

SERFF Tracking Number: ARKS-125403601 State: Arkansas
First Filing Company: 19429 - Insurance Company of the State of Pennsylvania, ... State Tracking Number: #413047 \$100
Company Tracking Number: 07-03-815-460
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: /

Filing at a Glance

Companies: 19429 - Insurance Company of the State of Pennsylvania, 19445 - National Union Fire Insurance Company of Pittsburgh, PA

Product Name: Personal Auto	SERFF Tr Num: ARKS-125403601	State: Arkansas
TOI: 19.0 Personal Auto	SERFF Status: Closed	State Tr Num: #413047 \$100
Sub-TOI: 19.0001 Private Passenger Auto (PPA)	Co Tr Num: 07-03-815-460	State Status: Fees verified and received
Filing Type: Rate/Rule	Co Status:	Reviewer(s): Alexa Grissom, Betty Montesi, Brittany Yielding
	Author:	Disposition Date: 01/10/2008
	Date Submitted: 12/27/2007	Disposition Status: Filed
Effective Date Requested (New):		Effective Date (New): 01/28/2008
Effective Date Requested (Renewal):		Effective Date (Renewal): 03/28/2008

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 01/10/2008	
State Status Changed: 01/10/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Company and Contact

Filing Contact Information

SERFF Tracking Number: ARKS-125403601 State: Arkansas
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 Company Tracking Number: 07-03-815-460
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Auto
 Project Name/Number: /

NA NA, NA@NA.com
 NA (123) 555-4567 [Phone]
 NA, AR 00000

Filing Company Information

19429 - Insurance Company of the State of Pennsylvania CoCode: 19429 State of Domicile: New York
 Regulatory Information Services: DBG Group Code: 12 Company Type:
 175 Water Street, 18th Floor
 New York, NY 10038 Group Name: State ID Number:
 (212) 458-7008 ext. [Phone] FEIN Number: 13-5540698

19445 - National Union Fire Insurance Company of Pittsburgh, PA CoCode: 19445 State of Domicile: New York
 Regulatory Information Services: DBG Group Code: 12 Company Type:
 175 Water Street, 18th Floor
 New York, NY 10038 Group Name: State ID Number:
 (212) 458-7008 ext. [Phone] FEIN Number: 25-0687550

SERFF Tracking Number: ARKS-125403601 State: Arkansas
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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	01/10/2008	01/10/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending	Alexa Grissom	01/08/2008				
Industry						
Response						

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Product Name: Personal Auto
Project Name/Number: /

Disposition

Disposition Date: 01/10/2008
Effective Date (New): 01/28/2008
Effective Date (Renewal): 03/28/2008
Status: Filed
Comment:

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: ARKS-125403601 State: Arkansas
 First Filing Company: 19429 - Insurance Company of the State of Pennsylvania, ... State Tracking Number: #413047 \$100
 Company Tracking Number: 07-03-815-460
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Personal Auto
 Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	ARKS-125403601		No

SERFF Tracking Number: ARKS-125403601 *State:* Arkansas
First Filing Company: 19429 - Insurance Company of the State of Pennsylvania, ... *State Tracking Number:* #413047 \$100
Company Tracking Number: 07-03-815-460
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 01/08/2008

Submitted Date

Respond By Date

Dear NA NA,

 This will acknowledge receipt of the captioned filing.

Please feel free to contact me if you have questions.

Sincerely,

SERFF Tracking Number: ARKS-125403601 *State:* Arkansas
First Filing Company: 19429 - Insurance Company of the State of *State Tracking Number:* #413047 \$100
 Pennsylvania, ...
Company Tracking Number: 07-03-815-460
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

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TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
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Supporting Document Schedules

Review Status:

Satisfied -Name: ARKS-125403601

01/10/2008

Comments:

Attachment:

ARKS-125403601.pdf

ALG

AIG Marketing, Inc.
One AIG Center, 5th Floor
Wilmington, DE 19803
302.252.2305
302.252.2454 Fax

CA#413047

Linda L. Maier
Supervising Actuary

\$100.⁰⁰

ARKS-ARKS-125403601

December 21, 2007

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

RE: THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA-19429
NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA-19445
Personal Automobile Rate and Rule Filing
Company Filing Number: 07-03-815-460

Dear Commissioner Bowman:

Attached is a rate and rule filing for the Personal Automobile program for the above captioned companies. We are proposing an effective date of January 28, 2008. In conjunction with our 60-day renewal cycle, this will affect all renewal policies with an effective date on or after March 28, 2008.

Enclosed are the required filing forms along with an extra copy of our filing letter for you to note your actions thereon and return to our office in the envelope provided. If you have any questions, please feel free to contact me via collect call at the number provided above, or by email.

Respectfully yours,

Linda L. Maier

Linda L. Maier
Supervising Actuary
linda.maier@aig.com

FILED

DEC 27 2007

PROPERTY AND CASUALTY
ARKANSAS INSURANCE DEPT.

RECEIVED

DEC 27 2007

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

AIG Marketing, Inc.
One AIG Center, 5th Floor
Wilmington, DE 19803
302.252.2305
302.252.2454 Fax

Linda L. Maier
Supervising Actuary

December 21, 2007

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

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NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
Personal Automobile Rate and Rule Filing
Company Filing Number: 07-03-815-460

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Linda L. Maier

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linda.maier@aig.com

RECEIVED

DEC 27 2007

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

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

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

3. Group Name	Group NAIC #
American International Companies	12

4. Company Name(s)	Domicile	NAIC #	FEIN #
The Insurance Company of the State of Pennsylvania	PA	19429	13-5540698
National Union Fire Insurance Company of Pittsburgh, PA	PA	19445	25-0687550

5. Company Tracking Number	07-03-815-460
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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
Linda L. Maier AIG Center Wilmington, DE 09803	One Supervising Actuary	302-252-2305	302-252-2454	linda.maier@aig.com

7. Signature of authorized filer	<i>Linda L. Maier</i>
8. Please print name of authorized filer	Linda L. Maier

RECEIVED
DEC 27 2007

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

9. Type of Insurance (TOI)	19.1/21.1 Private Passenger Auto
10. Sub-Type of Insurance (Sub-TOI)	
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	aigdirect.com
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14. Effective Date(s) Requested	New: 1/28/2008 Renewal: 3/28/2008
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	12/21/2007
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 AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # 07-03-815-460

21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]

The Insurance Company of the State of Pennsylvania and National Union Fire Insurance Company of Pittsburgh, PA are proposing to adopt new Countrywide General Rules. In addition, the rate and rule manual is being reformatted. The overall effect of these changes is 0.0%.

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 #: 00413047
Amount: \$100.00

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.)

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	07-03-815-460
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
-----------	---	--

Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	
-----------	--	--

4a.	Rate Change by Company (As Proposed)
------------	---

Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
Insurance Company of the State of Pennsylvania	0.0%	\$ 0	4,052	\$ 4,773,495	0.0%	0.0%
National Union Fire Ins. Co. of Pitts, PA.	0.0%	\$ 0	686	\$ 869,556	0.0%	0.0%

4b.	Rate Change by Company (As Accepted) For State Use Only
------------	--

Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

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	0	
5c.	Effect of Rate Filing – Number of policyholders affected	4738	

6.	Overall percentage of last rate revision	0.0%
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7.	Effective Date of last rate revision	3/5/07 NB; 5/4/07RN (ISOP only)
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File & Use
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9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	General Rules Pages G-1 to G-30	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02	Arkansas State Exception Pages AR-E-1 to AR-E-13	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03	Arkansas Rate Pages AR-R-1 to AR-R-14	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
04		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
05		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	07-03-815-460
2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	
3.	Company Name A. Insurance Company of the State of Pennsylvania	Company NAIC Number B. 19429
4.	Product Coding Matrix Line of Business (i.e., Type of Insurance) A. 19.1/21.1 Private Passenger Auto	Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance) B.

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				(H) Co. Current Loss Cost Multiplier
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	
Bodily Injury	n/a	0.0%					
Property Damage	n/a	0.0%					
Medical Payments	n/a	0.0%					
Uninsured Motorists	n/a	0.0%					
Comprehensive	n/a	0.0%					
Collision	n/a	0.0%					
TOTAL OVERALL EFFECT	n/a %	0.0%					

6.

Year*	5 Year History			Rate Change History			Countrywide Loss Ratio**
	Policy Count	% of Change	Effective Date	State Earned Premium** (000)	Incurred Losses** (000)	State Loss Ratio**	
2002	NA	NA	NA	NA	NA	NA	63.1%
2003	NA	NA	NA	NA	NA	NA	50.8%
2004	NA	NA	NA	NA	NA	NA	63.4%
2005	916	-7.2%	4/4/05	546	311	56.9%	62.8%
2006	1979	---	---	1890	1776	93.9%	61.6%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	23.80%/24.70%
B. General Expense	included in A
C. Taxes, License & Fees	2.82%
D. Underwriting Profit & Contingencies	5.00%
E. Other (explain)*	3.83%/0.88%
F. TOTAL	27.79%/31.64%

*Investment Income = liab/phys dam

**Calendar Year data

- 8.** N Apply Lost Cost Factors to Future filings? (Y or N)
- 9.** 0.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____
- 10.** 0.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): _____

ARKANSAS INSURANCE DEPARTMENT
FORM A-1 PRIVATE PASSENGER AUTOMOBILE ABSTRACT

INSTRUCTIONS: All questions must be answered. If the answer is "none" or "not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name Insurance Company of the State of Pennsylvania
 NAIC No. (including group #) 012-19429

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance? Yes No
 If yes, list the areas: _____

2. Do you furnish a market for young drivers? Yes No

3. Do you require collateral business to support a youthful driver? Yes No

4. Do you insure drivers with an international or foreign driver's license? Yes No

5. Specify the percentage you allow in credit or discounts for the following:

- a. Driver Over 55 % 11% (Age 50-59), 13% (Age 60-69)
- b. Good Student Discount % 2.1% to 27.8%
- c. Multi-car Discount % 30% Liability, 20% Physical Damage
- d. Accident Free Discount* % 2% to 65% depending on tier, coverage & yrs claim free

*Please Specify Qualification for Discount:

All drivers inforce with the company for more than 1 year with no accidents or major moving violations are eligible.

- e. Anti-theft Discount % 5% to 15%
- f. Other (specify) Homeowners Discount % 10% (BI, PD, MP, Comp, Coll)
- Passive Restraint Discount % 0% to 30% (MP)
- Anti-Lock Brake Discount % 5% (BI, PD)
- Driver Training Discount % 1.4% to 15.3%

6. Do you have an installment payment plan for automobile insurance? Yes No
 If so, what is the fee for installment payments? cash/check - \$5.00 per installemt, Recurring credit card - \$3.00 per installment

7. Does your company utilize a tiered rating plan? Yes No
 If so, list the programs and percentage difference and current volume for each plan:

Program	Percentage Difference*	Volume
Rate Level Tier 0	-16% to -14%	1,655
Rate Level Tier 1	6% to 8%	1,127
Rate Level Tier 2	14% to 23%	1,166
Rate Level Tier 3	17% to 29%	647
Rate Level Tier 4	20% to 32%	569
Rate Level Tier 5	23% to 52%	355
Rate Level Tier 6	33% to 71%	352
Rate Level Tier 7	52% to 95%	196
Rate Level Tier 8	85% to 138%	250

* vary by coverage, see manual page AR-R-9

THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Linda L. Maier

 Signature
 Linda L. Maier

 Printed Name
 Supervising Actuary

 Title
 (302) 252-2305

 Telephone Number
 linda.maier@aig.com

 Email address

Private Passenger Auto Premium Comparison Survey Form

FORM APCS - last modified August 2005

NAIC Number: 012-19429
 Company Name: The Insurance Company of the State of Pennsylvania
 Contact Person: Linda L. Maier
 Telephone No.: (302) 252-2305
 Email Address: linda.maier@atu.com
 Effective Date: 1/28/08

DISCOUNTS OFFERED:
 PASSIVE RESTRAINT AIRBAG 10%
 AUTOHOMEOWNERS 10%
 GOOD STUDENT 2.1-27.8%
 ANTI-THEFT DEVICE 5-15%
 Over 65 Defensive Driver Discount 10%
 \$250-\$500 Deductible Comp/Col 10-18 comp/11-18%

Assumptions to Use:
 1 Liability Minimum \$25,000 per person
 2 Bodily Injury \$50,000 per accident
 3 Property Damage \$100 deductible per accident
 4 Comprehensive & Collision \$250 deductible per accident
 5 The insured has elected to accept
 Uninsured motorist property and bodily injury equal to liability coverage
 Underinsured bodily injury equal to liability coverage
 6 Personal Injury Protection of \$5,000 for medical loss
 wages according to statute and \$5,000 accidental
 7 If male and female rates are different, use the highest of the two

Submit to: Arkansas Insurance Department
 1200 West Third Street
 Little Rock, AR 72201-1904
 Telephone: 501-374-2800
 (Email as an attachment insurance.pnc@arkansas.gov
 You may also attach to a SERFF filing or submit
 on a compact disk)

Vehicle	Coverages	Gender	Excellence		Truam		Little Rock		Lake Village		Pine Bluff						
			Female	Male	Female	Male	Female	Male	Female	Male	Female	Male					
1998 Chevrolet Silverado 1600 2WD 4.3 Regular CAP 118 1WB	Minimum Liability Comprehensive and Collision	AG	\$884.11	\$1,193.85	\$883.25	\$1,192.15	\$881.66	\$1,076.02	\$1,459.68	\$850.57	\$1,144.51	\$392.84	\$392.84	\$1,179.00	\$1,596.04	\$526.01	\$497.90
2003 Ford Explorer XLT 2WD 4.6037	Minimum Liability Comprehensive and Collision	AG	\$1,641.61	\$2,249.99	\$1,765.72	\$2,423.23	\$704.38	\$1,868.93	\$2,548.22	\$735.73	\$1,762.47	\$2,415.50	\$706.31	\$2,082.43	\$2,856.26	\$831.66	\$789.04
2003 Chevrolet Cavalier LS 4D Sedan	Minimum Liability Comprehensive and Collision	AG	\$684.11	\$1,193.85	\$683.25	\$1,192.15	\$401.49	\$381.66	\$1,459.68	\$475.42	\$850.57	\$1,144.51	\$392.84	\$1,179.00	\$1,596.04	\$526.01	\$497.90
2003 Toyota Camry LE 3.0L 4 Door Sedan	Minimum Liability Comprehensive and Collision	AG	\$1,811.10	\$2,484.67	\$1,966.09	\$2,702.26	\$774.42	\$2,031.05	\$2,789.18	\$794.29	\$1,983.76	\$2,704.16	\$778.95	\$2,286.06	\$3,138.53	\$901.39	\$854.78
2003 Chevrolet Cavalier LS 4D Sedan	Minimum Liability Comprehensive and Collision	AG	\$884.11	\$1,193.85	\$883.25	\$1,192.15	\$401.49	\$381.66	\$1,459.68	\$475.42	\$850.57	\$1,144.51	\$392.84	\$1,179.00	\$1,596.04	\$526.01	\$497.90
2003 Chevrolet Cavalier LS 4D Sedan	Minimum Liability Comprehensive and Collision	AG	\$1,811.10	\$2,484.67	\$1,966.09	\$2,702.26	\$774.42	\$2,031.05	\$2,789.18	\$794.29	\$1,983.76	\$2,704.16	\$778.95	\$2,286.06	\$3,138.53	\$901.39	\$854.78
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NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	07-03-815-460
2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	
3.	Company Name A. National Union Fire Insurance Company of Pittsburgh, PA	Company NAIC Number B. 19445
4.	Product Coding Matrix Line of Business (i.e., Type of Insurance)	Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
A.	19.1/21.1 Private Passenger Auto	B.

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				(H) Co. Current Loss Cost Multiplier
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	
Bodily Injury	n/a	0.0%					
Property Damage	n/a	0.0%					
Medical Payments	n/a	0.0%					
Uninsured Motorists	n/a	0.0%					
Comprehensive	n/a	0.0%					
Collision	n/a	0.0%					
TOTAL OVERALL EFFECT	n/a %	0.0%					

6.

