

SERFF Tracking Number: FARM-125267938 State: Arkansas
Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025895
Company Tracking Number: FAR0740-205560
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: F-AR-2007-PA-F
Project Name/Number: AR New Car Pledge Coverage J6470, 1st ed/A-06-904

Filing at a Glance

Company: Farmers Insurance Company, Inc.

Product Name: F-AR-2007-PA-F

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto
(PPA)

Filing Type: Form

SERFF Tr Num: FARM-125267938 State: Arkansas

SERFF Status: Closed

Co Tr Num: FAR0740-205560

Co Status:

Authors: Vivian Alarcon, Anahit
Bekarian, Jeanette Campion,
Gayane Rupchian, Mina Villegas,
Chris SalvaCruz, Edmond Balaian

Date Submitted: 08/24/2007

State Tr Num: AR-PC-07-025895

State Status:

Reviewer(s): Alexa Grissom, Betty
Montesi, Brittany Yielding

Disposition Date: 08/27/2007

Disposition Status: Approved

Effective Date Requested (New): 02/01/2008

Effective Date Requested (Renewal): 02/01/2008

Effective Date (New): 02/01/2008

Effective Date (Renewal):

General Information

Project Name: AR New Car Pledge Coverage J6470, 1st ed

Project Number: A-06-904

Reference Organization:

Reference Title:

Filing Status Changed: 08/27/2007

State Status Changed: 08/27/2007

Corresponding Filing Tracking Number:

Filing Description:

We respectfully submit for your review and approval a new optional endorsement, Declining Deductible Endorsement J6471 1st Edition. This endorsement, when selected, will reduce either the collision or both the collision and comprehensive deductibles our customers have to pay when their vehicle is repaired. This decline is subject to the number of years our customers are free of chargeable accidents. With a maximum benefit of either a \$500 reduction to their deductible or if their respective deductible is less than \$500 then their entire deductible. In no event will their deductible be reduced below \$0.

Status of Filing in Domicile: Not Filed

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

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 Product Name: F-AR-2007-PA-F
 Project Name/Number: AR New Car Pledge Coverage J6470, 1st ed/A-06-904

We propose that this filing be applicable to all policies effective on or after February 1, 2008.

Company and Contact

Filing Contact Information

Feliksa Barran, Manager - Business
 Implementation
 4700 Wilshire Blvd.
 Los Angeles, CA 90010

Feliksa_Barran@farmersinsurance.com
 (323) 932-3056 [Phone]
 () -[FAX]

Filing Company Information

Farmers Insurance Company, Inc.
 10850 Lowell Avenue
 Overland Park, KS 66210-1667
 (323) 932-3056 ext. [Phone]

CoCode: 21628
 Group Code: 212
 Group Name:
 FEIN Number: 48-0609012

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

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: \$50.00 is the required forms filing fee amount for each company -- in this case, Farmers Insurance Company, Inc. Check will be mailed via DHL on Friday, 07-24-2007.
 Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Alexa Grissom	08/27/2007	08/27/2007

SERFF Tracking Number: FARM-125267938 *State:* Arkansas
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Disposition

Disposition Date: 08/27/2007

Effective Date (New): 02/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: FARM-125267938 State: Arkansas
 Filing Company: Farmers Insurance Company, Inc. State Tracking Number: AR-PC-07-025895
 Company Tracking Number: FAR0740-205560
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 Product Name: F-AR-2007-PA-F
 Project Name/Number: AR New Car Pledge Coverage J6470, 1st ed/A-06-904

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover memo	Approved	Yes
Form	New Car Pledge 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	New Car Pledge Coverage	J6470, 1st ed	4-07	Endorsement/Amendment/Conditions		44.00	J6470, 1sted.pdf

NEW CAR PLEDGE COVERAGE

J6470
1st Edition

This coverage applies only to the vehicle(s) for which this endorsement is listed on the Declarations page. For an additional premium, it is agreed your policy is amended as follows:

Under **PART IV DAMAGE TO YOUR CAR, Special Limits of Liability**, the following is added:

If your **insured car** is determined to be a total loss within two years of the date this endorsement is applied, or within 24,000 miles of usage, whichever occurs first, we will pay the replacement cost a new model of your **insured car**, less any applicable deductible. If a vehicle of the same make, model and class size is not available, we will pay the replacement cost of a comparable new, comparably equipped car, less any applicable deductible. If the replacement cost of your **insured car** exceeds the manufacturers suggested retail price of the total loss vehicle, the maximum amount recoverable under this coverage shall not exceed 110% of the original manufacturer's suggested retail price of that vehicle.

