

SERFF Tracking Number: TRVD-125300450 State: Arkansas  
 First Filing Company: NIPPONKOA Insurance Company State Tracking Number: AR-PC-07-026195  
 Ltd.,(U.S.Branch), ...  
 Company Tracking Number: 2007-09-0058-F  
 TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft  
 Product Name: ISO Crime & Fidelity Multistate Non-Adoption  
 Project Name/Number: ISO Crime & Fidelity Multistate Non-Adoption/2007-09-0058-F

## Filing at a Glance

Companies: NIPPONKOA Insurance Company Ltd.,(U.S.Branch), The Charter Oak Fire Insurance Company, The Phoenix Insurance Company, The Travelers Indemnity Company, The Travelers Indemnity Company of America, The Travelers Indemnity Company Of Connecticut, Travelers Property Casualty Company of America

Product Name: ISO Crime & Fidelity Multistate SERFF Tr Num: TRVD-125300450 State: Arkansas  
 Non-Adoption

TOI: 26.0 Burglary & Theft	SERFF Status: Closed	State Tr Num: AR-PC-07-026195
Sub-TOI: 26.0001 Commercial Burglary & Theft	Co Tr Num: 2007-09-0058-F	State Status:
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Authors: Brenda Dinnald, Diana Grodotzke	Disposition Date: 09/28/2007
	Date Submitted: 09/24/2007	Disposition Status: Filed
Effective Date Requested (New): 10/01/2007		Effective Date (New): 10/01/2007
Effective Date Requested (Renewal): 10/01/2007		Effective Date (Renewal): 10/01/2007

## General Information

Project Name: ISO Crime & Fidelity Multistate Non-Adoption	Status of Filing in Domicile: Pending
Project Number: 2007-09-0058-F	Domicile Status Comments:
Reference Organization: ISO	Reference Number: CR-2006-OFR06
Reference Title: ISO Non-Adoption	Advisory Org. Circular: LI-CR-2007-021
Filing Status Changed: 09/28/2007	
State Status Changed: 09/24/2007	Deemer Date:
Corresponding Filing Tracking Number: n/a	
Filing Description:	

In compliance with the insurance laws and regulations of your state, we respectfully submit the following.

The Insurance Services Office has filed on our behalf a revision to the CLM Division 3 – Crime & Fidelity, Multi-State Forms Revision, under ISO Filing Designation Number CR-2006-OFR06. These changes are applicable to all policies written on or after October 1, 2007.

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## Company and Contact

### Filing Contact Information

Brenda Dinnald, Regulatory Analyst BDINNALD@travelers.com  
 One Tower Square (860) 277-4444 [Phone]  
 Hartford, CT 06183 (860) 954-0580[FAX]

### Filing Company Information

NIPPONKOA Insurance Company CoCode: 27073 State of Domicile: New York  
 Ltd.,(U.S.Branch)

One Tower Square Group Code: 2558 Company Type:  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-6470 ext. [Phone] FEIN Number: 98-0032627  
 -----

The Charter Oak Fire Insurance Company CoCode: 25615 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type:  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-6470 ext. [Phone] FEIN Number: 06-0291290  
 -----

The Phoenix Insurance Company CoCode: 25623 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type:  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-6470 ext. [Phone] FEIN Number: 06-0303275  
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The Travelers Indemnity Company CoCode: 25658 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type:  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-6470 ext. [Phone] FEIN Number: 06-0566050  
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The Travelers Indemnity Company of America CoCode: 25666 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type:  
 Hartford, CT 01683 Group Name: State ID Number:  
 (860) 277-6470 ext. [Phone] FEIN Number: 58-6020487  
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The Travelers Indemnity Company Of CoCode: 25682 State of Domicile: Connecticut

SERFF Tracking Number: TRVD-125300450 State: Arkansas  
First Filing Company: NIPPONKOA Insurance Company State Tracking Number: AR-PC-07-026195  
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Connecticut

One Tower Square  
Hartford, CT 06183  
(860) 277-6470 ext. [Phone]

Group Code: 3548  
Group Name:  
FEIN Number: 06-0336212  
-----

Company Type:  
State ID Number:

Travelers Property Casualty Company of  
America

CoCode: 25674

State of Domicile: Connecticut

One Tower Square  
Hartford, CT 06183  
(860) 277-6470 ext. [Phone]

Group Code: 3548  
Group Name:  
FEIN Number: 36-2719165  
-----

Company Type:  
State ID Number:



SERFF Tracking Number: TRVD-125300450 State: Arkansas  
First Filing Company: NIPPONKOA Insurance Company State Tracking Number: AR-PC-07-026195  
Ltd.,(U.S.Branch), ...  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Llyweyia Rawlins	09/28/2007	09/28/2007

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## Disposition

Disposition Date: 09/28/2007  
Effective Date (New): 10/01/2007  
Effective Date (Renewal): 10/01/2007  
Status: Filed  
Comment: Non-Adopt ISO filing

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



*SERFF Tracking Number:* TRVD-125300450                      *State:* Arkansas  
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*Company Tracking Number:* 2007-09-0058-F  
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*Product Name:* ISO Crime & Fidelity Multistate Non-Adoption  
*Project Name/Number:* ISO Crime & Fidelity Multistate Non-Adoption/2007-09-0058-F

