

SERFF Tracking Number: STNA-125273114 State: Arkansas
Filing Company: State National Insurance Company Inc. State Tracking Number: AR-PC-07-025898
Company Tracking Number: AR-AG-CP-07-F
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
Product Name: Cotton Package Program - Property Dec Page
Project Name/Number: /

Filing at a Glance

Company: State National Insurance Company Inc.

Product Name: Cotton Package Program - SERFF Tr Num: STNA-125273114 State: Arkansas

Property Dec Page

TOI: 01.0 Property

SERFF Status: Closed

State Tr Num: AR-PC-07-025898

Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Co Tr Num: AR-AG-CP-07-F

State Status:

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,
Llyweyia Rawlins, Brittany Yielding

Author: John Battles

Disposition Date: 08/27/2007

Date Submitted: 08/26/2007

Disposition Status: Approved

Effective Date Requested (New): On Approval

Effective Date (New): 08/27/2007

Effective Date Requested (Renewal): On Approval

Effective Date (Renewal):
08/27/2007

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 08/27/2007

State Status Changed: 08/27/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

State National Insurance Company, a member of Insurance Services Office (ISO), is submitting an independent commercial property declarations page as part of its AG Guaranty Cotton Package Policy Program. State National Insurance Company will be using commercial property forms filed and approved on its behalf by ISO.

The corresponding rates and rules are not required to be submitted. The Commercial Inland Marine and Ocean Marine portions of the AG Guaranty Cotton Package Policy Program were submitted earlier under separate cover.

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Enclosed for your review:

- State Required Filing Forms
- Form AG – CPC (06/07) – Commercial Property Declarations

Company and Contact

Filing Contact Information

John Battles, johnbattles@ircllc.com
 IRC (941) 926-0144 [Phone]
 Sarasota, FL 34231 () -[FAX]

Filing Company Information

State National Insurance Company Inc. CoCode: 12831 State of Domicile: Texas
 8200 Anderson Boulevard Group Code: 93 Company Type: Property & Casualty
 Fort Worth, TX 76120 Group Name: State ID Number:
 (800) 877-4567 ext. [Phone] FEIN Number: 75-1980552

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: 1 Form
 Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
9297	\$50.00	08/24/2007

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	08/27/2007	08/27/2007

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Disposition

Disposition Date: 08/27/2007

Effective Date (New): 08/27/2007

Effective Date (Renewal): 08/27/2007

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: STNA-125273114 State: Arkansas
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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, Authorization	Approved	Yes
Form	Commercial Property Declarations	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Commercial Property Declarations	AG – CPC	06/07 (06/07)	Declaration New s/Schedule		0.00	AG - CPCPD 06 07.pdf

Agriculture Guaranty, LLC

Commercial Property Declarations

State National Insurance Company

8200 Anderson Boulevard, Fort Worth, TX 76120
 Phone: 817-265-2000

Issued by: **Agriculture Guaranty, LLC**

Insured:

Policy No. <CPOL.POLICY.POL>

<CUST.INS.NAME>

Supplemental Declarations is attached:Error! Reference source not found.

Policy Period: From <CPOL.POLICY.EFF> To <CPOL.POLICY.EXP>
 Both at 12:01 A.M. Standard Time at the place where the risk is located.

Prem. Bldg.

Location, Construction and Occupancy

<APP. .PR.P REMI SE_N UMB ER>	<APP. PR.BU ILDIN G_NU MBER >	<APP.PR.STREET_FOR_OFF_PREM_POWER> <APP.PR.CITY_FOR_OFF_PREM_POWER> <APP.PR.STATE_FOR_OFF_PREM_POWER>, <APP.PR.ZIPCODE_FOR_OFF_PREM_POW> - <APP.PR.NAME_FOR_OFF_PREM_POWER>
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Coverage Provided – Insurance at the Described Premises Applies only for Coverages for which a Limit of Insurance is shown

Prem. No.	Bldg. No.	Coverage	Limit of Insurance	Covered Caused of Loss	Co-Insurance	Rates

Optional Coverages - Applicable only when entries are made in the Schedule Below The Extra Expense Coverage Limits on Loss Payment.