Year*	5 Year History			Rate Change History			Countrywide Loss Ratio**
	Policy Count	% of Change	Effective Date	State Earned Premium** (000)	Incurred Losses** (000)	State Loss Ratio**	
2002	NA	NA	NA	NA	NA	NA	21.3%
2003	NA	NA	NA	NA	NA	NA	0.5%
2004	NA	NA	NA	NA	NA	NA	71.3%
2005	473	-7.9%	4/4/05	343	151	44.1%	53.1%
2006	627	---	---	744	710	95.4%	98.8%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	23.80%/24.70%
B. General Expense	included in A
C. Taxes, License & Fees	2.82%
D. Underwriting Profit & Contingencies	5.00%
E. Other (explain)*	3.83%/0.88%
F. TOTAL	27.79%/31.64%

*Investment Income = liab/phys dam

8. N Apply Lost Cost Factors to Future filings? (Y or N)
9. 0.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____
10. 0.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): _____

**Calendar Year data
*NU introduced on November 22, 2004

PC RLC U:\LossCostDraft\DataEntry.doc

ARKANSAS INSURANCE DEPARTMENT
FORM A-1 PRIVATE PASSENGER AUTOMOBILE ABSTRACT

INSTRUCTIONS: All questions must be answered. If the answer is "none" or "not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name National Union Fire Insurance Company of Pittsburgh, PA

NAIC No. (including group #) 012-19445

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance? Yes No

If yes, list the areas: _____

2. Do you furnish a market for young drivers? Yes No

3. Do you require collateral business to support a youthful driver? Yes No

4. Do you insure drivers with an international or foreign driver's license? Yes No

5. Specify the percentage you allow in credit or discounts for the following:

- a. Driver Over 55 % 11% (Age 50-59), 13% (Age 60-69)
- b. Good Student Discount % 2.1% to 27.8%
- c. Multi-car Discount % 30% Liability, 20% Physical Damage
- d. Accident Free Discount* % 2% to 73% depending on tier, coverage & yrs claim free

*Please Specify Qualification for Discount:

All drivers in force with the company for more than 1 year with no accidents or major moving violations are eligible.

- e. Anti-theft Discount % 5% to 15%
- f. Other (specify) Homeowners Discount % 10% (BI, PD, MP, Comp, Coll)
- Passive Restraint Discount % 10% to 30% (MP)
- Anti-Lock Brake Discount % 5% (BI, PD)
- Driver Training Discount % 1.4% to 15.3%

6. Do you have an installment payment plan for automobile insurance? Yes No

If so, what is the fee for installment payments? cash/check - \$5.00 per installment, Recurring credit card - \$3.00 per installment

7. Does your company utilize a tiered rating plan? Yes No

If so, list the programs and percentage difference and current volume for each plan:

Program	Percentage Difference*	Volume
Rate Level Tier 0	-21% to -19%	509
Rate Level Tier 1	-7% to -5%	271
Rate Level Tier 2	0%	340
Rate Level Tier 3	10% to 21%	128
Rate Level Tier 4	22% to 43%	63
Rate Level Tier 5	38% to 60%	35
Rate Level Tier 6	47% to 72%	27
Rate Level Tier 7	68% to 130%	7
Rate Level Tier 8	99% to 190%	13

* vary by coverage, see manual page AR-R-9

THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Linda L. Maier

Signature

Linda L. Maier

Printed Name

Supervising Actuary

Title

(302) 252-2305

Telephone Number

linda.maier@aig.com

Email address

Private Passenger Auto Premium Comparison Survey Form

FORM APCS - last modified August 2005

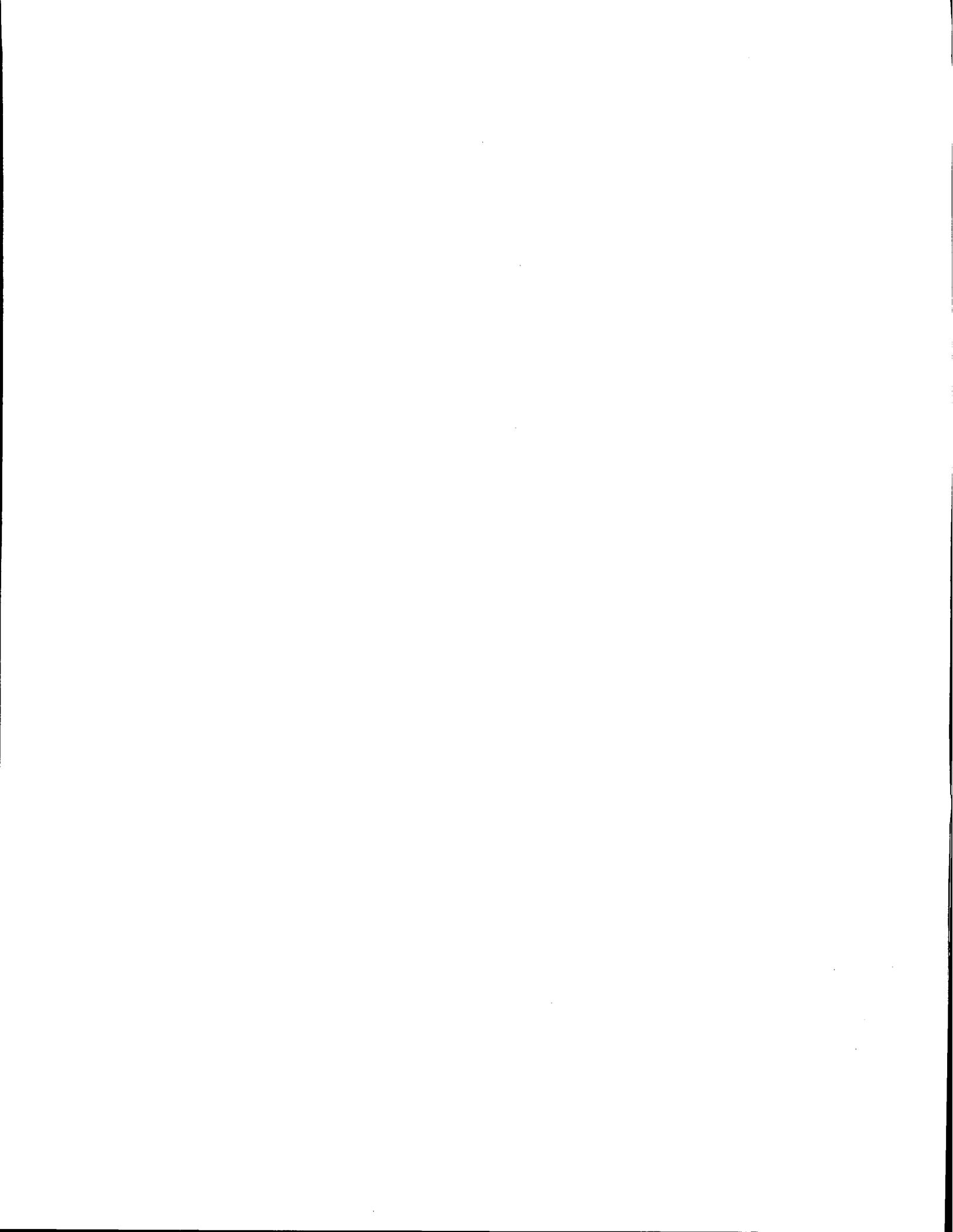
NAIC Number: 012-19445
Company Name: National Union Fire Insurance Company of Pittsburgh, PA
Contact Person: Linda L. Meier
Telephone No.: (302) 252-2305
Email Address: linda.meier@nuf.com
Effective Date: 1/28/08

DISCOUNTS OFFERED:
 PASSIVE RESTRAINT/AIRBAG 10-30 %
 AUTO/HOMEOWNERS 10 %
 GOOD STUDENT 2.1 - 27.8 %
 ANTI-LOCK BRAKE SYSTEM 5 - 15 %
 Over 55 Defensive Driver Discount 10 %
 \$250-\$500 Deductible Comp/Coll. 10-18 comp/11-18 %

Assumptions to Use:
 1. Liability - Minimum \$25,000 per person
 2. Bodily Injury \$50,000 per accident
 3. Property Damage \$100 deductible per accident
 4. Comprehensive & Collision \$250 deductible per accident
 5. The insured has elected to accept:
 Uninsured motorist property and bodily injury equal to liability coverage
 Underinsured bodily injury equal to liability coverage
 6. Personal Injury Protection of \$5,000 for medical/loss
 wages according to statute and \$5,000 accidental
 7. If male and female rates are different, use the highest of the two

Submit to: Arkansas Insurance Department
 1200 West Third Street
 Little Rock, AR 72201-1904
Telephone: 501-371-2800
Email as an attachment: InsurancePnc@arkansas.gov
 You may also attach to a SERFF filing or submit on a compact disk

Vehicle	Elyria/Tenille		Tombam		Little Rock		Lakes Village		Pine Bluff	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
1998 Chevrolet Silverado 1500 2WD LS Regular Cab 4-Door	\$909.64	\$1,228.85	\$909.82	\$1,227.24	\$909.82	\$1,227.24	\$909.82	\$1,227.24	\$909.82	\$1,227.24
2003 Ford Explorer XLT 2WD 4-Door	\$1,784.17	\$2,438.66	\$1,900.84	\$2,642.79	\$1,900.84	\$2,642.79	\$1,900.84	\$2,642.79	\$1,900.84	\$2,642.79
2003 Honda Odyssey EX 2-Door Sedan	\$909.64	\$1,228.85	\$909.82	\$1,227.24	\$909.82	\$1,227.24	\$909.82	\$1,227.24	\$909.82	\$1,227.24
2005 Toyota Camry LE 4-Door Sedan	\$1,180.23	\$1,734.71	\$1,278.39	\$1,870.43	\$1,278.39	\$1,870.43	\$1,278.39	\$1,870.43	\$1,278.39	\$1,870.43
2003 Chevrolet Cavalier LS 4-Door Sedan	\$1,787.80	\$2,452.30	\$1,939.41	\$2,685.36	\$1,939.41	\$2,685.36	\$1,939.41	\$2,685.36	\$1,939.41	\$2,685.36



**THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA**

ARKANSAS

FILING MEMORANDUM

The attached manual pages reflect a rate and rule revision for the personal automobile program for the state of Arkansas. The overall rate level effect of the proposed changes is 0.0%. The proposed changes are discussed below:

We are adopting new Countrywide General Rules. The new set of General Rules revises the rounding in our rate calculations to the penny and revises the SDIP points assigned for various violations including: Driving over 100 miles per hour from 2 points to 4 points, Failure to stop for a school bus from 1 point to 4 points, Lending a license or registration from 4 points to 6 points, Operating a vehicle without permission from 1 point to 6 points, and Driving without a valid license from 6 points to 4 points. In addition, the rule for model years prior to 1976, as well as the rule for symbols greater than 26 have been revised as displayed on rate pages AR-R-5. These changes are expected to have minimal rate impact on policyholders.

As a result of introducing the new General Rules, the Arkansas state exception pages and rate pages have been reformatted. The proposed changes are mostly cosmetic in nature other than those outlined in the paragraph above. They will provide for a more transparent structure and ease the revision process, while allowing us to maintain a singular set of General Rules for current as well as future products. All rates have been removed from the General Rules and State Exception Pages and added to the State Rate Pages. The proposed General Rules, State Exception Pages and State Rate Pages are attached. No changes have been made to the class, tier model, or territory pages.

These revisions are proposed to be effective for all policies written on or after January 28, 2008. In conjunction with our 60 day renewal cycle, this will affect all Renewal policies with an effective date on or after March 28, 2008.

**AMERICAN HOME ASSURANCE COMPANY
AMERICAN INTERNATIONAL INSURANCE
COMPANY
THE INSURANCE COMPANY OF THE STATE OF
PENNSYLVANIA
NATIONAL UNION FIRE INSURANCE COMPANY
OF PITTSBURGH, PA
AIG CASUALTY COMPANY**

AIG DIRECT PROGRAM

PERSONAL AUTOMOBILE MANUAL

GENERAL RULES

PERSONAL AUTOMOBILE MANUAL

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PERSONAL AUTOMOBILE MANUAL

1. DEFINITIONS

- A. PRIVATE PASSENGER AUTO is a four wheel motor vehicle owned or leased under contract for a continuous period of at least six months, and is not used as a public or livery conveyance for passengers and is not rented to others.

A motor vehicle that is a car, jeep-type, panel truck, pickup or van shall be considered a PRIVATE PASSENGER AUTO if it:

1. Has a Gross Vehicle Weight of less than 10,000 lbs., and
 2. Is not used for the delivery or transportation of goods or materials unless such use is:
 - a. Incidental to the insured's business of installing, maintaining or repairing furnishings or equipment, or
 - b. For farming or ranching.
- B. AUTO as used in this manual refers to a PRIVATE PASSENGER AUTO or a vehicle considered as a PRIVATE PASSENGER AUTO.

C. MOTOR HOMES

A MOTOR HOME is a self-propelled motor vehicle with a living area that is an integral part of the vehicle chassis. The living area typically consists of cooking, dining, sleeping, plumbing and refrigeration facilities.

- D. Trailers and Camper Bodies Designed for Use with PRIVATE PASSENGER AUTO and pickups.

A RECREATIONAL TRAILER is a non-self propelled recreational unit equipped as living quarters including cooking, dining, sleeping, plumbing or refrigeration facilities. A CAMPER BODY is a non-self-propelled unit designed to be transported by a pickup, with or without cooking, dining, sleeping, plumbing or refrigeration facilities. To be eligible for coverage, insured must maintain a separate and permanent residence other than the recreational trailer or camper body.

PERSONAL AUTOMOBILE MANUAL

E. MODEL YEAR

1. The MODEL YEAR of the AUTO is the year assigned by the AUTO manufacturer.
2. Rebuilt or Structurally Altered AUTOS – The model year of the chassis determines the MODEL YEAR of the AUTO.

F. VEHICLE AGE

The VEHICLE AGE of the AUTO is the policy effective year minus the MODEL YEAR of the AUTO plus one. If the policy effective month is ten or greater, add one to the vehicle age determined above.

G. TOTAL BASE PREMIUM for a vehicle equals the sum of the liability and physical damage coverages that apply to the AUTO as defined below.

1. Liability Coverages:

Territory Base Rate x MODEL YEAR (VEHICLE AGE) and/or Symbol Factor x Increased Limits Factor for each of the following coverages: Single Limit Liability or Bodily Injury and Property Damage Liability, Medical Payments, Personal Injury Protection (PIP).

2. Physical Damage Coverages:

Territory Base Rate x MODEL YEAR (VEHICLE AGE) and/or Symbol Factor x Deductible Factor for each of the following coverages: Comprehensive and Collision.

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2. PERSONAL AUTO POLICY – ELIGIBILITY

A. A Personal Auto Policy shall be used to afford coverage to PRIVATE PASSENGER AUTOS, pickups, vans and motor vehicles considered as a PRIVATE PASSENGER AUTO if:

1. They are written on a specified AUTO basis, and
2. They are owned by an individual or by a husband and wife who are residents in the same household.

B. A Personal Auto Policy, written on a specified AUTO basis, shall be used to afford coverage to PRIVATE PASSENGER AUTOS and pickups and vans as defined in Rule 1., that are owned jointly by two or more:

1. Relatives other than husband and wife; or
2. Resident individuals, or
3. Non-resident relatives, including a non-resident husband and wife.

3. PREMIUM DETERMINATION

Single Limit Liability or Bodily Injury and Property Damage Liability, Personal Injury Protection, Medical Payments, Uninsured and Underinsured Motorists, Comprehensive and Collision premiums are determined as follows:

- A. Refer to Rule 4. Classifications to determine the applicable Classification Factors.
- B. Refer to Rule 6. Discounts and Miscellaneous Rating Factors to determine the applicable rating factors. Discounts and factors not found in the General Rules can be found in the State Rate Pages.
- C. Refer to Territory Definitions to determine the territory number for the location where the AUTO is principally garaged.
- D. Refer to the State Rate Pages to determine base rates and rate level factors for the desired coverage for the appropriate territory.
- E. Refer to the State Rate Pages to determine Increased Limits rates or factors for Single Limit Liability, or Bodily Injury and Property Damage Liability, Medical Payments, Personal Injury Protection and Uninsured/Underinsured Motorists coverages, and deductible factors for Comprehensive and Collision coverages.

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F. MODEL YEAR/VEHICLE AGE and Symbol Determination

1. For tiers 0-8 with Physical Damage Coverages, refer to the ISO Symbol Assignment.

For tiers 10-59 with Liability coverages, refer to the Vehicle Symbol Assignment Pages for the appropriate rating symbol for vehicles 2001 and subsequent. A Liability Vehicle Rating Symbol does not apply for vehicles 2000 and prior. For the Physical Damage coverages with vehicles 2001 and subsequent, refer to the Vehicle Symbol Assignment Pages. For the Physical Damage coverages with vehicles 2000 and prior, refer to the ISO Symbol Assignment.