## **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:** Filed 09/28/2007

**Comments:**

**Attachment:**

AR 2007-09-0058-F Transmittal.pdf

**Satisfied -Name:** Cover Letter **Review Status:** Filed 09/28/2007

**Comments:**

**Attachment:**

AR 2007-09-0058-F FORM LETTER.pdf

**Property & Casualty Transmittal Document**

<b>1. Reserved for Insurance Dept. Use Only</b>		<b>2. Insurance Department Use only</b>			
		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			
<b>3. Group Name</b>					<b>Group NAIC #</b>
The Travelers Companies, Inc.					3548
NIPPONKOA Insurance Company, Ltd.					2558
<b>4. Company Name(s)</b>	<b>Domicile</b>	<b>NAIC #</b>	<b>FEIN #</b>	<b>State #</b>	
The Travelers Indemnity Company	CT	25658	06-0566050		
The Charter Oak Fire Insurance Company	CT	25615	06-0291290		
The Travelers Indemnity Company of Connecticut	CT	25682	06-0336212		
The Travelers Indemnity Company of America	CT	25666	58-6020487		
The Phoenix Insurance Company	CT	25623	06-0303275		
Travelers Property Casualty Company of America	CT	25674	36-2719165		
NIPPONKOA Insurance Company, Ltd.	NY	27073	98-0032627		
<b>5. Company Tracking Number</b>		<b>2007-09-0058-F</b>			
<b>Contact Info of Filer(s) or Corporate Officer(s)</b> [include toll-free number]					
<b>6. Name and address</b>	<b>Title</b>	<b>Telephone #s</b>	<b>FAX #</b>	<b>e-mail</b>	
Brenda Dinnald Travelers One Tower Square Hartford, CT 06183	Regulatory Analyst	(860) 277-4444	(860) 954-0580	BDINNALD@Travelers.com	
<b>7. Signature of authorized filer</b>					
<b>8. Please print name of authorized filer</b>	Brenda Dinnald				
<b>Filing information</b> (see General Instructions for descriptions of these fields)					
<b>9. Type of Insurance (TOI)</b>	26.0				
<b>10. Sub-Type of Insurance (Sub-TOI)</b>	26.0000				
<b>11. State Specific Product code(s)</b> (if applicable)[See State Specific Requirements]					
<b>12. Company Program Title</b> (Marketing title)	ISO Non-Adoption				
<b>13. Filing Type</b>	<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)				
<b>14. Effective Date(s) Requested</b>	New: 10/01/2007                      Renewal: 10/01/2007				
<b>15. Reference Filing?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<b>16. Reference Organization</b> (if applicable)	ISO				
<b>17. Reference Organization # &amp; Title</b>	CR-2006-OFR06				
<b>18. Company's Date of Filing</b>	09/24/2007				
<b>19. Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved				

## Property & Casualty Transmittal Document—

<b>20. This filing transmittal is part of Company Tracking #</b>	2007-09-0058-F
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<b>21. Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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In compliance with the insurance laws and regulations of your state, we respectfully submit the following.

The Insurance Services Office has filed on our behalf a revision to the CLM Division 3 – Crime & Fidelity, Multi-State Forms Revision, under ISO Filing Designation Number CR-2006-OFR06. These changes are applicable to all policies written on or after October 1, 2007.

This letter is to advise you of our intent to Non-Adopt Effective October 1, 2007.

<b>22. Filing Fees</b> (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]
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**Check #:** N/A  
**Amount:** N/A

**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.)**



**Brenda Dinnald**  
Regulatory Analyst  
Regulatory Affairs, Business Insurance  
Direct: (860) 277-4444; Fax: (860) 954-0580  
One Tower Square, 0000-MN08A  
Hartford, CT 06183  
[bdinnald@travelers.com](mailto:bdinnald@travelers.com)

September 24, 2007

Commissioner Julie Benafield Bowman  
Commissioner of Insurance  
State of Arkansas  
1200 West Third Street  
3<sup>rd</sup> and Cross  
Little Rock, AR 72201-1904

<b>The Travelers Indemnity Company</b>	<b>3548-25658</b>
<b>The Charter Oak Fire Insurance Company</b>	<b>3548-25615</b>
<b>The Travelers Indemnity Company of Connecticut</b>	<b>3548-25682</b>
<b>The Travelers Indemnity Company of America</b>	<b>3548-25666</b>
<b>The Phoenix Insurance Company</b>	<b>3548-25623</b>
<b>Travelers Property Casualty Company of America</b>	<b>3548-25674</b>
<b>NIPPONKOA Insurance Company, Ltd. (U. S. Branch)</b>	<b>2558- 27073</b>

Commercial Lines Manual  
Division 3 – Crime & Fidelity  
Non-Adopt Multi-State Forms Revision  
**Our Company Filing Number: 2007-09-0058-F**

Dear Commissioner Bowman:

In compliance with the insurance laws and regulations of your state, we respectfully submit the following.

The Insurance Services Office has filed on our behalf a revision to the CLM Division 3 – Crime & Fidelity, Multi-State Forms Revision, under ISO Filing Designation Number CR-2006-OF06. These changes are applicable to all policies written on or after October 1, 2007.

This letter is to advise you of our intent to Non-Adopt Effective October 1, 2007.

Your approval of this filing would be appreciated. Thank you for your assistance with this process.

Sincerely,

Brenda Dinnald  
Regulatory Analyst

BD/dg  
Enclosures