

Filing at a Glance

Companies: Progressive Casualty Insurance Company, Progressive Classic Insurance Company, Progressive Northwestern Insurance Company, Progressive Specialty Insurance Company, United Financial Casualty Company
Product Name: Progressive Symbol Update SERFF Tr Num: PRGS-125225893 State: Arkansas
TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: AR-PC-07-025363
Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: AR 07-10-07 SYMBOL State Status:
(PPA) FILING
Filing Type: Rule Co Status: Reviewer(s): Alexa Grissom, Betty Montesi
Author: Arkansas Agency Filer Disposition Date: 07-10-2007
Date Submitted: 07-06-2007 Disposition Status: Filed
Effective Date Requested (New): 07-10-2007 Effective Date (New): 07-15-2007
Effective Date Requested (Renewal): 07-10-2007 Effective Date (Renewal):

General Information

Project Name: AR 07-10-07 Symbol Filing Status of Filing in Domicile: Authorized
Project Number: AR 07-10-07 Symbol Filing Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 07-10-2007
State Status Changed: 07-06-2007 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
Dear Ms. Grissom:

Please accept this filing as notification of the 02/07 edition of Progressive's Private Passenger Auto Symbols. The primary purpose of this edition is to generate symbols for the new 2008/2007 model year vehicles. Our proposed new business effective date for this update is July 10, 2007. This update includes vehicle additions according to the specifications of our VIN vendor. The attached insurance filing addendum has more detail concerning the additions. Attachment A contains the listing of vehicles being inserted and their assigned symbols. Thank you for your timely review and acknowledgment of this symbol filing addendum.

Sincerely,

Celeste Joyce
Product Specialist

Company and Contact

Filing Contact Information

James Roche, Product Manager

200 Westgate Parkway

Richmond, VA 23233

(804) 364-6649 [Phone]

(804) 360-4531[FAX]

Filing Company Information

Progressive Casualty Insurance Company

6300 Wilson Mills Road

Mayfield Village, OH 44143

(440) 461-5000 ext. [Phone]

CoCode: 24260

Group Code: 155

Group Name:

FEIN Number: 34-6513736

State of Domicile: Ohio

Company Type:

State ID Number:

Progressive Classic Insurance Company

c/o CT Corporation Systems

8025 Excelsior Dr, # 200

Madison, WI 53717

(608) 833-4821 ext. [Phone]

CoCode: 42994

Group Code: 155

Group Name:

FEIN Number: 39-1453002

State of Domicile: Wisconsin

Company Type: Property and
Casualty

State ID Number:

Progressive Northwestern Insurance Company

6300 Wilson Mills Road

Mayfield Village, OH 44143

(440) 461-5000 ext. [Phone]

CoCode: 42919

Group Code: 155

Group Name:

FEIN Number: 91-1187829

State of Domicile: Ohio

Company Type:

State ID Number:

Progressive Specialty Insurance Company

6300 Wilson Mills Road

Mayfield Village, OH 44143

(440) 461-5000 ext. [Phone]

CoCode: 32786

Group Code: 155

Group Name:

FEIN Number: 34-1172685

State of Domicile: Ohio

Company Type:

State ID Number:

United Financial Casualty Company

6300 Wilson Mills Rd, N72

Mayfield Village, OH 44143-2182

(440) 461-5000 ext. [Phone]

CoCode: 11770

Group Code: 155

Group Name:

FEIN Number: 36-3298008

State of Domicile: Ohio

Company Type:

State ID Number:

Filing Fees

Fee Required? Yes

Fee Amount: \$25.00

Retaliatory? Yes

Fee Explanation:

Per Company: No

Created by SERFF on 07-10-2007 05:51 PM

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United Financial Casualty Company	\$0.00	07-06-2007	
Progressive Casualty Insurance Company	\$25.00	07-06-2007	14474535
Progressive Specialty Insurance Company	\$0.00	07-06-2007	
Progressive Northwestern Insurance Company	\$0.00	07-06-2007	
Progressive Classic Insurance Company	\$0.00	07-06-2007	

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	07-10-2007	07-10-2007

Disposition

Disposition Date: 07-10-2007

Effective Date (New): 07-15-2007

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	Symbols	Filed	Yes
Supporting Document	Cover letter and Addendum	Filed	Yes

Rate Information

Rate data does NOT apply to filing.