2. Refer to State Rate Pages for determination of MODEL YEAR/VEHICLE AGE and/or symbol factors.
3. When MODEL YEAR is used in rating and the rates for a MODEL YEAR are not displayed in the state rate pages, the MODEL YEAR factor will be 3% above the preceding MODEL YEAR.

G. Refer to the State Rate Pages to determine any applicable Expense Fees.

H. The premium for each coverage is determined by multiplying/adding the territory base rate for each coverage by the appropriate rating discounts/surcharges and rate level factors/add-ons and adding applicable Expense Fees.

I. The premium calculation shall be rounded to the nearest whole penny following the application of each discount, surcharge, or other premium modification used in determining the final premium for the coverage being rated.

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4. CLASSIFICATIONS

This rule does not apply to risks rated in accordance with the Miscellaneous Types Rule unless otherwise specified.

A. AUTOS are classified as follows:

1. Primary Classification

- a. Classify the AUTO according to the age, sex and marital status of the operators, the use of the AUTO, annual mileage of the AUTO and the eligibility of YOUTHFUL OPERATORS for the Driver Training and/or Good Student classes, and
- b. For all tiers, determine the Primary Classification factors based on tier assignment from the Primary Rating Factor tables in the State Class Plan Pages. For tiers 10-59, adjust the Primary Rating Factor by the Graded Discount Factor.

2. Secondary Classification

- a. Determine if the AUTO is:
 - (1) A single car, or
 - (2) Part of a multi-car risk
- b. Refer to the Safe Driver Insurance Plan to classify operators according to the provisions of the Plan.
- c. Determine the appropriate Secondary Class Plan Factor based on the accident and conviction points and number of vehicles on the policy. For tiers 10-59, adjust the Secondary Class Plan Factor by the Secondary Graded Discount Factor indicated from the pages.

3. Classification Changes

Compute premium adjustments on a pro rata basis when changes in Primary and Secondary Rating Classifications are made. This includes the addition or deletion of an operator during the policy term.

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EXCEPTIONS:

1. A policy shall not be changed mid-term because of the attained age of an operator of the AUTO.
2. A policy shall not be changed mid-term to affect a change in surcharge points due to an accident or violation in the current term.
3. A policy shall not be changed mid-term solely due to a change in symbol.

B. Definitions

1. Use Classifications

- a. BUSINESS USE means that the use of the AUTO is required by or customarily involved in the duties of the applicant or any other person customarily operating the AUTO, in an occupation, profession or business, other than going to or from the principal place of occupation, profession or business.
- b. FARM USE means the AUTO is principally garaged on a farm or ranch and,
 - (1) It is not customarily used in going to or from work other than farming or ranching or driving to or from school, and
 - (2) Is it not customarily used in any occupation other than farming or ranching.
- c. PLEASURE USE means:
 - (1) BUSINESS USE less than 20% of the time; or
 - (2) Personal use including driving to or from work or school:
 - (a) Less than 3 road miles one way, or
 - (b) 3 or more but less than 15 road miles one way for not more than 2 days per week.

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- d. **SHORT COMMUTE LESS THAN 15 MILES** means:
 - (1) No BUSINESS USE.
 - (2) Personal use including driving to or from work or school:
 - (a) 3 or more but less than 15 road miles one way if such usage is more than 2 days per week, or
 - (b) 15 or more road miles one way for not more than 2 days per week.
- e. **LONG COMMUTE 15 OR MORE MILES** means:
 - (1) No BUSINESS USE.
 - (2) Personal use including driving to or from work or school 15 or more road miles one way, more than 2 days per week.
- f. An AUTO driven part way to or from work or school, such as to a railroad or bus depot, whether or not the AUTO is parked at the depot during the day, shall be considered as driving to or from work or school.

2. Age, Sex and Marital Status Classifications

- a. **YOUTHFUL OPERATOR** in the determination of rated operators means an applicant or any other operator who customarily operates the AUTO and is one of the following:
 - (1) **YOUTHFUL UNMARRIED FEMALE OWNER OR PRINCIPAL OPERATOR** – Unmarried female under 30 years of age who is an owner or principal operator.
 - (2) **YOUTHFUL UNMARRIED FEMALE OPERATOR – NOT OWNER OR PRINCIPAL OPERATOR** - Unmarried female under 30 years of age who is not owner or principal operator.
 - (3) **YOUTHFUL UNMARRIED MALE OPERATOR – NOT OWNER OR PRINCIPAL OPERATOR** - Unmarried male under 30 years of age who is not an owner or principal operator.
 - (4) **YOUTHFUL UNMARRIED MALE OWNER OR PRINCIPAL OPERATOR** – Unmarried male under 30 years of age who is an owner or principal operator.

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- (5) YOUTHFUL MARRIED FEMALE OPERATOR – Married female under 30 years of age.
 - (6) YOUTHFUL MARRIED MALE OPERATOR – Married male under 30 years of age.
- b. AGE means the age attained on the last birthday.
 - c. MARRIED means a married person living with his or her spouse. This does NOT include a person widowed, divorced or legally separated.
 - d. RESIDENT means anyone residing in the same household.
 - e. If a YOUTHFUL UNMARRIED FEMALE OPERATOR - NOT OWNER OR PRINCIPAL OPERATOR or a YOUTHFUL UNMARRIED MALE OPERATOR – NOT OWNER OR PRINCIPAL OPERATOR - under 23 years of age is a student residing at an educational institution over 100 road miles from the AUTO'S place of principal garaging, the AUTO is rated as if the student is MARRIED. If the rating factor for a married YOUTHFUL operator is greater than the factor for an unmarried YOUTHFUL operator, use the lower factor and corresponding statistical codes.

3. Driver Training

The applicable Driver Training Classification applies to each YOUTHFUL OPERATOR where "Satisfactory Evidence" is presented that such operator has successfully completed a driver education course meeting the following standards:

- a. The course included a minimum of 30 hours of classroom instruction plus a minimum of 6 hours of actual driving experience per student. These requirements may be met in either of the following ways:
 - (1) A minimum of 6 hours per student of actual driving experience exclusive of observation time in the car.

In this case, part of the required 30 hours of classroom instruction can be met by the time spent in an approved simulated practice driving trainer.

Use of the driving trainer must be authorized by the State Department of Education or other responsible educational agency.

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- (2) A minimum of 3 hours per student of actual driving experience exclusive of observation – time in the car, and

A minimum of 12 hours per student in an approved practice driving trainer.

In this case, only time spent in excess of 12 hours may be counted as part of the required 30 hours of classroom instruction.

Use of the driving trainer must be authorized by the State Department of Education or other responsible educational agency.

- b. The course was conducted by instructors certified by the State Department of Education or other responsible educational agency, and
- c. The course was conducted by a recognized secondary school, college or university and had the approval of the State Department of Education or other responsible educational agency or
- d. The course was conducted by other schools, and such course and school had the approval and supervision of the State Department of Education or other responsible educational agency or
- e. The course was conducted by a commercial driving school under the jurisdiction of the Motor Vehicle Department provided that by Statute or Regulation such school meets the same requirements as schools having official sanction from the responsible state educational agency.
- f. “Satisfactory Evidence” is a certificate signed by a school official certifying to the fulfillment of the requirements in a., b., c. or d. or e. above.

4. Good Student

The applicable Good Student Classification applies provided:

- a. The owner or operator is:
 - (1) A YOUTHFUL OPERATOR, and
 - (2) A full time high school student, college or university student.

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- b. A certified statement from a school official is presented to the Company on each anniversary date of the policy indicating that the student has met one of the following requirements during the immediately preceding school semester:

- (1) Is in the upper 20% of his/her class scholastically or
- (2) Maintains a "B" average or its equivalent.

If the letter grading system cannot be averaged then no grade can be below "B."

- (3) When in a school maintaining a numerical grade, must have at least a 3 in a 4, 3, 2, 1 point system or its equivalent.
- (4) Student is included in a "Deans List," "Honor Roll," or comparable list indicating scholastic achievement.

A classification change resulting from a change in the scholastic standing of the student cannot be affected mid-term.

C. Operator Assignment

1. Policies where the number of vehicles is less than or equal to the number of operators.

a. Single Car Risks

The YOUTHFUL OPERATOR with the highest Single Limit Liability or Bodily Injury Primary Classification Factor on a PLEASURE USE basis shall be assigned to the vehicle for rating purposes. If there are no YOUTHFUL OPERATORS, the principal operator shall be assigned to the vehicle.

b. Multi-Car Risks

- (1) Assign any principal YOUTHFUL OPERATORS to the AUTO they principally operate.
- (2) Assign other YOUTHFUL OPERATORS to remaining AUTOS as follows:
 - (a) Determine the Single Limit Liability or Bodily Injury Primary Classification Factor on a PLEASURE USE basis for all YOUTHFUL OPERATORS.

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- (b) Assign the YOUTHFUL OPERATOR with the highest primary classification factor to the AUTO he/she operates most frequently.
 - (c) Remaining YOUTHFUL OPERATORS are assigned to remaining AUTOS in the order of the highest rated YOUTHFUL OPERATOR to the AUTO with the highest TOTAL BASE PREMIUM.
 - (d) After assigning YOUTHFUL OPERATORS to AUTOS on the basis of PLEASURE USE rating factors, each factor must be adjusted for the actual use and mileage of the AUTO and the Primary Graded Adjustment Factor before determining and applying the Secondary Rating Factor.
 - (3) Any remaining AUTOS are rated at the appropriate Principal Operator classification.
 - 2. Policies where the number of vehicles is greater than the number of operators:
 - a. Assign operators to vehicles as assigned in Rule 4.C.1.b. until each operator has been assigned to a vehicle.
 - b. Excess vehicles will be assigned as follows:
 - (1) If all operators in the household are age 50 or over, excess vehicles will use the Primary Rating Factors and the Primary Graded Adjustment Factor of the first listed driver. The class factor is then adjusted for the actual use and mileage of the vehicle.
 - (2) If there are operators in the household under age 50, the All Other Primary Rating Factor adjusted for the actual use and mileage of the vehicle and the Primary Graded Adjustment Factor will be used.
- D. Multi-Car Classification
- 1. The applicable Multi-Car Rating Factor applies if more than one PRIVATE PASSENGER AUTO is owned by an individual or owned jointly by two or more relatives or resident individuals and two or more AUTOS are insured on the same policy.
 - 2. This discount also applies to MOTOR HOME vehicles.

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3. The multi-car classification will also apply when vehicles owned by the same insured on different policies in different states are insured in AIG companies. Refer to the Class Plan Pages for the applicable coverages.

5. SAFE DRIVER INSURANCE PLAN (SDIP)

A. Definitions

1. Driving Record Points

a. Convictions

Conviction points shall be assigned for convictions during the experience period for motor vehicle violations of the applicant or any other current resident operator as follows:

- (1) Six points shall be assigned for conviction of:
 - (a) Driving while intoxicated or under the influence of drugs; or
 - (b) Failure to stop and report when involved in an accident; or
 - (c) Evading police; or
 - (d) Homicide or assault arising out of the operation of a motor vehicle; or
 - (e) Use of a vehicle in the commission of a felony; or
 - (f) Reckless or negligent operation of a motor vehicle; or
 - (g) Driving with a license that is suspended or revoked; or
 - (h) Operating a vehicle without permission; or
 - (i) Lending a license or registration to another; or
 - (j) Misrepresentation or making false statements to obtain a license, registration or insurance; or
 - (k) Failure to submit to a chemical test.
 - (l) Driving while drinking an open container;

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- (2) Four conviction points shall be assigned for conviction of:
 - (a) Racing on a public highway; or
 - (b) Any violation resulting in injury or death; or
 - (c) Permitting an uninsured vehicle to be driven; or
 - (d) Permitting an unlicensed individual to drive; or
 - (e) Driving over 100 miles per hour or higher; or
 - (f) Failure to stop for a school bus or
 - (g) Driving without a valid license.
- (3) Two conviction points shall be assigned for convictions of driving 16 MPH or more in excess of the posted speed limit not otherwise classified in (2)(e).
- (4) One conviction point shall be assigned for convictions of any other civil infraction for a moving vehicle violation.
- (5) Six points for suspension of license unless resulting from any of the conviction contained in this rule.

b. Accidents

Points shall be assigned for each accident that occurred during the experience period, involving the applicant or any current resident operator, while operating an AUTO.

- (1) One point is assigned for each AUTO accident exceeding the threshold that results in:
 - (a) Bodily injury or death; or
 - (b) Damage to all property including his or her own.
 - (c) Refer to State Exception Pages for applicable thresholds.

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- (2) One point is assigned if, during the experience period, there were two or more accidents, each of which resulted in damage to property but have not been assigned a point under (1) above.

Exceptions:

- (1) No points are assigned for accidents incurred by an operator demonstrated to be a named insured or a principal operator of an AUTO insured under a separate policy.
- (2) No points are assigned for accidents occurring under the following circumstances:
 - (a) AUTO lawfully parked (if the parked vehicle rolls from the parked position than any such accident is charged to the person who parked the AUTO); or
 - (b) the applicant, owner or other resident operator is reimbursed by, or on behalf of, a person who is responsible for the accident or has judgment against such person; or
 - (c) AUTO is struck in the rear by another vehicle and the applicant or other resident operator has not been convicted of a moving traffic violation in connection with this accident; or
 - (d) operator of the other AUTO involved in the accident was convicted of a moving traffic violation and the applicant or other resident operator was not convicted of a moving traffic violation in connection with the accident; or
 - (e) AUTO operated by the applicant or any resident operator is struck by a "hit and run" vehicle, if the accident is reported to the proper authority within 24 hours by the applicant or resident operator; or
 - (f) accidents involving damage by contact with animals or fowl; or

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- (g) accidents involving physical damage, limited to and caused by flying gravel, missiles or falling objects; or
- (h) accidents occurring when using AUTO in response to an emergency if the operator at the time of the accident was a paid or volunteer member of any Police or Fire Department, First Aid Squad or any law enforcement agency. This exception does not include an accident occurring after the AUTO ceases to be used in response to such emergency.

c. Inexperienced Operator

- (1) If the principal operator of an AUTO has no point assigned for an accident but has been licensed less than two years, one point is assigned.
- (2) If the principal operator of an AUTO has been licensed for less than two years but has a point assigned for an accident, assign a point only for the accident, not for the principal operator's inexperience.
- (3) If the principal operator of an AUTO qualifies for the Inexperienced Operator accident point based on (1) above, any accident points assigned to other operators on the policy are accumulated.

d. Application of Points

- (1) Two Car Risk

Points are assigned to each AUTO on the policy.

- (2) Three or More Car Risk

Points are assigned only to the two vehicles with the highest TOTAL BASE PREMIUM.

e. Refund of Surcharged Premium

If a point has been assigned for an accident or conviction and it is later determined that the accident or conviction falls under one of the exceptions in this rule, the Company shall refund to the insured the increased portion of the premium generated by the accident or conviction.

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2. Experience Period

The experience period shall be the three years immediately preceding the date of application or the preparation of the renewal.

B. Administration of SDIP

Information necessary to assign proper SDIP assignments shall be determined from any one or combination of the following:

1. Company's own records; or
2. Motor Vehicle records; or
3. Information provided by the applicant; or
4. C.L.U.E. (Comprehensive Loss Underwriting Experience) reports

6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS

A. Anti-Theft Device Discount

These discounts apply to Comprehensive coverage only. To qualify, the vehicle must be equipped with:

1. A hood lock which can be released only from inside the vehicle and
2. A device meeting the criteria of either Paragraph a. or b. below.

If a vehicle is equipped with more than one qualifying device, only the single highest discount shall apply.

Factory installed or evidence of installation of anti-theft devices meeting the following criteria prior to granting a discount is required.

a. Alarm Only and Active Disabling Devices

A discount on Comprehensive Coverage shall be afforded on vehicles equipped with (1) alarm only devices which sound an audible alarm that can be heard at a distance of at least 300 feet for a minimum of three minutes or (2) active disabling devices which disable the vehicle by making the fuel, ignition or starting system inoperative. A disabling device is categorized as active if a separate manual step is required to engage the device.

An active disabling device does not include an ignition interlock provided as a standard anti-theft device by the original manufacturer.

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b. Passive Disabling Devices

A discount on Comprehensive Coverage shall be afforded on vehicles equipped with passive disabling devices which disable the vehicle by making the fuel, ignition or starting system inoperative. A disabling device is categorized as passive if a separate manual step is not required to engage the device.

c. Refer to State Rate Pages for discount amount.

