

SERFF Tracking Number: CNNB-125302953 State: Arkansas
Filing Company: The Cincinnati Insurance Company State Tracking Number: AR-PC-07-026215
Company Tracking Number: H-07-2928-AR
TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
Product Name: H-07-2928-AR
Project Name/Number: /1056

Filing at a Glance

Company: The Cincinnati Insurance Company

Product Name: H-07-2928-AR

TOI: 04.0 Homeowners

Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations

Filing Type: Rule

SERFF Tr Num: CNNB-125302953 State: Arkansas

SERFF Status: Closed

Co Tr Num: H-07-2928-AR

Co Status:

Author: David Nutt

Date Submitted: 09/25/2007

State Tr Num: AR-PC-07-026215

State Status:

Reviewer(s): Becky Harrington,
Betty Montesi

Disposition Date: 09/26/2007

Disposition Status: Filed

Effective Date Requested (New): 04/01/2008

Effective Date Requested (Renewal): 04/01/2008

Effective Date (New): 04/01/2008

Effective Date (Renewal):

04/01/2008

General Information

Project Name:

Project Number: 1056

Reference Organization:

Reference Title:

Filing Status Changed: 09/26/2007

State Status Changed: 09/25/2007

Corresponding Filing Tracking Number:

Filing Description:

New or

Revised Page Replaced Page Description of Change

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

CD-7 (4/08)f CD-7 (1/08)f 14. AUTOMATIC WATER SHUT-OFF SYSTEM CREDIT – introduced.

Company and Contact

Filing Contact Information

SERFF Tracking Number: CNNB-125302953 State: Arkansas
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Dave Nutt, Senior Filings Specialist
6200 S. Gilmore Road
Fairfield, OH 45014

dave_nutt@cinfin.com
(513) 870-2887 [Phone]
(513) 881-8885[FAX]

Filing Company Information

The Cincinnati Insurance Company
6200 S. Gilmore Rd.
Fairfield, OH 45014
(513) 870-2000 ext. [Phone]

CoCode: 10677
Group Code: 244
Group Name:
FEIN Number: 31-0542366

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

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Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No
Fee Explanation:
Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|----------------------------------|---------|----------------|---------------|
| The Cincinnati Insurance Company | \$25.00 | 09/25/2007 | 15794318 |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|--------|------------------|------------|----------------|
| Filed | Becky Harrington | 09/26/2007 | 09/26/2007 |

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State: Arkansas

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TOI: 04.0 Homeowners

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Project Name/Number: /1056

Disposition

Disposition Date: 09/26/2007

Effective Date (New): 04/01/2008

Effective Date (Renewal): 04/01/2008

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CNNB-125302953 State: Arkansas
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 Product Name: H-07-2928-AR
 Project Name/Number: /1056

| Item Type | Item Name | Item Status | Public Access |
|---------------------|---|-------------|---------------|
| Supporting Document | Uniform Transmittal Document-Property & Casualty | Filed | Yes |
| Supporting Document | HPCS-Homeowners Premium Comparison Survey | Filed | Yes |
| Supporting Document | NAIC Loss Cost Filing Document for OTHER than Workers' Comp | | No |
| Rate | manual page | Filed | Yes |

| | | | |
|---------------------------------|---|-------------------------------|--|
| <i>SERFF Tracking Number:</i> | <i>CNNB-125302953</i> | <i>State:</i> | <i>Arkansas</i> |
| <i>Filing Company:</i> | <i>The Cincinnati Insurance Company</i> | <i>State Tracking Number:</i> | <i>AR-PC-07-026215</i> |
| <i>Company Tracking Number:</i> | <i>H-07-2928-AR</i> | | |
| <i>TOI:</i> | <i>04.0 Homeowners</i> | <i>Sub-TOI:</i> | <i>04.0000 Homeowners Sub-TOI Combinations</i> |
| <i>Product Name:</i> | <i>H-07-2928-AR</i> | | |
| <i>Project Name/Number:</i> | <i>/1056</i> | | |

Rate Information

Rate data does NOT apply to filing.

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Rate/Rule Schedule

| Review Status: | Exhibit Name: | Rule # or Page #: | Rate Action | Previous State Filing Attachments Number: |
|----------------|---------------|-------------------|-------------|---|
| Filed | manual page | CD-7 (4/08)f | Replacement | CD-7 (1/08)f AR HO 04-08 D.pdf |

THE CINCINNATI INSURANCE COMPANIES

ARKANSAS HOMEOWNERS

13. BUILDING CODE EFFECTIVENESS GRADING (Cont'd)

c. Credit Factors

(1) Windstorm or Hail Factors

(a) HO3, Executive and Executive Classic™

| Grade | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Ungraded |
|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|
| Territory | | | | | | | | | | | |
| All | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |

(b) Tenants Broad and Tenants Special

| Grade | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Ungraded |
|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|
| Territory | | | | | | | | | | | |
| All | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |

(c) Condo Broad and Condo Special

| Grade | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Ungraded |
|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|
| Territory | | | | | | | | | | | |
| All | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |

(2) Earthquake Factors

| Grade | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Ungraded |
|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|
| Territory | | | | | | | | | | | |
| All | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |

2. Individual Grading

For any building classified as Grade 1 based upon certification as set forth in Paragraph C., refer to Company for rating.

14. PACKAGE CREDIT

Homeowners and Condominium forms qualify for a 5% credit if the policy is packaged with a Cincinnati Insurance Company Personal Auto policy. This credit is also allowed if the insured's personal auto is provided by their employer and insured on a Cincinnati Insurance Company Commercial Auto policy. **Tenants forms are not eligible.**

15. AUTOMATIC WATER SHUT-OFF SYSTEM CREDIT

Homeowners and Condominium owner-occupied residences (primary or secondary) qualify for a 5% credit where an automatic water shut-off system has been installed. This credit is for any system that detects leaks or changes in water pressure and activates a valve that stops water flow into the home. **Tenants forms are not eligible.**

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status:

Filed

09/26/2007

Comments:

Attachment:

Transmittal.F777AR_0213071.pdf

Bypassed -Name: NAIC Loss Cost Filing Document
for OTHER than Workers' Comp

Review Status:

09/25/2007

Bypass Reason: N/A

Comments:

| | |
|---|---|
| 17. Reference Organization # & Title | |
| 18. Company's Date of Filing | 9/25/07 |
| 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 # | H-07-2928-AR |
|--|--------------|

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

| New or Revised Page | Replaced Page | Description of Change |
|---------------------|---------------|--|
| CD-7 (4/08)f | CD-7 (1/08)f | 14. AUTOMATIC WATER SHUT-OFF SYSTEM CREDIT – introduced. |

| |
|---|
| 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 #: N/A - EFT CNNB-125302953 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.)**