This coverage applies to your **insured car** provided that:

1. you or a **family member** are the original owner of the **insured car**;
2. the **insured car** is added within 90 days of the date your or a **family member** take delivery;
3. the **insured car** was one of the following at the time of purchase, as determined by the vehicle manufacturer:
 - a. the current vehicle model year;
 - b. a future vehicle model year;
 - c. the vehicle model year immediately preceding the current vehicle model year; and
4. The **insured car** was purchased in and designed for use in the United States.

This endorsement is part of your policy. It supersedes and controls anything to the contrary. It is otherwise subject to all other terms of the policy.

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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 08/27/2007

Comments:

Attachment:

P&C transmittal.pdf

Satisfied -Name: Cover memo **Review Status:** Approved 08/27/2007

Comments:

Attachment:

Cover memo.pdf

Property & Casualty Transmittal Document

<p>1. Reserved for Insurance Dept. Use Only</p>	<p>2. Insurance Department Use only</p> <p>a. Date the filing is received:</p> <p>b. Analyst:</p> <p>c. Disposition:</p> <p>d. Date of disposition of the filing:</p> <p>e. Effective date of filing:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></td> </tr> </table> <p>f. State Filing #:</p> <p>g. SERFF Filing #:</p> <p>h. Subject Codes</p>	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #			
Farmers Insurance Group of Companies	0212			
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Farmers Insurance Company, Inc.	CA	21628	48-0609012	

5. Company Tracking Number	FAR0740-205560
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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
	Jonathon Miller 4700 Wilshire Blvd, A1-3 Los Angeles, CA 90010	Contracts Manager	323-930-4214	323-930-4725	
7.	Signature of authorized filer		<i>Mina Villegas</i>		
8.	Please print name of authorized filer		Mina Villegas		

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

9.	Type of Insurance (TOI)	Personal Auto
10.	Sub-Type of Insurance (Sub-TOI)	Private Passenger Auto
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	19.0000
12.	Company Program Title (Marketing title)	J6470, 1st ed
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: 2/1/2008 Renewal: 2/1/2008
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	August 21, 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 #	FAR0740-205560
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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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Please see filing memorandum

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 #: Not available yet 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.)



FARMERS

4700 Wilshire Blvd
Los Angeles, CA 90010
Bus number: (323) 930-4214
Fax number: (323) 930-4725
www.farmersinsurance.com

August 20, 2007

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

SUBJECT: New Car Pledge Coverage J6470, 1st edition

Company Name	Reference #	NAIC #	Group #
Farmers Insurance Company, Inc.	FAR0740-205560	21628	0212

Dear Commissioner:

We respectfully submit for your review and approval a new optional endorsement, **New Car Pledge Coverage J6470 1st Edition**. This endorsement, when selected, will amend the damage to the car special limits of liability portion of the policy. This coverage expansion will allow our customers who have purchased new vehicles to receive the replacement cost of a new vehicle in the event their vehicle is determined to be a total loss. This coverage is subject to the vehicle being two years old or less and not driven more than 24,000 miles.

Should you have any questions, please feel free to contact Jonathon Miller at (323) 930-4214.

We propose that this filing be applicable to all policies effective on or after **February 1, 2008**.

Thank you for your cooperation in this matter.

Very truly yours,
FARMERS INSURANCE COMPANY, INC

By: Jonathon L. Miller, JD, GCA
Contract Manager
Personal Lines/Underwriting/Contracts