B. Passive Restraint Discount

The following discounts apply to Medical Payments and/or Personal Injury Protection only. To qualify, the PRIVATE PASSENGER AUTO must be equipped with a factory installed automatic occupant restraint, conforming to the federal crash protection requirements and meeting the criteria set forth below:

1. A discount shall be afforded when the vehicle is equipped with Air Bags in both front outboard seat positions (driver side and passenger side).
2. A discount shall be afforded when the vehicle is equipped with an Air Bag in only the driver side position.
3. A discount shall be afforded when the vehicle is equipped with passive/automatic seat belts in both front outboard seat positions (driver side and passenger side).
4. A discount shall be afforded when the vehicle is equipped with passive/automatic seat belts in only the driver side position.
5. Refer to State Rate Pages for discount amount.

NOTE: The Air Bag and Automatic Seat Belt Discounts are independent of each other. Therefore, vehicles can receive separate discounts for both Air Bags and Automatic Seat Belts when applicable.

C. Anti-Lock Braking System Discount

A discount shall be afforded for those PRIVATE PASSENGER AUTOS equipped with a factory installed four wheel Anti-Lock Braking System (ABS). Refer to State Rate Pages for discount amount and applicable coverages.

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D. Safe Boater/Safe Driver Discount

A Safe Boater/Safe Driver Discount applies to all vehicles on a policy if all automobile operators who have had verifiable boating experience, have been claim free in the operation of their boat for a period of at least three years preceding the date of initial automobile insurance application or subsequent automobile insurance renewal. This discount is not applicable if there is no automobile operator that has verifiable experience operating a boat. "Boat" as used in this rule must be a privately owned watercraft used for pleasure use only and does not include jet skis, wind surfing equipment, wave runners, floating homes, air boats, hydroplanes, canoes, kayaks or catamaran type powerboats. Refer to State Rate Pages for discount amount and applicable coverages.

E. Aviation Policy Discount

When the named insured or spouse insures his/her aircraft under a policy with the American International Group, a discount shall be applied. Refer to State Rate Pages for discount amount and applicable coverages.

F. Mature Operator Motor Vehicle Accident Prevention Course Discount

Refer to State Exception Pages.

G. Homeowner Discount

When the named insured or spouse owns their home and the head of household is older than age 25, a Homeowners Discount is applicable to the policy. Refer to State Rate Pages for discount amount and applicable coverages.

H. Claim Free Discount

1. A Claim Free Renewal Discount, as displayed in the State Rate Pages, will apply provided:
 - a. the policy has been continuously inforce with AIG, and
 - b. the policy has been accident and major moving violation free. An accident must be one in which the insured is found to be substantially at fault.

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2. The discount applies at a policy level to all vehicles on a policy. Application of the discount is as follows:
 - a. Policies inforce for less than six months with the Company do not yet qualify for this discount.
 - b. The determination of the applicable level of discount for renewal policies is calculated using the following formula:

(Policy Effective Date – Claim Free Date) = Number of months continuously inforce with AIG and at-fault accident free and moving violation free.

NOTE: The Claim Free data is determined as follows:

- (1) If a policy has been continuously inforce and at-fault accident and major moving violation free for that entire period, the claim free date is equal to the original inception date of the policy;
- (2) If the policy has been continuously inforce but has had a *bodily injury* at-fault accident or major moving violation while with the Company, the claim free date is equal to the renewal date immediately following the incident;
- (3) If the policy has a *property damage* at-fault accident and
 - (a) If a policy has been continuously inforce with the Company for more than six years, the claim free date is equal to the original inception date plus six years or the renewal effective date immediately following the incident, whichever date is earlier;
 - (b) If, after this calculation, the number of months continuously inforce with AIG and at-fault accident free and moving violation free months is greater than or equal to 12, then no SDIP points will be charged under Rule 5. of the manual.
 - (c) If the policy has been inforce with the company for six years or less, the claim free date is equal to the renewal effective date immediately following the incident.

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- (4) The claim free date is only recalculated with each subsequent at-fault accident or major moving violation. The term "original inception date" is replaced by the current claim free date in Rules 1 through 3 above if a subsequent incident occurs.
- (5) If there are multiple at-fault accidents or major moving violations on the policy, only the most recent incident applies.

- c. Refer to State Rate Pages for applicable discount amounts and eligible coverages.
- d. Refer to Rule 5. Safe Driver Insurance Plan for eligible occurrences.

I. Bill Plan Discount

A discount shall be afforded on policies for selected payment plans and payment methods. Refer to the State Rate Pages for the applicable discount amounts and coverages.

J. Household Composition Rating Factors

1. Determine the number of vehicles (including trailers) on the policy, the number of drivers on the policy, the number of operators in the household under the age of 25, the marital status of the head of the household, and the bodily injury limits on the policy; and
2. Determine the applicable factor from the charts in the Class Plan pages of this manual. Refer to State Class Plan Pages for factors and applicable coverages.
3. For the purpose of this rule, the bodily injury limits on the policy are defined as follows:
 - a. For new business policies, the bodily injury limits will be those limits with the prior carrier. If there was no prior insurance, the prior bodily injury limits will be assumed as \$10,000 per person, \$20,000 per accident.
 - b. For renewal policies, the bodily injury limits will be those limits of the renewal policy.

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K. Rate Level Factors

Refer to the Underwriting tier model for assignment to the appropriate rate level tier. Apply rate level tier factor to the applicable coverages as listed on the State Rate Pages.

L. All Other Rating Variables

Refer to the State Exception and Rate Pages for the applicable state specific rating variables.

7. POLICY PERIOD

A. No policy may be written for a period longer than 12 months.

B. Premium charged for policy terms as follows:

1. Twelve Month Policies:

Charge the annual premium.

2. Six Month Policies:

a. For a specified 6 month period, the premium charge is 50% of the annual premium.

b. Policies issued for a 6 month period with an effective date on the 29th, 30th and 31st of any month:

The first policy can be extended from the effective date to the first day of the calendar month following the expiration of the policy.

Premium for this extended coverage of 1 to 3 days will be waived.

3. Other Short Policies written for less than 12 months and other than 6 months – Such policies shall be written on a pro rata basis.

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8. CHANGES

- A. All changes requiring premium adjustments shall be computed pro rata.
- B. Adjustments of \$3 or less:
 - 1. Companies need not refund a return premium of less than \$3 if the insured requests the following:
 - a. Cancellation of coverage,
 - b. Reduction of limits of liability,
 - c. Increase in deductible(except that actual return premium shall be returned at the request of the insured).
 - 2. If the limits of liability are increased because of a change in the limits prescribed under any financial responsibility law, the additional premium charge shall be the actual difference in premium charges. If \$3 or less, it may be waived.

9. CANCELLATION

If a policy is cancelled by the company or insured, compute return premium pro rata for the period the policy was not in force.

NOTE: It is not customary to charge for the extra day (February 29th) which occurs one year in every four years.

10. SUSPENSION

Coverages other than Comprehensive or those that cannot be suspended within a state may be suspended subject to the following conditions:

- A. Liability coverages may not be suspended for risks for which a financial responsibility filing is in effect.
- B. Insurance may be suspended by endorsement provided the period of suspension is at least thirty (30) consecutive days.
- C. Suspension is effective after notice of the withdrawal of the vehicle from service is received.
- D. Suspense credit is given immediately and will be calculated pro-rata from the date of suspension to the end of the current premium period.
- E. Insurance may be reinstated upon the named insured's request effective not earlier than receipt of such request by the company or any of its authorized representatives.

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11. MISCELLANEOUS COVERAGES

- A. Refer to State Rate Pages for the following coverages:
1. Uninsured Motorists Coverage
 2. Underinsured Motorists Coverage
 3. Deductible Insurance
Refer to the State Rate Pages for available deductibles and applicable rates.
 4. Increased Transportation Expenses Coverage
 - a. Eligibility – Only policies providing Comprehensive are eligible to purchase Increased Limits Transportation Expenses Coverage.
 - b. The \$30/900 limit for Increased Limits Transportation Expenses Coverage, which is included in the Physical Damage rates, may be increased as shown in the State Rate Pages.
 - c. Refer to the State Rate Pages for available limits and applicable rates. The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.
 5. Towing and Labor Costs
 - a. This coverage may be written only for PRIVATE PASSENGER AUTOS.
 - b. Refer to the State Rate Pages for available limits and applicable rates. The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.
 6. Limited Mexico Coverage
 - a. At the option of the company and at the request of the insured, a policy may be extended to apply to accidents occurring in Mexico on a trip of ten days or less if within twenty five miles of the United States border.
 - b. Refer to the State Rate Pages for the applicable rates. The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

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7. Accidental Death Benefit

Refer to the State Rate Pages for the available limits and applicable rates. The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

8. Agreed Value Coverage

Refer to the State Rate Pages for the available limits and applicable rates. The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

B. Additional Equipment Coverage

Coverage for additional equipment may be purchased on a stated amount basis for any personal AUTO, panel truck, pickup or van insured for physical damage coverage.

1. The cost of additional equipment should not be considered when determining the symbol of the vehicle.
2. The charge determined in this rule is the only charge for additional equipment on a vehicle.
3. The charge is made only when the stated amount of Additional Equipment Coverage exceeds \$1,000.
4. Additional Equipment includes: Camper Tops, Bed Box, Running Boards/Side Steps, Rollbars/Lightbars, Roof Racks, Handicapped Wheelchair Lifts/Accessible Seating, Handicapped Hand Controls - Brakes/Accelerator, Fifth Wheel Hitch/Special, Hitches, Custom Wheels/Mags, Special Painting, Snow Plow (Non-commercial usage), Winches, Stereo Equipment, Lift Kit-Low Rider Equipped, Boards/Side Steps, Special Seating/Couches/Sofa Bed, Sinks/Refrigerators/Appliances, Counter Areas, Modified Carpeting/Upholstery/Draperies, Additional Windows/Skylights, Height Extending Roofs, Wood Paneling, Additional Lighting/Fixtures,

Ladders/Molding, Roof Rack, Handicapped Wheelchair Lifts/Accessible Seating and other additional equipment or vehicle customization.

Exception: Coverage for caps, covers or bed liners is provided without additional premium charge and without specific description of cap, cover or bed liner. Camper bodies with or without facilities for cooking or sleeping rate as a separate item.

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5. Premium Determination
 - a. Refer to State Rate Pages - Use all rating factors including class, territory, physical damage deductible, discounts, surcharges and other rating variables applicable to the vehicle.
 - b. Multiply the stated amount rate for Additional Equipment by the desired limit of coverage to obtain the stated amount Additional Equipment Base Rate.
 - c. Multiply the Additional Equipment Base Rate by the vehicles classification rating factor and all discounts, surcharges and rating factors applied to the vehicle to determine the premium for stated amount Comprehensive and Collision Additional Equipment coverage.

NOTES:

1. If Comprehensive or Collision coverage for Additional Equipment is purchased, the vehicle must have the corresponding Comprehensive or Collision coverage.
2. The Additional Equipment deductibles shall be the same as the vehicle deductibles.

C. Extended Non-Owned Liability Coverage

1. Liability Coverage – Liability coverage may be extended to an individual described below:
 - a. The insured named in the policy, the spouse if a resident of the same household or a resident relative who is furnished an AUTO for regular use but is not employed by a garage:
 - (1) When there is Primary Liability Insurance in effect on the AUTO or if the AUTO is used in the business of the United States Government, charge the premiums per person shown in the State Rate Pages.
 - (2) Refer to State Rate Pages for rates by coverage.
 - b. Coverage is not available if the insured named in the policy, the spouse if a resident of the same household or a resident relative who is furnished an AUTO for regular use is employed by a garage.

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2. Medical Payments – Premiums Per Person – Available only if Single Limit Liability or Bodily Injury and Property Damage coverages are extended. Refer to State Rate Pages for rates.

12. NON-PREMIUM POLICY CHARGES

A. Certified Risks – Financial Responsibility Laws

For risks rated in accordance with this manual for which the company has certified the policy in accordance with the financial responsibility laws, a fee of \$25 will be charged. This fee applies per vehicle and shall be applied every time a certificate is filed.

B. Miscellaneous Fees

Refer to State Rate Pages.

13. MISCELLANEOUS TYPES

A. MOTOR HOMES

1. Liability, Medical Payments/Personal Injury Protection, Uninsured and Underinsured Motorists Coverages

- a. MOTOR HOMES used in driving to or from work or used in business – Classify and rate as a PRIVATE PASSENGER AUTO.
- b. PLEASURE USE MOTOR HOMES – Charge the percentage of the otherwise applicable PLEASURE USE classification rates for a PRIVATE PASSENGER AUTO displayed in the State Rate Pages.

2. Physical Damage

- a. Determine the value of the MOTOR HOME, including the value of any additional facilities or equipment. (Refer to Underwriting Guidelines for definition of additional facilities or equipment.) Assign a symbol based on the stated amount using the cost new tables (Refer to Vehicle Symbol Assignment Pages).
- b. MOTOR HOMES used in driving to or from work or used in business – Classify and rate as PRIVATE PASSENGER AUTOS.
- c. PLEASURE USE MOTOR HOMES – Charge the percentage of the otherwise applicable PLEASURE USE classification Comprehensive and Collision base rates as is displayed in the State Rate Pages.

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- d. For custom built MOTOR HOMES, the MODEL YEAR of the chassis determines the MODEL YEAR of the MOTOR HOME.
 3. The Safe Driver Insurance Plan, miscellaneous rating factors, discounts and surcharges apply.
 4. Expense Fees – Add the appropriate expense fees according to the Premium Determination rule.
- B. Trailers and CAMPER BODIES Designed for Use with PRIVATE PASSENGER AUTOS and Pickups
1. Liability Coverage
 - a. A Personal Auto Policy affording liability coverage covers trailers designed for use with a PRIVATE PASSENGER AUTO, pickup, panel truck or van, or CAMPER BODIES designed for use with a pickup, without additional premium charge and without specific description of the trailer or CAMPER BODY.
 - b. Exceptions: Coverage is not provided for a trailer or CAMPER BODY:
 - (1) used for business purposes with other than a PRIVATE PASSENGER AUTO or owned pickup, panel truck or van, or
 - (2) when no AUTO is owned by the insured.
 2. Medical Payments
 - a. A Personal Auto Policy affording medical payments coverage provides coverage for trailers designed for use with a PRIVATE PASSENGER AUTO, pickup, panel truck or van, and CAMPER BODIES designed for use with a pickup, without additional premium charge and without specific description of the trailer or CAMPER BODY.
 - b. Exceptions: Coverage is not provided for a trailer or CAMPER BODY:
 - (1) used for business purposes with other than a PRIVATE PASSENGER AUTO or owned pickup, panel truck or van, or
 - (2) when no AUTO is owned by the insured, or

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(3) located for use as a residence or premises.

3. Liability and Medical Payments

Liability and Medical Payments coverage is afforded without additional premium charge for farm wagons and farm implements when attached to a PRIVATE PASSENGER AUTO, pickup, panel truck or van.

4. Physical Damage

Trailers and camper bodies are to be insured as separate items with separate premiums shown for each unit. The deductible applies separately to each unit.

NOTE: Coverage is not provided on an "agreed value" basis.

a. Recreational Trailers and Camper Bodies

(1) Comprehensive and Collision – Charge the percentage of the Comprehensive and Collision otherwise applicable All Other Class/PLEASURE USE rates for PRIVATE PASSENGER AUTOS.

(2) The Safe Driver Insurance Plan and Multi-Car discounts do not apply.

b. All Other Trailers

For rates, refer to State Rate Pages.

**THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
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ARKANSAS EXCEPTION PAGES**

1. DEFINITIONS

The following replaces Section G.1 of this Rule:

1. Liability Coverages

Territory Base Rate x Increased Limits Factor for each of the following coverages:
Single Limit Liability or Bodily Injury and Property Damage Liability, Medical
Payments.

3. PREMIUM DETERMINATION

The introductory paragraph of this rule is replaced by the following:

Single Limit Liability or Bodily Injury and Property Damage Liability, Medical
Payments, Uninsured and Underinsured Motorists, Comprehensive and Collision
premiums are determined as follows:

Section 3.F.1 is replaced by the following:

1. Model Year and Symbol Determination

For the Physical Damage coverages refer to the ISO Symbol Assignment.

Section G:

Does not apply.

4. CLASSIFICATIONS

Section 4.A.1.b is replaced by the following:

- b. Determine the Primary Classification factors from the State Class Plan Pages.

