning;
- d. Hair dyeing with coal-tar dyes;
- e. Dyeing of eyelashes or eyebrows with dyes not approved by the Food and Drug Administration for that application;
- f. Sales of products you manufacture or which are sold under your brand or label;
- g. Hair removal by X-ray, laser or photocoagulation or any other non-electrolysis ionizing technique;
- h. Any chemical peel or exfoliation technique using solely or in any combination:
 - (1) Trichloroacetic acid (TCA) preparations with concentration over 20%;
 - (2) Carboic acid (phenol);
 - (3) Alpha hydroxy acid preparations with concentration over 30% with a pH value lower than pH 3.0;

This Form must be attached to Change Endorsement when issued after the policy is written.

One of the **Fireman's Fund Insurance Companies** as named in the policy



Secretary



President

(4) Jessner's solution preparations with concentration over 14%;

(5) Any chemical preparations using ingredients intended solely for medical use

whether administered independently or in conjunction with another facial treatment otherwise covered by this policy;

i. Skin treatments performed by means of laser or intense pulse light;

j. Any invasive or sub dermal treatment, including:

(1) Removal of moles, tattoos, warts or other growths;

(2) Plastic surgery;

(3) Sclerotherapy or other procedures to minimize the appearance of veins; or

(4) Injections of any kind;

k. Any services performed by you without a license to do so, if the law requires such a license for the service performed; or

l. Medical, psychiatric, psychological, chiropractic, surgical, dental, x-ray or nursing services.

2. The following Physical Fitness services:

a. Nutritional counseling or weight reduction treatments;

b. Sales of nutritional products you manufacture or which are sold under your label; or

c. Training for professional athletes.

3. The following Travel services:

Services other than organizing and conducting land tours on public roads and making reservations.

4. The following Real Estate services:

a. Formation, syndication, promotion offer, sale or management of any real estate investment trust, or limited partnership; including without limitation the promotion, offer or sale of any security, or interest in any real estate investment trust or limited or general partnership.

b. Real Estate or Brokerage services or timeshare sales or real property provided by any insured or any real estate broker who is either employed by, or performing work on behalf of, any insured in such capacity.

C. The following definition is added to **Section V – Definitions**:

Hospitality Services means those services you provide to your customers in the conduct of your business as a hotel; motel; inn; resort; restaurant; golf, yacht, sports, country or fitness club; health spa, beauty salon, caterer or food service provider; except as excluded Paragraph B. above.

All other terms and conditions of the policy apply.

SERFF Tracking Number: *FFDC-125391414* *State:* *Arkansas*
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Product Name: *Hospitality Services Coverage*
Project Name/Number: *Hospitality Services Coverage/NWGL1007*

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 12/26/2007

Comments:

Attachment:

NARGL1007 arpctd-1.pdf

Satisfied -Name: P&C Form Filing Schedule **Review Status:** Approved 12/26/2007

Comments:

Attachment:

Form Filing Transmittal.pdf

Satisfied -Name: Side by Side **Review Status:** Approved 12/26/2007

Comments:

Attachment:

Hospitality Services Cov Side by Side.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="border: none;">New Business</td> <td style="border: none; width: 100px;"></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 #
Fireman's Fund Insurance Company	0761

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Fireman's Fund Insurance Company	California	21873	94-1610280	
The American Insurance Company	Nebraska	21857	22-0731810	
National Surety Corporation	Illinois	21881	36-2704643	
Associated Indemnity Corporation	California	21865	22-1708002	
American Automobile Insurance Company	Missouri	21849	22-1608585	

5. Company Tracking Number	NARGL1007-F
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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
	Hilary Cheda 777 San Marin Drive Novato, CA 94998	Regulatory Analyst	415.899.6968	866.290.0671	hcheda@ffic.com

7. Signature of authorized filer	<i>Hilary Cheda</i>
8. Please print name of authorized filer	Hilary Cheda

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

9.	Type of Insurance (TOI)	17.2 Other Liability – Occurrence Only
10.	Sub-Type of Insurance (Sub-TOI)	17.2019 Professional Errors and Omissions Liability
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	
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: 02/01/2008 Renewal: 02/01/2008

Effective January 1, 2006

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 #	NARGL1007			
2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>				
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	Hospitality Services Coverage	CG7249 12-07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	CG7249 03-05	NARGL0505
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		

Hospitality Services Coverage – CG 72 49 03 05

Policy Amendment(s) Commercial General Liability Coverage Form

The following provisions are added to the Commercial General Coverage Part:

- A. The following forms if attached to this policy are deleted and replaced by this endorsement:

Exclusion – Specified Therapeutic or Cosmetic Services CG 22 45
Professional Liability Exclusion – Health or Exercise Clubs or Commercially Operated Health or Exercise Facilities CG 22 76
Professional Liability Exclusion – Spas or Personal Enhancement Facilities CG 2290
Real Estate Agents or Brokers Errors or Omissions CG 23 01

- B. The following exclusion is added to Paragraph 2. Exclusions of **Section I – Coverage A – Bodily Injury and Property Damage Liability** and Paragraph 2. of **Section I – Coverage B – Personal Injury and Advertising Injury Liability**:

With respect to **hospitality services**, this insurance does not apply to **bodily injury, property damage, or personal and advertising injury** due to or arising out of the rendering or failure to render any of the following services, treatments, instructions or advice:

1. The following Beautician and Spa services:

- a. Body piercing other than ear piercing;
- b. Tattooing or permanent makeup;
- c. Ear candling or coning;
- d. Hair dying with coal-tar dyes;
- e. Laser hair removal;
- f. Dying of eyelashes or eyebrows with dyes not approved by the Food and Drug Administration for that application;
- g. Sales of products you manufacture or which are sold under your brand or label;
- h. Hair removal by X-ray or photocoagulation or any other non-electrolysis ionizing

Hospitality Services Coverage – CG 72 49 12 07

Policy Amendment(s) Commercial General Liability Coverage Form

The following provisions are added to the Commercial General Coverage Part:

- A. The following forms if attached to this policy are deleted and replaced by this endorsement:

Exclusion – Specified Therapeutic or Cosmetic Services CG 22 45
Professional Liability Exclusion – Health or Exercise Clubs or Commercially Operated Health or Exercise Facilities CG 22 76
Professional Liability Exclusion – Spas or Personal Enhancement Facilities CG 2290
Real Estate Agents or Brokers Errors or Omissions CG 23 01

- B. The following exclusion is added to Paragraph 2. Exclusions of **Section I – Coverage A – Bodily Injury and Property Damage Liability** and Paragraph 2. of **Section I – Coverage B – Personal Injury and Advertising Injury Liability**:

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1. The following Beautician and Spa services:

- a. Body piercing other than ear piercing;
- b. Tattooing or permanent makeup;
- c. Ear candling or coning;
- d. Hair dying with coal-tar dyes;
- ~~e. Laser hair removal;~~
- e. Dying of eyelashes or eyebrows with dyes not approved by the Food and Drug Administration for that application;
- f. Sales of products you manufacture or which are sold under your brand or label;
- g. Hair removal by X-ray, **laser** or photocoagulation or any other non-electrolysis

Comments

Brings laser hair removal exclusion from prior B.I.e. in alignment with other hair removal exclusions (no coverage change)

<p>a. Nutritional counseling or weight reduction treatments;</p> <p>b. Sales of nutritional products you manufacture or which are sold under your label; or</p> <p>c. Training for professional athletes.</p> <p>3. The following Travel services: Services other than organizing and conducting land tours on public roads and making reservations.</p> <p>4. The following Real Estate services:</p> <p>a. Formation, syndication, promotion offer, sale or management of any real estate investment trust, or limited partnership; including without limitation the promotion, offer or sale of any security, or interest in any real estate investment trust or limited or general partnership.</p> <p>b. Real Estate or Brokerage services or timeshare sales or real property provided by any insured or any real estate broker who is either employed by, or performing work on behalf of, any insured in such capacity.</p> <p>C. The following definition is added to Section V – Definitions: Hospitality Services means those services you provide to your customers in the conduct of your business as a hotel; motel; inn; resort; restaurant; golf, yacht, sports, country or fitness club, caterer or food service provider; except as excluded Paragraph B. above.</p> <p>All other terms and conditions of the policy apply.</p>	<p>b. Sales of nutritional products you manufacture or which are sold under your label; or</p> <p>c. Training for professional athletes.</p> <p>3. The following Travel services: Services other than organizing and conducting land tours on public roads and making reservations.</p> <p>4. The following Real Estate services:</p> <p>a. Formation, syndication, promotion offer, sale or management of any real estate investment trust, or limited partnership; including without limitation the promotion, offer or sale of any security, or interest in any real estate investment trust or limited or general partnership.</p> <p>b. Real Estate or Brokerage services or timeshare sales or real property provided by any insured or any real estate broker who is either employed by, or performing work on behalf of, any insured in such capacity.</p> <p>C. The following definition is added to Section V – Definitions: Hospitality Services means those services you provide to your customers in the conduct of your business as a hotel; motel; inn; resort; restaurant; golf, yacht, sports, country or fitness club; health spa, beauty salon, caterer or food service provider; except as excluded Paragraph B. above.</p> <p>All other terms and conditions of the policy apply.</p>	<p>Adding health spa and beauty salon to definition of businesses providing hospitality services.</p>
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