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document- Property & Casualty	Review Status: Filed	07-10-2007
Comments:			
Attachment:	0701 transmittal forms.pdf		
Bypassed -Name:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Review Status: Filed	07-10-2007
Bypass Reason:	not required		
Comments:			
Bypassed -Name:	NAIC loss cost data entry document	Review Status: Filed	07-10-2007
Bypass Reason:	not required		
Comments:			
Satisfied -Name:	Symbols	Review Status: Filed	07-10-2007
Comments:			
Attachment:	symbols0707.pdf		
Satisfied -Name:	Cover letter and Addendum	Review Status: Filed	07-10-2007
Comments:			
Attachment:	coverletter and addendum.pdf		

Property & Casualty Transmittal Document (Revised 1/1/06)

1. Reserved for Insurance Dept. Use Only	2. Insurance Dept. 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
Progressive Group	0155

4. Company Name (s)	Domicile	NAIC #	FEIN #
Progressive Casualty Insurance Company	OH	24260	34-6513736
Progressive Classic Insurance Company	WI	42994	39-1453002
Progressive Northwestern Insurance Company	OH	42919	91-1187829
Progressive Specialty Insurance Company	OH	44288	62-1444848
United Financial Casualty Company	OH	11770	36-3298008

5. Company Tracking Number	AR 07-10-2007 Symbol Filing
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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
Celeste Joyce Drive Insurance from Progressive 200 Westgate Parkway - Suite 300 Richmond, VA 23233	Product Specialist	804-364-6764	(804)-360-4531	Celeste_Joyce@Progressive.com
7. Signature of authorized filer				
8. Please print name of authorized filer		Celeste Joyce		

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

9. Type of Insurance (TOI)	19.0 Personal Auto
10. Subtype of Insurance (Sub-TOI)	19.0001 Private Passenger Auto (PPA)
11. State Specific Product Code(s) (if applicable) [see state specific requirements]	
12. Company Program Title (marketing title)	Private Passenger Auto
13. Filing Type	Rule
14. Effective Date (s) Requested	New: 07/15/2007 Renewal:

Property & Casualty Transmittal Document---

15.	Reference Filing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	07/10/2007
19.	Status of Filing in Domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved
20.	This filing transmittal is part of Company Tracking #	AR 07-10-07 Symbol Filing

21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
<p>Please accept this filing as notification of the 02/07 edition of Progressive's Private Passenger Auto Symbols. The primary purpose of this edition is to generate symbols for the new 2008/2007 model year vehicles. Our proposed new business effective date for this update is July 10, 2007. This update includes vehicle additions according to the specifications of our VIN vendor. The attached insurance filing addendum has more detail concerning the additions. Attachment A contains the listing of vehicles being inserted and their assigned symbols. Thank you for your timely review and acknowledgment of this symbol filing addendum.</p>	

Filing Fees (Filer must provide check # and fee amount if applicable)	
22.	[If a state requires you to show how you calculated your filing fees, place that calculation below]
Check #:	EFT
Amount:	\$25.00
<p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p> <p>*** Refer to the each state's checklist for additional state specific requirements (I.e. # of additional copies required, other state specific forms, etc.)</p>	

Form Filing Schedule

(This 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 #		AR 07-10-07 Symbol Filing			
2. This filing corresponds to rate/rule filing number (company tracking number of rate/rule filing, if applicable)					
3. Description/Synopsis	Form Name/ Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number	
01	N/A	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
02		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
03		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
04		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
05		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
06		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
07		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
08		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
09		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			
10		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither			

PC FFS-1

Overall Rate Information (Complete for Multiple Company Filings Only)			
		Company Use	State Use
5a.	Overall percentage rate impact for this filing	0.0%	
5b.	Effect of Rate Filing -- Written premium change for this program		
5c.	Effect of Rate Filing -- Number of policyholders affected		
6.	Overall percentage of last rate revision		
7.	Effective Date of last rate revision		
8.	Filing Method of last filing (Prior Approval, File & Use, Flex Band, etc.)		