Section 4.A.2.c is replaced by the following:

Determine the appropriate Secondary Class Plan Factor from the Secondary Class Plan
Pages based on the accident and conviction points and number of vehicles on the policy.

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4. CLASSIFICATIONS (Continued)

Section 4.B.4.a.(2) is replaced by the following:

- (2) A full time high school student, college or university student, or a college or university graduate.

5. SAFE DRIVER INSURANCE PLAN (SDIP)

Section A.1.b.1.c is replaced by the following:

(c) Accident Threshold

For damage for any property including the insured's own, the threshold in the state of Arkansas is \$500 for a paid loss or amount held as a loss reserve.

Section A.1.b.2. Exception (2)(b) is replaced with the following:

- (b) Applicant, owner or other resident operator involved in an accident is (a) determined to be 50% or less negligent, or (b) reimbursed for 50% or more of his or her damages by or on behalf of persons involved in the accident.

6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS

The following paragraph is added to Section C.

The insured must provide the company with evidence of factory installation of an Anti-Lock Braking System prior to granting a discount.

Rule 6.E, Aviation Policy Discount does not apply.

The following is added to Section F of this Rule:

F. Motor Vehicle Accident Prevention Course Discount

- a. The Motor Vehicle Accident Prevention Course Discount applies to the premiums for Single Limit Liability, or Bodily Injury and Property Damage Liability, Medical Payments, Comprehensive and Collision coverages.

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6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS (Continued)

Exception:

This discount does not apply to vehicles classified and rated under the Miscellaneous Types Rule unless otherwise specified.

- b. Private Passenger Autos principally operated by an adult operator (including autos classified under Youthful NON-PRINCIPAL Operator classifications) shall be subject to a discount provided the adult principal operator of the auto:
 - (1) is age 55 or older, and
 - (2) has a completion certificate, dated within the last 36 months, certifying that the principal operator has successfully completed an approved Motor Vehicle Accident Prevention Course.

- c. The Motor Vehicle Accident Prevention Course Discount shall be applied in accordance with the following:
 - (1) Only to the auto principally operator by the operator with the course completion certificate.
 - (2) Only once to each such auto regardless of the number of operators with course completion certificates.

- d. An approved Motor Vehicle Accident Prevention Course shall:
 - (1) Be approved by the Arkansas Department of Motor Vehicles, and
 - (2) Be taught by an approved instructor, and
 - (3) Include the minimum hours of classroom and field driving instruction prescribed by the Arkansas Department of Motor Vehicles, and
 - (4) Shall not be self-instructed.

- e. Refer to the State Rate Pages for the discount amount.

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6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS (Continued)

Section H.2.a is replaced by the following:

- a. Policies inforce for less than twelve months with the Company do not yet qualify for this discount.

Rule 6.I, Bill Plan Discount does not apply.

The following is added to Section L of this Rule:

1. Agency/Brokerage Produced Factor

For business produced by an agent or broker, apply a factor of 1.10 to the following coverages: Single Limit Liability, Bodily Injury and Property Damage Liability, Medical Payments, Comprehensive, and Collision.

11. MISCELLANEOUS COVERAGES

The following is added to Section A.1 of this Rule:

1. Uninsured Motorists Coverage
 - a. Owners –

BODILY INJURY

This form of auto insurance must be offered at limits not less than the financial responsibility limits under every auto liability policy issued or delivered to the owner of a motor vehicle registered or principally garaged in Arkansas. Attach applicable endorsement.

Exceptions

- (1) The named insured has the right to reject such coverage in writing.
- (2) After a named insured rejects such coverage, the insurer shall not be required to notify any insured in any renewal, reinstatement, substitute, amended or replacement policy as to the availability of such coverage.
- (3) The written agreement to reject such coverage shall continue until the rejection is withdrawn in writing by the named insured.

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11. MISCELLANEOUS COVERAGES (continued)

Increased Limits

If a named insured or applicant purchases liability limits greater than the financial responsibility limits, increased limits of Uninsured Motorists Coverage must be offered in amounts up to the liability limits on the policy.

NOTE:

- a. For new policies an insured or applicant who does not want to purchase increased limits shall reject such increased limit in writing on the application for insurance coverages.
- b. If a renewal policy has Uninsured Motorists Coverage at limits less than the liability limits provided on the policy, increased limits shall not be afforded unless a named insured requests such coverage in writing.

PROPERTY DAMAGE

If Bodily Injury Uninsured Motorists Coverage is purchased, the named insured must be offered Property Damage Uninsured Motorists Coverage, subject to a \$200 deductible.

Exceptions

- (1) Property Damage Uninsured Motorists limits shall be made available up to the policy's property damage liability limits.
- (2) The named insured has the right to reject Property Damage Uninsured Motorists Coverage in writing.
- (3) Subsequent continuation, renewal, or reinstatement policies thereunder, issued by the same insurer need not provide the rejected coverage unless the named insured requests such coverage in writing. However, if the insured substitutes or adds a vehicle under the policy, a new written rejection of Property Damage Uninsured Motorists Coverage is required.
- (4) Whenever a new application is submitted in connection with any renewal, reinstatement or replacement policy, the provisions of this rule shall apply in the same manner as if a new policy is being issued.

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11. MISCELLANEOUS COVERAGES (continued)

1. Basic Limits

The rates for basic limits of the following options of Uninsured Motorists Coverage are displayed on the State Rate Pages.

Uninsured Motorists Coverage options:

\$50,000 Bodily Injury ONLY

\$75,000 Bodily Injury and Property Damage*

\$25,000/50,000 Bodily Injury

\$25,000 Property Damage*

*Property Damage Uninsured Motorists Coverage is subject to a \$200 Deductible.

2. Increased Limits

For higher limits of Single Limit Uninsured Motorists Coverage multiply the appropriate Uninsured Motorists factor on the State Rate Pages by the appropriate base rate (\$50,000 Bodily Injury Only or \$75,000 Bodily Injury and Property Damage) depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

For higher limits of Split Limit Uninsured Motorists Coverage multiply the appropriate Uninsured Motorists factor on the State Rate Pages by the appropriate base rate (\$25,000/50,000 Bodily Injury and \$25,000 Property Damage) depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

The following is added to Section A.2 of this Rule:

1. Underinsured Motorists Coverage

Eligibility

- a. This form of auto insurance shall be offered in limits at least equal to the Financial Responsibility law limits under every automobile liability insurance policy covering liability arising out of the ownership, maintenance or use of any motor vehicle in Arkansas.

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11. MISCELLANEOUS COVERAGES (continued)

Exceptions

- (1) If the named insured does not elect Underinsured Motorists Coverage, the coverage must be rejected in writing.
- (2) This coverage shall not be provided and must be rejected in writing if the named insured has rejected Bodily Injury Uninsured Motorists Coverage.
- (3) Subsequent renewal or reinstatement policies issued need not provide the rejected coverage unless the named insured requests such coverage. However, if the insured substitutes or adds a vehicle under the policy, a new written rejection of Underinsured Motorists Coverage is required.

b. Increased Limits – Increased limits of Underinsured Motorists coverage shall be offered if the insured purchases increased limits of Uninsured Motorists Coverage:

- (1) Increased Limits Uninsured Motorists Coverage must be afforded
- (2) Increased Limits Uninsured and Underinsured Motorists Insurance must be afforded at the same limits,
- (3) Underinsured Motorists coverage must apply to all vehicles insured under the policy.

c. Rates

Rates for \$25,000/50,000 Bodily Injury Liability Underinsured Motorists Coverage and \$50,000 Single Limit Liability Bodily Injury Only are shown on the State Rate Pages, depending on whether the risk is a single car or multi-car policy.

For higher limits of Underinsured Motorists Coverage multiply the appropriate Underinsured Motorists factor on the State Rate Pages by the appropriate base rate depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

Section A.7 of this Rule is replaced by Section A.9.

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11. MISCELLANEOUS COVERAGES (continued)

The following are added to Section A of this Rule.

9. Arkansas Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit

A. Eligibility

Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit must be afforded for every auto registered or principally garaged in Arkansas.

If one or more of these coverages are afforded, attach the applicable endorsement to the policy.

Exception:

- (1) The named insured has the right to reject one or more of such coverages in writing and must reject the Statutory Limit of Medical Payments in writing if lower or higher limits are requested.
- (2) Subsequent renewal policies issued by the same insurer need not provide the rejected coverage(s) or limit unless the named insured requested such coverage(s) or limit in writing.

B. Coverages and Rates

1. Medical Payments

a. Limits: Statutory Limit per person - \$5,000.

- (1) Lower or higher limits are permitted only when the named insured has rejected the Statutory Limit.
- (2) A maximum limit of \$5,000 applies to pedestrians who are other than the named insured or a relative.
- (3) Basic and Increased limits of Personal Auto Medical Payments Coverage may be purchased only when the named insured has rejected Arkansas Medical Payments Coverage.

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11. MISCELLANEOUS COVERAGES (continued)
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b. Rates:

- (1) Use the base rates for Medical Payments Insurance.
- (2) The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do apply for this coverage.

2. Work Loss Coverage

a. Limits Maximum per person –

- (1) For an Income Earner - \$140 per week for 52 weeks.
- (2) For a Non-Income Earner - \$70 per week for 52 weeks.

b. Rates:

See Rate Pages for applicable Rates.

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

3. Accidental Death Benefit

a. Limits: Maximum per person – \$5,000

b. Rates:

See Rate Pages for applicable Rates.

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

Section B of this Rule is deleted.

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11. MISCELLANEOUS COVERAGES (Continued)

The following are added to this Rule:

D. Audio, Visual and Data Electronic Equipment Coverage

1. Coverage

Coverage is available for loss to any electronic equipment not specifically designed solely for the reproduction of sound that receives or transmits audio, visual or data signals, and any accessories used with such equipment, if at the time of loss the equipment or accessories are contained in a vehicle described in the policy for which this coverage is provided.

This coverage applies only if:

- a. The equipment at the time of loss is:
 1. Permanently installed in the vehicle; or
 2. Designed to be solely operated by use of the power from the vehicle's electrical system and the equipment is removable from a housing unit which is permanently installed in the vehicle; and
- b. The equipment is not necessary for the normal operation of the auto or monitoring of the auto's operating systems.

Types of electronic equipment not specifically designed solely for the reproduction of sound for which coverage may be purchased include, but are not limited to:

- (1) Citizens Band Radios;
- (2) Telephones;
- (3) Two-Way Mobile Radios;
- (4) Scanning Monitor Receivers;
- (5) Television Monitor Receivers;
- (6) Video Cassette Recorders;
- (7) Audio Cassette Recorders; and
- (8) Personal Computers.

Note

- a. When Collision or Comprehensive is purchased, corresponding coverage is automatically provided without additional premium charge for permanently installed telephones designed to be operated by use of the vehicle's electrical system and any accessories used with the telephone.
- b. Coverage is not available for radar or laser detectors.

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11. MISCELLANEOUS COVERAGES (Continued)

2. Rating

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

Develop the premium independently for each covered auto as follows:

- a. Determine the limit of liability based upon the total cost new of the electronic equipment permanently installed in that auto and the cost new of its accessories. Do not include the cost of tapes, records, discs, and other media in determining this limit.
- b. Coverage is available at the limits and premiums shown in the State Rate Pages.

3. Endorsement

Attach the Coverage for Excess Sound Reproducing Equipment, Audio, Visual and Electronic Equipment and Tapes, Records, Discs, and Other Media Endorsement to the policy.

E. Tapes, Records, Discs and Other Media Coverage

1. Additional coverage for \$200 worth of tapes, records, discs and other media applies at no additional charge when coverage is provided for audio, visual and data electronic equipment:
2. Tapes, Records, Discs, and Other Media only when coverage is *not* provided for audio, visual and data electronic equipment;

Coverage for \$200 worth of tapes, records, discs and other media is available for an additional charge per auto as outlined the State Rate Pages. The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

3. Endorsement

Attach the Coverage for Excess Sound Reproducing Equipment, Audio, Visual and Electronic Equipment and Tapes, Records, Discs, and Other Media Endorsement to the policy.

**THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
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11. MISCELLANEOUS COVERAGES (Continued)

F. Customizing Equipment Coverage

Comprehensive and Collision coverage for customizing equipment may be purchased on a stated amount basis for any panel truck, pickup or van insured for physical damage coverage. Refer to the Customizing Equipment Coverage (Stated Amount Insurance) Endorsement for extent of coverage.

1. The cost of customized equipment should not be considered when determining the symbol of the vehicle.
2. The customizing charge determined in this rule is the only charge for customized equipment on a vehicle.
3. The charge for customizing is made only when the Customizing Equipment Coverage (Stated Amount Insurance) Endorsement is attached.

Rate as follows:

1. Refer to State Rate Pages, use the territory and any physical damage deductible applicable to the vehicle.
2. Multiply the Symbol 2 rate for the current model year by the factor outlined in the State Rate Pages to obtain the stated amount rate per \$100 of customizing.

NOTE: Prior to October 1, 1989 apply the above factors to the Symbol 7 rate for the current model year.

3. Multiply the stated amount rate for customizing by the desired limit of coverage to obtain the state amount customizing Base Rate.
4. Multiply the customizing Base Rate by the vehicles classification rating factor to determine the premium for stated amount Comprehensive and Collision customizing coverage.

NOTES:

- a. The Customizing Equipment Coverage (Stated Amount Insurance) Endorsement shall be attached.
- b. If Comprehensive or Collision coverage for customizing is purchased, the vehicle must have the corresponding Comprehensive or Collision coverage.
- c. The customizing deductibles shall be the same as the vehicle deductibles.

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12. NON-PREMIUM POLICY CHARGES

Section A. of this Rule does not apply.

Effective: New Business: 01/28/08
Renewal: 03/28/08

**PRIVATE PASSENGER AUTOMOBILE MANUAL
COMPANY: THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
AUTOMOBILE BASE RATES FOR THE STATE OF ARKANSAS CODE 03**

Coverage	TERRITORIES																
	1	3	105	205	106	206	8	9	110	210	111	211	411	511	711	811	911
\$25/50 Bodily Injury	236	188	195	190	226	252	227	187	193	191	211	190	230	219	187	164	176
\$25,000 Property Damage	211	168	177	170	202	224	204	167	172	171	188	170	204	195	167	147	155
\$75,000 Single Limit Liability	508	405	422	409	485	541	489	402	415	411	453	409	493	470	402	353	376
\$5,000 Medical Payments	84	83	91	89	89	122	119	86	84	83	99	89	90	102	86	81	100
\$100 Deductible Model Year 2004, Symbol 2 Comprehensive	53	55	88	89	61	74	58	85	51	53	106	88	81	104	85	71	90
\$200 Deductible Model Year 2004, Symbol 2 Collision	218	208	238	225	213	240	243	222	205	207	248	225	230	248	222	221	227

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Effective: New Business: 01/28/08
Renewal: 03/28/08

PRIVATE PASSENGER AUTOMOBILE MANUAL
COMPANY: THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
AUTOMOBILE BASE RATES FOR THE STATE OF ARKANSAS CODE 03

Coverage	TERRITORIES																
	1	3	105	205	106	206	8	9	110	210	111	211	411	511	711	811	911
\$25/50 Uninsured Motorists Bodily Injury Single Car	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
\$25/50 Uninsured Motorists Bodily Injury Multi-Car (per car)	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
\$25,000 Uninsured Motorists Property Damage Single Car	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
\$25,000 Uninsured Motorists Property Damage Multi-Car (per car)	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
\$50,000 Single Limit Uninsured Motorists Bodily Injury Only Single Car	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27
\$50,000 Single Limit Uninsured Motorists Bodily Injury Only Multi-Car (per car)	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22	22
\$75,000 Single Limit Uninsured Motorists BI and PD Single Car	31	31	31	31	31	31	31	31	31	31	31	31	31	31	31	31	31
\$75,000 Single Limit Uninsured Motorists BI and PD Multi-Car (per car)	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24
\$25/50 Underinsured Motorists Bodily Injury Single Car	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14
\$25/50 Underinsured Motorists Bodily Injury Multi-Car (per car)	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
\$50,000 Single Limit Underinsured Motorists Bodily Injury Only Single Car	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15
\$50,000 Single Limit Underinsured Motorists Bodily Injury Only Multi-Car (per car)	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12

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THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS

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INCREASED LIMITS

BODILY INJURY	
Limit	Factor
\$ 25/50	1.00
50/100	1.19
100/200	1.33
100/300	1.38
250/500	1.46
300/300	1.49
500/500	1.56
500/1000	1.63
1000/1000	1.74