Prem. No.	Bldg. No.	Agreed Vale Expiration Date	Amount	Replacement Cost (X)	
				Building	Personal Property

Prem. No.	Bldg. No.	Inflation Guard (Percentage)		†† Monthly Limit of Indemnity (Fraction)	†† Maximum Period Of Indemnity (X)	†† Extended Period of Indemnity (Days)
		Building	Personal Property			

Mortgage Holder(s) †† Applies to Business Income Only

Prem. No.	Bldg. No.	Mortgage Holder Name and Mailing Address

Deductible	\$
Earthquake Deductible	10% deductible subject to a minimum deductible of \$25,000.00
Premium for this Coverage Part:	\$

Forms and Endorsements: (Other than applicable Forms and Endorsements shown elsewhere in the policy) † : IL AG 01 10 9

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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:

AR F NAIC Transmittal.pdf

Satisfied -Name: Cover Letter, Authorization **Review Status:** Approved 08/27/2007

Comments:

Attachments:

AR Cover Letter.pdf

FAL-AG-AR-CP F 05-25-2007.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 #
N/A	000

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
State National Insurance Company, Inc.	TX	12831	75-1980552	

5. Company Tracking Number	AR-AG-CP-07-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
Jeremy Battles, IRC 50 Broad Street, Suite 501 New York, NY 10004	Senior Analyst	212-571-3989	212-571-2502	jeremybattles@irc.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Jeremy W. Battles

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

9. Type of Insurance (TOI)	1.0 - Property
10. Sub-Type of Insurance (Sub-TOI)	1.0001 Commercial Property (Fire and Allied Lines)
11. State Specific Product code(s) (if applicable)[See State Specific	N/A
12. Company Program Title (Marketing title)	Cotton Package Policy Program
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: Upon Approval Renewal: Upon Approval
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	8/26/2007
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # AR-AG-CP-07-F

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

State National Insurance Company, a member of Insurance Services Office (ISO), is submitting an independent commercial property declarations page as part of its AG Guaranty Cotton Package Policy Program. State National Insurance Company will be using commercial property forms filed and approved on its behalf by ISO.

The corresponding rates and rules are not required to be submitted. The Commercial Inland Marine and Ocean Marine portions of the AG Guaranty Cotton Package Policy Program were submitted earlier under separate cover.

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 #: 9297
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 #	AR-AG-CP-07-F			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	AR-AG-CP-07-R			
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	Commercial Property Declarations	AG – CPC (06/07)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
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			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



Insurance Regulatory Consultants LLC

filing on behalf of **STATE NATIONAL INSURANCE COMPANY**

Submitted via SERFF

August 22, 2007

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

Please be advised that Insurance Regulatory Consultants (IRC) has been appointed to submit this filing on behalf of **State National Insurance Company**. A copy of this authorization is attached to this filing.

**Re: State National Insurance Company
NAIC #: 000-12831; FEIN #: 75-1980552
AG Guaranty – Cotton Package Policy Program
Commercial Property Form Filing
Company Filing Designation Number: AR-AG-CP-07-F
Proposed Effective Date: Upon Approval
State of Arkansas**

Dear Commissioner Bowman:

State National Insurance Company, a member of Insurance Services Office (ISO), is submitting an independent commercial property declarations page as part of its AG Guaranty Cotton Package Policy Program. State National Insurance Company will be using commercial property forms filed and approved on its behalf by ISO.

The corresponding rates and rules are not required to be submitted. The Commercial Inland Marine and Ocean Marine portions of the AG Guaranty Cotton Package Policy Program were submitted earlier under separate cover.

Enclosed for your review:

- State Required Filing Forms
- Form AG – CPC (06/07) – Commercial Property Declarations

A check in the amount of **\$50.00** was sent to cover the required filing fee.

We ask that this filing become effective for all policies effective upon approval.

Thank you for your prompt review and consideration of this filing. Should you need any additional information or have any questions, please do not hesitate to contact me.

Sincerely,

Jeremy W. Battles - Insurance Regulatory Consultants, LLC
(212) 571-3989 (phone)
jeremybattles@irccllc.com (e-mail)

filing on behalf of **STATE NATIONAL INSURANCE COMPANY**



May 25, 2007

Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201

**Re: Letter of Filing Authorization
State National Insurance Company, Inc.
AG Guaranty – Cotton Package Policy Program
Commercial Property
Forms Filing**

Dear Ladies/Gentlemen:

This letter will certify that IRC, Insurance Regulatory Consultants, LLC has been given full authorization to submit the captioned filing on behalf of State National Insurance Company, Inc. This authorization extends to all correspondence related to the referenced filing only. It does not apply to any subsequent filings made after the approval of the referenced filing.

Please direct all correspondence in relation to this filing directly to IRC, 50 Broad Street Suite 501, New York, NY 10004. Should you have any questions concerning this filing, please contact IRC at (212) 571-3989. Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "David M. Cleff", written over a light blue horizontal line.

David M. Cleff
Senior Vice President and General Counsel

Cc: File (AG Guaranty – Cotton Package Policy Program – Commercial Property)