9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	N/A	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
02		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
03		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
04		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
05		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
06		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
07		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
08		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
09		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
10		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	

	9. Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
11		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
12		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
13		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
14		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
15		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
16		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
17		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
18		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
19		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
20		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
21		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
22		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
23		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
24		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
25		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
26		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
27		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
28		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
29		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
30		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither	

	9. Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
31		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
32		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
33		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	
34		<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	

Replacement

PC RRFS pg 5 of 5

Replacement

**PROGRESSIVE INSURANCE SYMBOL ADDENDUM-EDITION 02/07
ATTACHMENT A: S2005 INSERTS**

NO.	MY	MAKE	MODEL	BODY	WHL	CYL	S2005			
							MKE	MDL	STY	AUX
1	2008	FORD	CRN VIC POL INTCPTR	4 DOOR SEDAN		8	FD	CP	48	XX
2	2008	FORD	CROWN VIC LX/SPORT	4 DOOR SEDAN		8	FD	CV	48	XX
3	2008	FORD	CROWN VICTORIA	4 DOOR SEDAN		8	FD	CV	48	XX
4	2008	FORD	CROWN VICTORIA S	4 DOOR SEDAN		8	FD	CV	48	XX
5	2008	FORD	FIVE HUNDRED LTD	4 DOOR SEDAN		6	FD	FH	46	XX
6	2008	FORD	FIVE HUNDRED LTD AWD	4 DOOR SEDAN		6	FD	FH	46	XX