SINGLE LIMIT LIABILITY	
Limit	Factor
\$75,000	1.00
100,000	1.04
200,000	1.16
300,000	1.22
500,000	1.28

PROPERTY DAMAGE	
Limit	Factor
\$25,000	1.00
50,000	1.05
100,000	1.09
150,000	1.14
200,000	1.16

MEDICAL PAYMENTS	
Limit	Factor
\$500	0.63
1,000	0.69
2,000	0.75
5,000	1.00
10,000	1.25
25,000	2.31
50,000	3.25
75,000	4.00
100,000	4.31

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS RATE PAGES

PERSONAL AUTOMOBILE MANUAL

RULE 11.A.3. DEDUCTIBLE INSURANCE

a. COMPREHENSIVE

For Comprehensive Deductibles for which no premium is shown on the State Base Rate Pages, charge the following percentage of the \$100 Deductible Comprehensive Premium:

Deductible	1990 and Subsequent			1989 & Prior		
	ISO Symbol			ISO Symbol		
	1-4	5-13	>13	1-8	10-13	>13
Full Coverage	135%	135%	135%	135%	135%	135%
\$50	105%	105%	105%	110%	107%	105%
\$100	100%	100%	100%	100%	100%	100%
\$200	87%	88%	92%	86%	88%	94%
\$250	84%	85%	89%	82%	84%	90%
\$300	78%	80%	85%	77%	79%	85%
\$400	72%	74%	80%	71%	73%	80%
\$500	68%	69%	77%	66%	68%	75%
\$1,000	50%	52%	66%	48%	50%	62%

b. COLLISION

For Collision Deductibles for which no premium is shown on the State Base Rate Pages, charge the following percentage of the \$200 Deductible Collision Premium:

Deductible	1990 and Subsequent			1989 & Prior		
	ISO Symbol			ISO Symbol		
	1-4	5-13	>13	1-8	10-13	>13
\$50	150%	150%	150%	150%	150%	150%
\$100	115%	115%	115%	115%	115%	115%
\$200	100%	100%	100%	100%	100%	100%
\$250	98%	98%	98%	98%	98%	98%
\$300	95%	96%	97%	94%	94%	96%
\$400	91%	92%	93%	88%	89%	92%
\$500	85%	86%	87%	82%	84%	89%
\$1,000	56%	60%	65%	56%	60%	65%

c. Percentage of Loss Deductibles For Comprehensive and Collision Coverages

This Coverage is available at:

- (1.) Comprehensive
25% Deductible subject to a \$100 minimum, \$500 maximum. Charge 90% of the \$100 Deductible rate.
- (2.) Collision
25% Deductible subject to a \$200 minimum, \$500 maximum. Charge 90% of the \$200 Deductible rate.

ARKANSAS - THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
MODEL YEAR - SYMBOL BASE - 2004-2

MODEL YEAR	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	
2008	0.92	1.12	1.36	1.53	1.68	1.83	1.97	2.06	2.25	2.46	2.71	2.95	3.21	3.55	3.86	4.18	4.46	4.94	5.60	6.33	7.00	7.71	8.76	10.25	11.82	+	+	
2007	0.89	1.09	1.32	1.49	1.64	1.78	1.92	2.01	2.19	2.40	2.64	2.87	3.13	3.46	3.76	4.07	4.34	4.81	5.45	6.16	6.81	7.50	8.52	9.97	11.50	+	+	
2006	0.87	1.06	1.28	1.45	1.59	1.73	1.87	1.95	2.13	2.33	2.57	2.79	3.04	3.36	3.66	3.95	4.22	4.67	5.30	5.99	6.63	7.29	8.29	9.70	11.18	+	+	
2005	0.84	1.03	1.25	1.41	1.55	1.68	1.81	1.90	2.07	2.27	2.49	2.71	2.96	3.27	3.55	3.84	4.10	4.54	5.15	5.82	6.44	7.09	8.09	9.42	10.87	+	+	
2004	0.82	1.00	1.21	1.37	1.50	1.63	1.76	1.84	2.01	2.20	2.42	2.63	2.87	3.17	3.45	3.73	3.98	4.41	5.00	5.65	6.25	6.88	7.82	9.15	10.55	+	+	
2003	0.80	0.97	1.17	1.33	1.46	1.58	1.71	1.78	1.95	2.13	2.35	2.55	2.78	3.07	3.35	3.62	3.86	4.28	4.85	5.48	6.06	6.67	7.59	8.88	10.23	+	+	
2002	0.77	0.94	1.14	1.29	1.41	1.53	1.65	1.73	1.89	2.07	2.27	2.47	2.70	2.98	3.24	3.51	3.74	4.15	4.70	5.31	5.88	6.47	7.35	8.60	9.92	+	+	
2001	0.75	0.91	1.10	1.25	1.37	1.48	1.60	1.67	1.83	2.00	2.20	2.39	2.61	2.88	3.14	3.39	3.62	4.01	4.55	5.14	5.69	6.26	7.12	8.33	9.60	+	+	
2000	0.72	0.88	1.06	1.21	1.32	1.43	1.55	1.62	1.77	1.94	2.13	2.31	2.53	2.79	3.04	3.28	3.50	3.88	4.40	4.97	5.50	6.05	6.88	8.05	9.28	+	+	
1999	0.68	0.83	1.00	1.14	1.25	1.35	1.46	1.53	1.67	1.83	2.01	2.18	2.38	2.63	2.86	3.10	3.30	3.66	4.15	4.69	5.19	5.71	6.49	7.59	8.76	+	+	
1998	0.66	0.80	0.97	1.10	1.20	1.30	1.41	1.47	1.61	1.76	1.94	2.10	2.30	2.54	2.78	2.98	3.18	3.53	4.00	4.52	5.00	5.50	6.26	7.32	8.44	+	+	
1997	0.63	0.77	0.93	1.05	1.16	1.26	1.36	1.42	1.55	1.69	1.86	2.03	2.21	2.44	2.66	2.87	3.06	3.40	3.85	4.35	4.81	5.30	6.02	7.05	8.12	+	+	
1996	0.60	0.73	0.88	1.00	1.10	1.19	1.28	1.34	1.47	1.61	1.77	1.92	2.10	2.31	2.52	2.72	2.91	3.22	3.65	4.12	4.56	5.02	5.71	6.68	7.70	+	+	
1995	0.58	0.71	0.86	0.97	1.07	1.16	1.25	1.31	1.43	1.56	1.72	1.87	2.04	2.25	2.45	2.65	2.83	3.13	3.55	4.01	4.44	4.88	5.55	6.50	7.49	+	+	
1994	0.56	0.68	0.82	0.93	1.02	1.11	1.20	1.25	1.37	1.50	1.65	1.79	1.95	2.16	2.35	2.54	2.71	3.00	3.40	3.84	4.25	4.68	5.32	6.22	7.17	+	+	
1993	0.53	0.65	0.79	0.89	0.98	1.06	1.14	1.20	1.31	1.43	1.57	1.71	1.87	2.06	2.24	2.42	2.59	2.87	3.25	3.67	4.06	4.47	5.06	5.95	6.86	+	+	
1992	0.50	0.61	0.74	0.84	0.92	0.99	1.07	1.12	1.23	1.34	1.46	1.60	1.75	1.93	2.10	2.28	2.43	2.69	3.05	3.45	3.81	4.20	4.77	5.58	6.44	+	+	
1991	0.47	0.57	0.69	0.78	0.86	0.93	1.00	1.05	1.15	1.25	1.38	1.50	1.64	1.81	1.97	2.13	2.27	2.51	2.85	3.22	3.56	3.92	4.46	5.22	6.01	+	+	
1990	0.47	0.57	0.69	0.78	0.86	0.93	1.00	1.05	1.15	1.25	1.38	1.50	1.64	1.81	1.97	2.13	2.27	2.51	2.85	3.22	3.56	3.92	4.46	5.22	6.01	+	+	
1989	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	2.96	3.12	3.42	3.92	4.31	+	+
1988	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	2.96	3.12	3.42	3.92	4.31	+	+
1987	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	2.96	3.12	3.42	3.92	4.31	+	+
1976 thru 1980	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	2.96	3.12	3.42	3.92	4.31	+	+
1975 & PRIOR	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	2.96	3.12	3.42	3.92	4.31	+	+

+ Develop the Comprehensive Base Rates for Symbol 27 vehicles by:
a. Increasing the factor for Symbol 26 by +1.50 for each 10,000 or fraction of 10,000 above 80,000 of Original Cost and
b. Applying this factor to the Symbol 2 Base Rate on the State Rate Page for the applicable Model Year.

MODEL YEAR	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27
2008	1.03	1.12	1.22	1.30	1.37	1.43	1.51	1.56	1.60	1.69	1.76	1.85	1.92	2.02	2.13	2.24	2.24	2.35	2.48	2.60	2.80	2.96	3.12	3.42	3.92	4.31	+
2007	1.00	1.09	1.19	1.26	1.33	1.40	1.47	1.52	1.56	1.65	1.71	1.80	1.86	1.96	2.07	2.18	2.29	2.29	2.41	2.53	2.73	2.88	3.04	3.32	3.82	4.20	+
2006	0.98	1.06	1.16	1.23	1.29	1.36	1.43	1.47	1.52	1.60	1.66	1.75	1.81	1.91	2.01	2.12	2.23	2.23	2.34	2.46	2.65	2.80	2.96	3.23	3.71	4.08	+
2005	0.95	1.03	1.12	1.19	1.26	1.32	1.39	1.43	1.47	1.56	1.62	1.70	1.76	1.85	1.96	2.06	2.16	2.28	2.28	2.39	2.58	2.72	2.87	3.14	3.61	3.97	+
2004	0.92	1.00	1.09	1.16	1.22	1.28	1.35	1.39	1.43	1.51	1.57	1.65	1.71	1.80	1.90	2.00	2.10	2.21	2.32	2.43	2.60	2.74	2.90	3.05	3.50	3.85	+
2003	0.89	0.97	1.06	1.13	1.18	1.24	1.31	1.35	1.39	1.46	1.52	1.60	1.66	1.75	1.84	1.94	2.04	2.14	2.25	2.43	2.56	2.71	2.96	3.40	3.73	+	
2002	0.86	0.94	1.02	1.09	1.15	1.20	1.27	1.31	1.34	1.42	1.48	1.55	1.61	1.69	1.79	1.88	1.97	2.08	2.18	2.35	2.48	2.62	2.87	3.29	3.62	+	
2001	0.84	0.91	0.99	1.06	1.11	1.16	1.23	1.26	1.30	1.37	1.43	1.50	1.56	1.64	1.73	1.82	1.91	1.91	2.01	2.11	2.28	2.40	2.54	2.78	3.19	3.50	+
2000	0.81	0.88	0.96	1.02	1.07	1.13	1.19	1.22	1.26	1.33	1.38	1.45	1.50	1.58	1.67	1.76	1.85	1.94	2.04	2.20	2.32	2.46	2.68	3.08	3.39	+	
1999	0.78	0.83	0.90	0.96	1.01	1.06	1.12	1.15	1.19	1.25	1.30	1.37	1.42	1.49	1.58	1.66	1.74	1.83	1.93	2.08	2.19	2.32	2.53	2.91	3.20	+	
1998	0.73	0.79	0.86	0.92	0.96	1.01	1.07	1.10	1.13	1.19	1.24	1.30	1.35	1.42	1.50	1.58	1.66	1.75	1.83	1.98	2.09	2.20	2.41	2.77	3.04	+	
1997	0.69	0.75	0.82	0.87	0.92	0.96	1.01	1.04	1.07	1.13	1.18	1.24	1.28	1.35	1.43	1.50	1.58	1.66	1.74	1.88	1.98	2.09	2.29	2.63	2.89	+	
1996	0.63	0.69	0.75	0.80	0.84	0.88	0.93	0.96	0.99	1.04	1.08	1.14	1.18	1.24	1.31	1.38	1.45	1.52	1.60	1.73	1.82	1.93	2.10	2.42	2.66	+	
1995	0.60	0.65	0.71	0.75	0.79	0.83	0.88	0.90	0.93	0.98	1.02	1.07	1.11	1.17	1.24	1.30	1.37	1.44	1.51	1.63	1.72	1.81	1.98	2.28	2.50	+	
1994	0.53	0.58	0.63	0.67	0.71	0.74	0.78	0.81	0.83	0.88	0.91	0.96	0.99	1.04	1.10	1.16	1.22	1.28	1.35	1.45	1.53	1.62	1.77	2.03	2.23	+	
1993	0.51	0.55	0.60	0.64	0.67	0.70	0.74	0.76	0.79	0.83	0.86	0.91	0.94	0.99	1.05	1.10	1.16	1.22	1.28	1.38	1.45	1.53	1.68	1.93	2.12	+	
1992	0.47	0.51	0.56	0.59	0.62	0.65	0.69	0.71	0.73	0.77	0.80	0.84	0.87	0.92	0.97	1.02	1.07	1.13	1.18	1.28	1.35	1.42	1.56	1.79	1.96	+	
1991	0.44	0.48	0.52	0.56	0.59	0.61	0.65	0.67	0.69	0.72	0.75	0.79	0.82	0.86	0.91												

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS RATE PAGES

PERSONAL AUTOMOBILE MANUAL

RULE 6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS

Section	Discount	Description	Bodily Injury	Property Damage	Single Limit Liability	Coverage			Comprehensive	Collision
						Medical Payments	Uninsured Motorists	Medical Payments		
A.	Anti-Theft Devices Discount	Alarm Only or Active Disabling Devices	---	---	---	---	---	---	5%	---
		Passive Disabling Devices	---	---	---	---	---	---	15%	---
B.	Passive Restraint Discount	Air Bags Both Sides	---	---	---	---	---	---	---	---
		Air Bags Driver Side	---	---	---	---	---	---	---	---
		Passive/Auto Seat Belts Both Sides	---	---	---	---	---	---	---	---
		Passive/Auto Seat Belts Driver Side	---	---	---	---	---	---	---	---
C.	Anti-Lock Brake Discount		5%	5%	5%	---	---	---	---	
D.	Safe Boater/Safe Driver Discount		15%	15%	15%	15%	---	15%	15%	
F.	Senior Operator Motor Vehicle Accident Prevention Course Discount		10%	10%	10%	10%	---	10%	10%	
G.	Homeowner Discount		10%	10%	10%	10%	---	10%	10%	

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS RATE PAGES

PERSONAL AUTO MANUAL

RULE 6.H. CLAIM FREE DISCOUNT

Bodily Injury Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	2%	4%	5%	6%	7%	8%
24	0%	0%	6%	7%	8%	9%	12%	14%	17%
36	0%	6%	8%	10%	11%	13%	18%	22%	24%
48	0%	7%	13%	14%	16%	20%	23%	27%	32%
60	0%	9%	15%	18%	20%	23%	27%	31%	37%
72	0%	11%	18%	21%	23%	27%	31%	36%	43%
84	0%	13%	21%	24%	26%	30%	35%	41%	48%
96	0%	15%	23%	26%	28%	32%	37%	44%	52%
108	0%	17%	25%	28%	30%	34%	40%	47%	55%
120	2%	19%	27%	30%	31%	35%	41%	50%	59%
132	2%	21%	30%	33%	34%	38%	44%	51%	61%
>=144	2%	23%	32%	35%	37%	41%	46%	54%	64%

Property Damage Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	2%	4%	5%	6%	7%	8%
24	0%	0%	6%	7%	8%	9%	12%	14%	17%
36	0%	6%	8%	10%	11%	13%	18%	22%	24%
48	0%	7%	11%	12%	14%	16%	19%	23%	28%
60	0%	9%	13%	15%	17%	19%	22%	27%	32%
72	0%	11%	16%	17%	19%	21%	26%	31%	37%
84	0%	12%	18%	20%	22%	24%	29%	34%	42%
96	0%	15%	19%	21%	23%	25%	31%	37%	45%
108	0%	17%	22%	24%	26%	28%	33%	40%	48%
120	2%	19%	24%	26%	28%	30%	35%	42%	51%
132	2%	21%	26%	28%	30%	31%	36%	43%	52%
>=144	2%	22%	28%	30%	31%	33%	38%	46%	56%

Medical Payments Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	2%	4%	5%	6%	7%	8%
24	0%	0%	6%	7%	8%	9%	12%	14%	17%
36	0%	6%	8%	10%	11%	13%	18%	22%	24%
48	0%	6%	11%	12%	15%	19%	21%	24%	28%
60	0%	8%	13%	15%	18%	22%	25%	28%	32%
72	0%	10%	16%	17%	21%	25%	28%	32%	37%
84	0%	11%	18%	20%	24%	29%	32%	36%	42%
96	0%	13%	19%	22%	26%	31%	34%	39%	45%
108	0%	15%	21%	24%	28%	33%	37%	41%	48%
120	2%	17%	23%	25%	29%	34%	38%	44%	51%
132	2%	19%	25%	27%	31%	35%	39%	45%	53%
>=144	2%	20%	27%	30%	34%	38%	42%	48%	56%



THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS RATE PAGES

PERSONAL AUTO MANUAL

RULE 6.H. CLAIM FREE DISCOUNT

Uninsured Motorists Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	2%	4%	5%	6%	7%	8%
24	0%	0%	6%	7%	8%	9%	12%	14%	17%
36	0%	6%	8%	10%	11%	13%	18%	22%	24%
48	0%	6%	11%	12%	16%	21%	23%	26%	30%
60	0%	9%	13%	15%	19%	24%	27%	30%	35%
72	0%	11%	16%	17%	22%	28%	31%	35%	40%
84	0%	12%	18%	20%	24%	31%	35%	39%	45%
96	0%	14%	19%	21%	27%	33%	37%	42%	48%
108	0%	16%	22%	24%	29%	36%	40%	45%	52%
120	2%	18%	23%	25%	31%	37%	42%	48%	55%
132	2%	20%	26%	28%	33%	39%	44%	49%	56%
>=144	2%	21%	28%	29%	35%	41%	46%	52%	60%

Comprehensive Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	7%	8%
24	0%	0%	6%	7%	9%	11%	13%	14%	16%
36	0%	6%	8%	10%	12%	16%	19%	21%	26%
48	0%	7%	11%	13%	17%	23%	26%	29%	33%
60	0%	9%	14%	16%	20%	27%	30%	34%	38%
72	0%	11%	17%	18%	24%	31%	35%	39%	44%
84	0%	12%	19%	21%	26%	34%	39%	43%	49%
96	0%	15%	20%	23%	29%	37%	42%	47%	53%
108	0%	17%	23%	25%	32%	40%	45%	50%	57%
120	2%	19%	25%	27%	33%	42%	47%	53%	60%
132	2%	21%	27%	29%	35%	43%	49%	55%	62%
>=144	2%	22%	29%	31%	38%	46%	52%	58%	65%

Collision Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	7%	8%
24	0%	0%	6%	7%	9%	11%	13%	14%	16%
36	0%	6%	8%	10%	12%	16%	19%	21%	26%
48	0%	7%	11%	13%	16%	20%	22%	25%	30%
60	0%	9%	14%	17%	20%	23%	26%	29%	34%
72	0%	11%	16%	19%	22%	25%	29%	34%	40%
84	0%	12%	19%	23%	25%	28%	33%	38%	45%
96	0%	15%	20%	25%	28%	31%	36%	41%	48%
108	0%	17%	22%	27%	30%	33%	38%	44%	51%
120	2%	19%	24%	29%	32%	35%	40%	46%	54%
132	2%	21%	26%	31%	34%	37%	42%	48%	56%
>=144	2%	22%	28%	34%	36%	39%	44%	51%	59%

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RULE 6.K. RATE LEVEL TIER FACTORS

Refer to the Underwriting Guidelines for assignment to the appropriate rate level tier. Apply rate level tier factor to the applicable coverages as listed below:

Tier	Bodily Injury Factor*	Property Damage Factor	Medical Payments Factor	Uninsured Motorists Factor**	Comprehensive Factor	Collision Factor
0	0.85	0.84	0.86	0.85	0.84	0.84
1	1.08	1.06	1.06	1.06	1.06	1.06
2	1.23	1.14	1.16	1.15	1.16	1.15
3	1.29	1.17	1.20	1.18	1.20	1.24
4	1.32	1.20	1.27	1.28	1.32	1.29
5	1.40	1.23	1.36	1.42	1.52	1.35
6	1.55	1.33	1.46	1.55	1.71	1.47
7	1.82	1.52	1.62	1.74	1.95	1.67
8	2.32	1.85	1.90	2.06	2.38	2.03

* Also applies to Combined Single Limits

** Also applies to Uninsured Motorists Property Damage and Underinsured Motorists Bodily Injury

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ARKANSAS

PERSONAL AUTOMOBILE MANUAL

RULE 11. MISCELLANEOUS COVERAGES

SECTION A. MISCELLANEOUS COVERAGES

Section 1. Uninsured Motorists

Single Limit Bodily Injury Only Increased
Limits Factors

Limit	Single	Multi-Car
\$50,000	1.00	1.00
75,000	1.33	1.35
100,000	1.38	1.41
200,000	1.67	1.65
300,000	1.86	1.82
500,000	2.10	2.12

Single Limit Bodily Injury & Property
Damage Increased Limits Factors

Limit	Single	Multi-Car
\$75,000	1.00	1.00
100,000	1.06	1.04
200,000	1.23	1.22
300,000	1.40	1.39
500,000	1.54	1.54

Split Limit Bodily Injury Increased Limits
Factors

Limit	Single	Multi-Car
\$25/50	1.00	1.00
50/100	1.50	1.50
100/200	1.83	1.86
100/300	2.00	2.00
250/500	2.22	2.29
300/300	2.28	2.36
500/500	2.60	2.70
500/1000	2.89	3.00
1000/1000	3.00	3.07

Property Damage Increased Limits
Factors

Limit	Single	Multi-Car
\$25,000	1.00	1.00
50,000	1.17	1.17
100,000	1.83	1.50
200,000	2.00	1.83

Section 2. Underinsured Motorists

Single Limit Bodily Injury Only Increased
Limits Factors

Limit	Single	Multi-Car
\$50,000	1.00	1.00
75,000	1.22	1.29
100,000	1.78	1.86
200,000	3.44	3.57
300,000	4.22	4.29
500,000	6.00	6.14

Split Limit Bodily Injury Increased Limits
Factors

Limit	Single	Multi-Car
\$25/50	1.00	1.00
50/100	1.75	1.57
100/200	3.38	3.14
100/300	3.88	3.71
250/500	5.13	4.71
300/300	5.50	5.14
500/500	6.57	6.02
500/1000	7.88	7.29
1000/1000	9.50	8.86

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ARKANSAS RATE PAGES

PERSONAL AUTO MANUAL

RULE 11. MISCELLANEOUS COVERAGES

SECTION A. MISCELLANEOUS COVERAGES

Section 4. Increased Transportation Expenses Coverage

Limit	Annual Rate Per Auto
\$50/1,500	\$6
\$100/3,000	\$11
\$150/5,000	\$15

Section 5. Towing and Labor Costs

Limit	Annual Rate Per Auto
\$25	\$4
\$50	\$6
\$75	\$8

Section 6. Limited Mexico Coverage

\$6 per policy annually.

Section 8. Agreed Value Coverage

Vehicle Cost New Symbol	Comprehensive	Collision
1-13	\$13	\$13
14-26	\$30	\$30
27 or greater	\$50	\$50

If the agreed value is more than the market value, add \$5 for every \$1,000 for comprehensive and \$5 for every \$1,000 for collision or fraction of difference.

Section 9. Arkansas Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit

B.2. Work Loss Coverage

\$5 per car, per year

B.3. Accidental Death Benefit

\$5,000 \$3 per car, per year

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

ARKANSAS RATE PAGES

PERSONAL AUTO MANUAL

RULE 11. MISCELLANEOUS COVERAGES

SECTION C. EXTENDED NON-OWNED LIABILITY COVERAGE

Person Named	Annual Rate		
	Bodily Injury	Property Damage	Single Limit
Insured Named or Spouse	\$4	\$1	\$6
Relative	\$8	\$2	\$12

Medical Payments Limit of Policy To Which Attached	Auto Furnished For Regular Use	Auto Not Furnished For Regular Use
\$500	\$4	\$2
\$1,000	\$5	\$3
\$2,000	\$6	\$4
\$5,000	\$9	\$7
\$10,000	\$17	\$15

SECTION D. AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT COVERAGE

Total Cost New of Equipment and Accessories	Premium
\$ 0 - 500	\$30
501 - 1,000	\$60
1,001 - 1,500	\$90
1,501 - 2,000	\$120
2,001 - 2,500	\$150
2,501 - 3,000	\$180
3,001 - 3,500	\$210
3,501 - 4,000	\$240
4,001 - 4,500	\$270
4,501 - 5,000	\$300
5,001 and over	\$330

SECTION E. TAPES, RECORDS, DISCS AND OTHER MEDIA COVERAGE

\$16 per auto

SECTION F. CUSTOMIZING EQUIPMENT COVERAGE

Customized Equipment

	Rate per \$100
Comprehensive	0.017
Collision	0.010

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

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RULE 12. NON-PREMIUM POLICY CHARGES

Section B. Miscellaneous Fees

¹ Any insured who pays their policy premium through a cash/check installment plan or through a recurring credit card payment plan is subject to the following Installment Billing Fee on each payment subsequent to the initial down payment.

Cash/Check payments	\$5.00 per installment
Recurring credit card payments	\$3.00 per installment

² Other Fees are listed below:

	<u>Charge</u>
Bounced Check (Non sufficient funds)	\$25.00
Reinstatement Fee	\$15.00
Cancellation Fee	\$5.00

³ Listed below are the available payment options:

Full Pay
50-50%
Monthly Direct Bill

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

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RULE 13. MISCELLANEOUS TYPES

Motor Home and Recreational Trailers

Coverage	Motor Home Factor	Rec Trailer Factor
Liability	50%	N/A
Comprehensive	120%	120%
Collision	60%	60%

Exception:

For 1989 and Prior Model Year motor homes with stated value of \$65,001 and over, increase the Symbol 20 base rate as follows in excess of \$65,000:

	Factor for each \$1000
Comprehensive	0.017
Collision	0.014

All Other Trailers

Coverage	Rate Per \$100
Comprehensive - \$100 Deductible	\$ 1.00
Comprehensive - \$200 Deductible	\$ 0.85
Collision - \$200 Deductible	\$ 0.80
Collision - \$300 Deductible	\$ 0.72

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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ARKANSAS EXCEPTION PAGES**

1. DEFINITIONS

The following replaces Section G.1 of this Rule:

1. Liability Coverages

Territory Base Rate x Increased Limits Factor for each of the following coverages:
Single Limit Liability or Bodily Injury and Property Damage Liability, Medical
Payments.

3. PREMIUM DETERMINATION

The introductory paragraph of this rule is replaced by the following:

Single Limit Liability or Bodily Injury and Property Damage Liability, Medical
Payments, Uninsured and Underinsured Motorists, Comprehensive and Collision
premiums are determined as follows:

Section 3.F.1 is replaced by the following:

1. Model Year and Symbol Determination

For the Physical Damage coverages refer to the ISO Symbol Assignment.

Section G:

Does not apply.

4. CLASSIFICATIONS

Section 4.A.1.b is replaced by the following:

b. Determine the Primary Classification factors from the State Class Plan Pages.

Section 4.A.2.c is replaced by the following:

Determine the appropriate Secondary Class Plan Factor from the Secondary Class Plan
Pages based on the accident and conviction points and number of vehicles on the policy.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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4. CLASSIFICATIONS (Continued)

Section 4.B.4.a.(2) is replaced by the following:

- (2) A full time high school student, college or university student, or a college or university graduate.

5. SAFE DRIVER INSURANCE PLAN (SDIP)

Section A.1.b.1.c is replaced by the following:

(c) Accident Threshold

For damage for any property including the insured's own, the threshold in the state of Arkansas is \$500 for a paid loss or amount held as a loss reserve.

Section A.1.b.2. Exception (2)(b) is replaced with the following:

- (b) Applicant, owner or other resident operator involved in an accident is (a) determined to be 50% or less negligent, or (b) reimbursed for 50% or more of his or her damages by or on behalf of persons involved in the accident.

6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS

The following paragraph is added to Section C.

The insured must provide the company with evidence of factory installation of an Anti-Lock Braking System prior to granting a discount.

The following is added to Section F of this Rule:

F. Motor Vehicle Accident Prevention Course Discount

- a. The Motor Vehicle Accident Prevention Course Discount applies to the premiums for Single Limit Liability, or Bodily Injury and Property Damage Liability, Medical Payments, Comprehensive and Collision coverages.

Exception:

This discount does not apply to vehicles classified and rated under the Miscellaneous Types Rule unless otherwise specified.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS (Continued)

- b. Private Passenger Autos principally operated by an adult operator (including autos classified under Youthful NON-PRINCIPAL Operator classifications) shall be subject to a discount provided the adult principal operator of the auto:
 - (1) is age 55 or older, and
 - (2) has a completion certificate, dated within the last 36 months, certifying that the principal operator has successfully completed an approved Motor Vehicle Accident Prevention Course.

- c. The Motor Vehicle Accident Prevention Course Discount shall be applied in accordance with the following:
 - (1) Only to the auto principally operator by the operator with the course completion certificate.
 - (2) Only once to each such auto regardless of the number of operators with course completion certificates.

- d. An approved Motor Vehicle Accident Prevention Course shall:
 - (1) Be approved by the Arkansas Department of Motor Vehicles, and
 - (2) Be taught by an approved instructor, and
 - (3) Include the minimum hours of classroom and field driving instruction prescribed by the Arkansas Department of Motor Vehicles, and
 - (4) Shall not be self-instructed.

- e. Refer to the State Rate Pages for the discount amount.

Section H.2.a is replaced by the following:

- a. Policies inforce for less than twelve months with the Company do not yet qualify for this discount.

Rule 6.I, Bill Plan Discount does not apply.

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11. MISCELLANEOUS COVERAGES

The following is added to Section A.1 of this Rule:

1. Uninsured Motorists Coverage

- a. Owners –

BODILY INJURY

This form of auto insurance must be offered at limits not less than the financial responsibility limits under every auto liability policy issued or delivered to the owner of a motor vehicle registered or principally garaged in Arkansas. Attach applicable endorsement.

Exceptions

- (1) The named insured has the right to reject such coverage in writing.
- (2) After a named insured rejects such coverage, the insurer shall not be required to notify any insured in any renewal, reinstatement, substitute, amended or replacement policy as to the availability of such coverage.
- (3) The written agreement to reject such coverage shall continue until the rejection is withdrawn in writing by the named insured.

Increased Limits

If a named insured or applicant purchases liability limits greater than the financial responsibility limits, increased limits of Uninsured Motorists Coverage must be offered in amounts up to the liability limits on the policy.

NOTE:

- a. For new policies an insured or applicant who does not want to purchase increased limits shall reject such increased limit in writing on the application for insurance coverages.
- b. If a renewal policy has Uninsured Motorists Coverage at limits less than the liability limits provided on the policy, increased limits shall not be afforded unless a named insured requests such coverage in writing.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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11. MISCELLANEOUS COVERAGES (continued)

PROPERTY DAMAGE

If Bodily Injury Uninsured Motorists Coverage is purchased, the named insured must be offered Property Damage Uninsured Motorists Coverage, subject to a \$200 deductible.

Exceptions

- (1) Property Damage Uninsured Motorists limits shall be made available up to the policy's property damage liability limits.
- (2) The named insured has the right to reject Property Damage Uninsured Motorists Coverage in writing.
- (3) Subsequent continuation, renewal, or reinstatement policies thereunder, issued by the same insurer need not provide the rejected coverage unless the named insured requests such coverage in writing. However, if the insured substitutes or adds a vehicle under the policy, a new written rejection of Property Damage Uninsured Motorists Coverage is required.
- (4) Whenever a new application is submitted in connection with any renewal, reinstatement or replacement policy, the provisions of this rule shall apply in the same manner as if a new policy is being issued.

1. Basic Limits

The rates for basic limits of the following options of Uninsured Motorists Coverage are displayed on the State Rate Pages.

Uninsured Motorists Coverage options:

- \$50,000 Bodily Injury ONLY
- \$75,000 Bodily Injury and Property Damage*
- \$25,000/50,000 Bodily Injury
- \$25,000 Property Damage*

*Property Damage Uninsured Motorists Coverage is subject to a \$200 Deductible.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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11. MISCELLANEOUS COVERAGES (continued)

2. Increased Limits

For higher limits of Single Limit Uninsured Motorists Coverage multiply the appropriate Uninsured Motorists factor on the State Rate Pages by the appropriate base rate (\$50,000 Bodily Injury Only or \$75,000 Bodily Injury and Property Damage) depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

For higher limits of Split Limit Uninsured Motorists Coverage multiply the appropriate Uninsured Motorists factor on the State Rate Pages by the appropriate base rate (\$25,000/50,000 Bodily Injury and \$25,000 Property Damage) depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

The following is added to Section A.2 of this Rule:

1. Underinsured Motorists Coverage

Eligibility

- a. This form of auto insurance shall be offered in limits at least equal to the Financial Responsibility law limits under every automobile liability insurance policy covering liability arising out of the ownership, maintenance or use of any motor vehicle in Arkansas.