7	2008	FORD	FIVE HUNDRED SEL	4 DOOR SEDAN		6	FD	FH	46	XX
8	2008	FORD	FIVE HUNDRED SEL AWD	4 DOOR SEDAN		6	FD	FH	46	XX
9	2007	ACURA	TL	4 DOOR SEDAN		6	AC	TL	46	XX
10	2007	ACURA	TL TYPE-S	4 DOOR SEDAN		6	AC	TL	46	XX
11	2007	BMW	M COUPE	2 DOOR COUPE		6	BM	MC	26	XX
12	2007	BMW	M ROADSTER	ROADSTER		6	BM	MR	C6	XX
13	2007	BMW	M6	2 DOOR COUPE		10	BM	6S	2C	XX
14	2007	BMW	Z4 3.0i	ROADSTER		6	BM	ZS	C6	XX
15	2007	BMW	Z4 3.0Si	2 DOOR COUPE		6	BM	ZS	26	XX
16	2007	BMW	Z4 3.0Si	ROADSTER		6	BM	ZS	C6	XX
17	2007	CHEVROLET	COBALT LS	2 DOOR COUPE		4	CH	CB	24	XX
18	2007	CHEVROLET	K1500 SILVERADO	PICKUP	4X4	8	CH	15	PL	XX
19	2007	CHRYSLER	SEBRING LIMITED	4 DOOR SEDAN		4	CY	SB	44	XX
20	2007	CHRYSLER	SEBRING TOURING	4 DOOR SEDAN		4	CY	SB	44	XX
21	2007	DODGE	GRAND CARAVAN SE	SPORT VAN	4X2	6	DG	GC	V6	XX
22	2007	FORD	ECON E350 SUPR DTY	BUS	4X2	8	FD	EC	GX	XX
23	2007	FORD	ECON E350 SUPR DTY	CARGO VAN	4X2	10	FD	EC	GX	XX
24	2007	FORD	ECON E350 SUPR DTY	CARGO VAN	4X2	8	FD	EC	GX	XX
25	2007	FORD	ECON E350 SUPR DTY	EXT CARGO VAN	4X2	10	FD	EC	GX	XX
26	2007	FORD	ECON E350 SUPR DTY	EXT CARGO VAN	4X2	8	FD	EC	GX	XX
27	2007	FORD	ECON E350 SUPR DTY	EXT SPORT VAN	4X2	8	FD	EC	VX	XX
28	2007	FORD	ECON E350 SUPR DTY	SPORT VAN	4X2	8	FD	EC	VX	XX
29	2007	FORD	ECONOLINE E150	CARGO VAN	4X2	8	FD	EA	GX	XX
30	2007	FORD	ECONOLINE E150	SPORT VAN	4X2	8	FD	EA	VX	XX
31	2007	FORD	ECONOLINE E250	CARGO VAN	4X2	8	FD	EB	GX	XX
32	2007	FORD	ECONOLINE E250	EXT CARGO VAN	4X2	8	FD	EB	GX	XX
33	2007	GMC	SIERRA C1500	4 DOOR EXT CAB	4X2	6	GM	15	E6	XX
34	2007	HONDA	ACCORD EX	4 DOOR SEDAN		6	HD	AC	46	XX
35	2007	HONDA	ACCORD LX	2 DOOR COUPE		4	HD	AC	24	XX
36	2007	HONDA	CR-V EX	4 DOOR WAGON	4X2	4	HD	CR	54	XX
37	2007	HONDA	CR-V EX	4 DOOR WAGON	4X4	4	HD	CR	5H	XX
38	2007	HONDA	CR-V EX-L	4 DOOR WAGON	4X2	4	HD	CR	5H	XX
39	2007	HONDA	CR-V EX-L	4 DOOR WAGON	4X4	4	HD	CR	5H	XX
40	2007	HONDA	CR-V LX	4 DOOR WAGON	4X2	4	HD	CR	54	XX
41	2007	HONDA	CR-V LX	4 DOOR WAGON	4X4	4	HD	CR	5H	XX
42	2007	HYUNDAI	ELANTRA GLS/SE/LTD	4 DOOR HATCHBACK		4	HY	EL	44	XX
43	2007	HYUNDAI	ELANTRA GLS/SE/LTD	4 DOOR SEDAN		4	HY	EL	44	XX
44	2007	HYUNDAI	TIBURON GS	2 DOOR COUPE		4	HY	TB	24	XX
45	2007	HYUNDAI	TIBURON GT/SE/GT LTD	2 DOOR COUPE		6	HY	TB	26	XX
46	2007	INFINITI	G35	4 DOOR SEDAN		6	FN	GS	46	XX
47	2007	INFINITI	G35 AWD	4 DOOR SEDAN		6	FN	GS	46	XX
48	2007	KIA	RONDO LX/EX	STATION WAGON		6	KA	R0	W4	GN
49	2007	KIA	RONDO/LX/EX	STATION WAGON		4	KA	R0	W6	GZ
50	2007	LAND ROVER	LR3 HSE	4 DOOR WAGON	4X4	8	LR	LR	5L	XX
51	2007	MERCURY	MILAN AWD	4 DOOR SEDAN		6	MC	ML	46	XX
52	2007	MERCURY	MILAN PREMIER AWD	4 DOOR SEDAN		6	MC	ML	46	XX
53	2007	MINI	COOPER	2 DOOR HATCHBACK		4	MN	CP	24	XX
54	2007	MINI	COOPER S	2 DOOR HATCHBACK		4	MN	CS	24	XX

**PROGRESSIVE INSURANCE SYMBOL ADDENDUM-EDITION 02/07
ATTACHMENT A: S2005 INSERTS**

NO.	MY	MAKE	MODEL	BODY	WHL	CYL	S2005			
							MKE	MDL	STY	AUX
55	2007	MINITUBISHI	OUTLANDER ES/LS	4 DOOR WAGON	4X2	6	MT	LD	56	XX
56	2007	MINITUBISHI	OUTLANDER LS	4 DOOR WAGON	4X4	6	MT	LD	5K	XX
57	2007	MINITUBISHI	OUTLANDER XLS	4 DOOR WAGON	4X2	6	MT	LD	56	XX
58	2007	MINITUBISHI	OUTLANDER XLS	4 DOOR WAGON	4X4	6	MT	LD	5K	XX
59	2007	NISSAN	ALTIMA 2.5/2.5S	4 DOOR SEDAN		4	NS	AL	44	XX
60	2007	NISSAN	ALTIMA 3.5SE/3.5SL	4 DOOR SEDAN		6	NS	AL	46	XX
61	2007	NISSAN	ALTIMA HYBRID	4 DOOR SEDAN		4	NS	AH	44	KP
62	2007	NISSAN	ARMADA	4 DOOR WAGON	4X4	8	NS	AM	5L	XX
63	2007	NISSAN	SENTRA 2.0/2.0S/2.0S	4 DOOR SEDAN		4	NS	SE	44	XX
64	2007	NISSAN	VERSA	4 DOOR SEDAN		4	NS	VS	44	KD
65	2007	SATURN	OUTLOOK XE	4 DOOR WAGON	4X2	6	SA	LK	56	AV
66	2007	SATURN	OUTLOOK XE AWD	4 DOOR WAGON	4X4	6	SA	LK	5K	AK
67	2007	SATURN	OUTLOOK XR	4 DOOR WAGON	4X2	6	SA	LK	56	AV
68	2007	SATURN	OUTLOOK XR AWD	4 DOOR WAGON	4X4	6	SA	LK	5K	AK
69	2007	SUBARU	IMPREZA 2.5I	4 DOOR SEDAN		4	SU	PR	44	XX
70	2007	SUBARU	IMPREZA 2.5I	STATION WAGON		4	SU	PR	W4	XX
71	2007	SUBARU	IMPREZA OUTBK SP AWD	STATION WAGON		4	SU	PR	W4	XX
72	2007	SUBARU	IMPREZA WRX	4 DOOR SEDAN		4	SU	PX	44	XX
73	2007	SUBARU	IMPREZA WRX	STATION WAGON		4	SU	PX	W4	XX
74	2007	SUBARU	IMPREZA WRX STI	4 DOOR SEDAN		4	SU	PX	44	XX
75	2007	SUBARU	IMPREZA WRX STI LTD	4 DOOR SEDAN		4	SU	PX	44	XX
76	2007	SUBARU	IMPREZA WRX TR	4 DOOR SEDAN		4	SU	PX	44	XX
77	2007	SUBARU	IMPRZ OTBK SPT/SP ED	STATION WAGON		4	SU	PR	W4	XX
78	2007	SUBARU	LEGACY 2.5 GT	4 DOOR SEDAN		4	SU	LE	44	XX
79	2007	SUZUKI	SX4	4 DOOR HATCHBACK		4	SZ	SX	44	NQ
80	2007	VOLKSWAGEN	JETTA WOLFSBURG ED	4 DOOR SEDAN		5	VK	JE	45	XX
81	2007	VOLKSWAGEN	NEW BEETLE 2.5L	CONVERTIBLE		5	VK	BE	C5	XX
82	2007	VOLKSWAGEN	NEW BEETLE2.5L LEA	2 DOOR HATCHBACK		5	VK	BE	25	XX
83	2007	VOLKSWAGEN	NEW BEETLE2.5L LEA	CONVERTIBLE		5	VK	BE	C5	XX
84	2007	VOLKSWAGEN	NEW BEETLE2.5L LUX	2 DOOR HATCHBACK		5	VK	BE	25	XX
85	2007	VOLKSWAGEN	NEW BEETLE2.5L LUX	CONVERTIBLE		5	VK	BE	C5	XX
86	2005	FORD	ECONOLINE E150	SPORT VAN	4X2	8	FD	EA	VX	XX



Celeste Joyce, Product Specialist
200 Westgate Pkwy, Suite 300
Richmond, VA 23233
(804) 364-6774

July 6, 2007

Ms. Alexa Grissom
Senior Rate & Form Analyst
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

Subject: Progressive Casualty Insurance Company
Progressive Classic Insurance Company
Progressive Northwestern Insurance Company
Progressive Specialty Insurance Company
United Financial Casualty Company
Private Passenger Automobile Rate Filing

Private Passenger Auto Symbols
Symbol Filing Addendum

Dear Ms. Grissom:

Please accept this filing as notification of the 02/07 edition of Progressive's Private Passenger Auto Symbols. The primary purpose of this edition is to generate symbols for the new 2008/2007 model year vehicles. Our proposed new business effective date for this update is July 10, 2007. This update includes vehicle additions according to the specifications of our VIN vendor. The attached insurance filing addendum has more detail concerning the additions. Attachment A contains the listing of vehicles being inserted and their assigned symbols. Thank you for your timely review and acknowledgment of this symbol filing addendum.

Sincerely,

Celeste Joyce
Product Specialist

Enclosures

Insurance Filing Addendum

Private Passenger Auto Symbol

Effective Date : July 10, 2007

Edition Label : 02/07

Prior Edition Label : 12/06

Inserts

The 02/07 edition is primarily composed of new vehicles that we did not pick up with our last update, and some non rate impacting corrections. Our VIN vendor has provided new information that now allows us to symbol these vehicles. There are a total of 86 additional vehicle descriptions. In addition, there are 13 vehicle descriptions containing symbol changes with no rate impact. See Attachment A for the list of new vehicle descriptions and their corresponding symbols.