Exceptions

- (1) If the named insured does not elect Underinsured Motorists Coverage, the coverage must be rejected in writing.
- (2) This coverage shall not be provided and must be rejected in writing if the named insured has rejected Bodily Injury Uninsured Motorists Coverage.
- (3) Subsequent renewal or reinstatement policies issued need not provide the rejected coverage unless the named insured requests such coverage. However, if the insured substitutes or adds a vehicle under the policy, a new written rejection of Underinsured Motorists Coverage is required.

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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11. MISCELLANEOUS COVERAGES (continued)

b. Increased Limits – Increased limits of Underinsured Motorists coverage shall be offered if the insured purchases increased limits of Uninsured Motorists Coverage:

- (1) Increased Limits Uninsured Motorists Coverage must be afforded
- (2) Increased Limits Uninsured and Underinsured Motorists Insurance must be afforded at the same limits,
- (3) Underinsured Motorists coverage must apply to all vehicles insured under the policy.

c. Rates

Rates for \$25,000/50,000 Bodily Injury Liability Underinsured Motorists Coverage and \$50,000 Single Limit Liability Bodily Injury Only are shown on the State Rate Pages, depending on whether the risk is a single car or multi-car policy.

For higher limits of Underinsured Motorists Coverage multiply the appropriate Underinsured Motorists factor on the State Rate Pages by the appropriate base rate depending on whether the policy is Single or Multi-Car. The rates for the multi-car risks are on a per-car basis. Apply these factors to each car.

Section A.7 of this Rule is replaced by Section A.9.

Section A.8 of this Rule does not apply.

The following are added to Section A of this Rule.

9. Arkansas Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit

A. Eligibility

Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit must be afforded for every auto registered or principally garaged in Arkansas.

If one or more of these coverages are afforded, attach the applicable endorsement to the policy.

11. MISCELLANEOUS COVERAGES (continued)

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
PERSONAL AUTO MANUAL
ARKANSAS EXCEPTION PAGES**

Exception:

- (1) The named insured has the right to reject one or more of such coverages in writing and must reject the Statutory Limit of Medical Payments in writing if lower or higher limits are requested.
- (2) Subsequent renewal policies issued by the same insurer need not provide the rejected coverage(s) or limit unless the named insured requested such coverage(s) or limit in writing.

B. Coverages and Rates

1. Medical Payments

a. Limits: Statutory Limit per person - \$5,000.

(1) Lower or higher limits are permitted only when the named insured has rejected the Statutory Limit.

(2) A maximum limit of \$5,000 applies to pedestrians who are other than the named insured or a relative.

(3) Basic and Increased limits of Personal Auto Medical Payments Coverage may be purchased only when the named insured has rejected Arkansas Medical Payments Coverage.

b. Rates:

(1) Use the base rates for Medical Payments Insurance.

(2) The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do apply for this coverage.

2. Work Loss Coverage

a. Limits Maximum per person –

(1) For an Income Earner - \$140 per week for 52 weeks.

(2) For a Non-Income Earner - \$70 per week for 52 weeks.

11. MISCELLANEOUS COVERAGES (continued)

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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b. Rates:

See Rate Pages for applicable Rates.

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

3. Accidental Death Benefit

a. Limits: Maximum per person – \$5,000

b. Rates:

See Rate Pages for applicable Rates.

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

Section B of this Rule is deleted.

The following are added to this Rule:

D. Audio, Visual and Data Electronic Equipment Coverage

1. Coverage

Coverage is available for loss to any electronic equipment not specifically designed solely for the reproduction of sound that receives or transmits audio, visual or data signals, and any accessories used with such equipment, if at the time of loss the equipment or accessories are contained in a vehicle described in the policy for which this coverage is provided.

This coverage applies only if:

- a. The equipment at the time of loss is:
1. Permanently installed in the vehicle; or
 2. Designed to be solely operated by use of the power from the vehicle's electrical system and the equipment is removable from a housing unit which is permanently installed in the vehicle; and

11. MISCELLANEOUS COVERAGES (Continued)

**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
PERSONAL AUTO MANUAL
ARKANSAS EXCEPTION PAGES**

- b. The equipment is not necessary for the normal operation of the auto or monitoring of the auto's operating systems.

Types of electronic equipment not specifically designed solely for the reproduction of sound for which coverage may be purchased include, but are not limited to:

- (1) Citizens Band Radios;
- (2) Telephones;
- (3) Two-Way Mobile Radios;
- (4) Scanning Monitor Receivers;
- (5) Television Monitor Receivers;
- (6) Video Cassette Recorders;
- (7) Audio Cassette Recorders; and
- (8) Personal Computers.

Note

- a. When Collision or Comprehensive is purchased, corresponding coverage is automatically provided without additional premium charge for permanently installed telephones designed to be operated by use of the vehicle's electrical system and any accessories used with the telephone.
- b. Coverage is not available for radar or laser detectors.

2. Rating

The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

Develop the premium independently for each covered auto as follows:

- a. Determine the limit of liability based upon the total cost new of the electronic equipment permanently installed in that auto and the cost new of its accessories. Do not include the cost of tapes, records, discs, and other media in determining this limit.
- b. Coverage is available at the limits and premiums shown in the State Rate Pages.

3. Endorsement

Attach the Coverage for Excess Sound Reproducing Equipment, Audio, Visual and Electronic Equipment and Tapes, Records, Discs, and Other Media Endorsement to the policy.

11. MISCELLANEOUS COVERAGES (Continued)
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NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
PERSONAL AUTO MANUAL
ARKANSAS EXCEPTION PAGES

E. Tapes, Records, Discs and Other Media Coverage

1. Additional coverage for \$200 worth of tapes, records, discs and other media applies at no additional charge when coverage is provided for audio, visual and data electronic equipment:
2. Tapes, Records, Discs, and Other Media only when coverage is *not* provided for audio, visual and data electronic equipment;

Coverage for \$200 worth of tapes, records, discs and other media is available for an additional charge per auto as outlined the State Rate Pages. The provisions of Rule 4. Classifications, Rule 5. Safe Driver Insurance Plan and Rule 6. Discounts and Miscellaneous Rating Factors do not apply for this coverage.

3. Endorsement

Attach the Coverage for Excess Sound Reproducing Equipment, Audio, Visual and Electronic Equipment and Tapes, Records, Discs, and Other Media Endorsement to the policy.

F. Customizing Equipment Coverage

Comprehensive and Collision coverage for customizing equipment may be purchased on a stated amount basis for any panel truck, pickup or van insured for physical damage coverage. Refer to the Customizing Equipment Coverage (Stated Amount Insurance) Endorsement for extent of coverage.

1. The cost of customized equipment should not be considered when determining the symbol of the vehicle.
2. The customizing charge determined in this rule is the only charge for customized equipment on a vehicle.
3. The charge for customizing is made only when the Customizing Equipment Coverage (Stated Amount Insurance) Endorsement is attached.

Rate as follows:

1. Refer to State Rate Pages, use the territory and any physical damage deductible applicable to the vehicle.

11. MISCELLANEOUS COVERAGES (Continued)
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**NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
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2. Multiply the Symbol 2 rate for the current model year by the factor outlined in the State Rate Pages to obtain the stated amount rate per \$100 of customizing.

NOTE: Prior to October 1, 1989 apply the above factors to the Symbol 7 rate for the current model year.

3. Multiply the stated amount rate for customizing by the desired limit of coverage to obtain the state amount customizing Base Rate.
4. Multiply the customizing Base Rate by the vehicles classification rating factor to determine the premium for stated amount Comprehensive and Collision customizing coverage.

NOTES:

- a. The Customizing Equipment Coverage (Stated Amount Insurance) Endorsement shall be attached.
- b. If Comprehensive or Collision coverage for customizing is purchased, the vehicle must have the corresponding Comprehensive or Collision coverage.
- c. The customizing deductibles shall be the same as the vehicle deductibles.

12. NON-PREMIUM POLICY CHARGES

Section A. of this Rule does not apply.

Effective: New Business: 01/28/08
Renewal: 03/28/08

**PRIVATE PASSENGER AUTOMOBILE MANUAL
COMPANY: NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
AUTOMOBILE BASE RATES FOR THE STATE OF ARKANSAS CODE 03**

Coverage	TERRITORIES																
	1	3	105	205	106	206	8	9	110	210	111	211	411	511	711	811	911
\$25/50 Bodily Injury	255	204	211	206	244	272	246	203	209	207	228	206	250	236	203	178	191
\$25,000 Property Damage	226	181	189	183	217	241	218	180	185	183	203	182	218	209	180	158	167
\$75,000 Single Limit Liability	535	429	446	433	514	572	517	427	439	435	480	432	522	496	427	374	399
\$5,000 Medical Payments	92	90	98	96	96	132	129	93	91	90	108	96	97	110	93	88	108
\$100 Deductible Model Year 2004, Symbol 2 Comprehensive	59	61	97	98	67	81	65	94	57	58	117	97	89	115	94	78	100
\$200 Deductible Model Year 2004, Symbol 2 Collision	237	228	261	246	233	262	266	243	225	227	271	246	252	272	242	241	249

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PRIVATE PASSENGER AUTOMOBILE MANUAL
COMPANY: NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
AUTOMOBILE BASE RATES FOR THE STATE OF ARKANSAS CODE 03

Coverage	TERRITORIES																
	1	3	105	205	106	206	8	9	110	210	111	211	411	511	711	811	911
\$25/50 Uninsured Motorists Bodily Injury Single Car	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24
\$25/50 Uninsured Motorists Bodily Injury Multi-Car (per car)	19	19	19	19	19	19	19	19	19	19	19	19	19	19	19	19	19
\$25,000 Uninsured Motorists Property Damage Single Car	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
\$25,000 Uninsured Motorists Property Damage Multi-Car (per car)	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
\$50,000 Single Limit Uninsured Motorists Bodily Injury Only Single Car	29	29	29	29	29	29	29	29	29	29	29	29	29	29	29	29	29
\$50,000 Single Limit Uninsured Motorists Bodily Injury Only Multi-Car (per car)	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
\$75,000 Single Limit Uninsured Motorists BI and PD Single Car	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34
\$75,000 Single Limit Uninsured Motorists BI and PD Multi-Car (per car)	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27
\$25/50 Underinsured Motorists Bodily Injury Single Car	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15	15
\$25/50 Underinsured Motorists Bodily Injury Multi-Car (per car)	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14
\$50,000 Single Limit Underinsured Motorists Bodily Injury Only Single Car	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
\$50,000 Single Limit Underinsured Motorists Bodily Injury Only Multi-Car (per car)	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

ARKANSAS

PERSONAL AUTOMOBILE MANUAL

INCREASED LIMITS

BODILY INJURY

Limit	Factor
\$ 25/50	1.00
50/100	1.19
100/200	1.33
100/300	1.38
250/500	1.46
300/300	1.49
500/500	1.56
500/1000	1.63
1000/1000	1.74

SINGLE LIMIT LIABILITY

Limit	Factor
\$75,000	1.00
100,000	1.04
200,000	1.16
300,000	1.22
500,000	1.28

PROPERTY DAMAGE

Limit	Factor
\$25,000	1.00
50,000	1.05
100,000	1.09
150,000	1.14
200,000	1.16

MEDICAL PAYMENTS

Limit	Factor
\$500	0.63
1,000	0.69
2,000	0.75
5,000	1.00
10,000	1.25
25,000	2.31
50,000	3.25
75,000	4.00
100,000	4.31

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

ARKANSAS RATE PAGES

PERSONAL AUTOMOBILE MANUAL

RULE 11.A.3. DEDUCTIBLE INSURANCE

a. COMPREHENSIVE

For Comprehensive Deductibles for which no premium is shown on the State Base Rate Pages, charge the following percentage of the \$100 Deductible Comprehensive Premium:

Deductible	1990 and Subsequent			1989 & Prior		
	ISO Symbol			ISO Symbol		
	1-4	5-13	>13	1-8	10-13	>13
Full Coverage	135%	135%	135%	135%	135%	135%
\$50	105%	105%	105%	110%	107%	105%
\$100	100%	100%	100%	100%	100%	100%
\$200	87%	88%	92%	86%	88%	94%
\$250	84%	85%	89%	82%	84%	90%
\$300	78%	80%	85%	77%	79%	85%
\$400	72%	74%	80%	71%	73%	80%
\$500	68%	69%	77%	66%	68%	75%
\$1,000	50%	52%	66%	48%	50%	62%

b. COLLISION

For Collision Deductibles for which no premium is shown on the State Base Rate Pages, charge the following percentage of the \$200 Deductible Collision Premium:

Deductible	1990 and Subsequent			1989 & Prior		
	ISO Symbol			ISO Symbol		
	1-4	5-13	>13	1-8	10-13	>13
\$50	150%	150%	150%	150%	150%	150%
\$100	115%	115%	115%	115%	115%	115%
\$200	100%	100%	100%	100%	100%	100%
\$250	98%	98%	98%	98%	98%	98%
\$300	95%	96%	97%	94%	94%	96%
\$400	91%	92%	93%	88%	89%	92%
\$500	85%	86%	87%	82%	84%	89%
\$1,000	56%	60%	65%	56%	60%	65%

c. Percentage of Loss Deductibles For Comprehensive and Collision Coverages

This Coverage is available at:

- (1.) Comprehensive
25% Deductible subject to a \$100 minimum, \$500 maximum. Charge 90% of the \$100 Deductible rate.
- (2.) Collision
25% Deductible subject to a \$200 minimum, \$500 maximum. Charge 90% of the \$200 Deductible rate.

ARKANSAS - NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA
 MODEL YEAR - SYMBOL BASE - 2004-2

COMPREHENSIVE
 SYMBOL

MODEL YEAR	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	
2008	0.92	1.12	1.36	1.53	1.68	1.83	1.97	2.06	2.25	2.46	2.71	2.95	3.21	3.55	3.86	4.18	4.46	4.94	5.60	6.36	7.00	7.71	8.76	10.25	11.82	+	+	
2007	0.89	1.09	1.32	1.49	1.64	1.78	1.92	2.01	2.19	2.40	2.64	2.87	3.13	3.46	3.76	4.07	4.34	4.81	5.45	6.16	6.81	7.50	8.52	9.97	11.50	+	+	
2006	0.87	1.06	1.28	1.45	1.59	1.73	1.87	1.95	2.13	2.33	2.57	2.79	3.04	3.36	3.66	3.95	4.22	4.67	5.30	5.99	6.63	7.00	8.29	9.70	11.18	+	+	
2005	0.84	1.03	1.25	1.41	1.55	1.68	1.81	1.90	2.07	2.27	2.49	2.71	2.96	3.27	3.55	3.84	4.10	4.54	5.15	5.82	6.44	7.09	8.03	9.42	10.87	+	+	
2004	0.82	1.00	1.21	1.37	1.50	1.63	1.76	1.84	2.01	2.20	2.42	2.63	2.87	3.17	3.45	3.73	3.98	4.41	5.00	5.65	6.25	6.88	7.82	9.15	10.55	+	+	
2003	0.80	0.97	1.17	1.33	1.46	1.58	1.71	1.78	1.95	2.13	2.35	2.55	2.78	3.07	3.35	3.62	3.86	4.28	4.85	5.48	6.06	6.67	7.59	8.88	10.23	+	+	
2002	0.77	0.94	1.14	1.29	1.41	1.53	1.65	1.73	1.89	2.07	2.27	2.47	2.70	2.98	3.24	3.51	3.74	4.15	4.70	5.31	5.88	6.47	7.35	8.60	9.92	+	+	
2001	0.75	0.91	1.10	1.25	1.37	1.48	1.60	1.67	1.83	2.00	2.20	2.39	2.61	2.88	3.14	3.39	3.62	4.01	4.55	5.14	5.69	6.26	7.12	8.33	9.60	+	+	
2000	0.72	0.88	1.06	1.21	1.32	1.43	1.55	1.62	1.77	1.94	2.13	2.31	2.53	2.79	3.04	3.28	3.50	3.88	4.40	4.97	5.50	6.05	6.88	8.05	9.28	+	+	
1999	0.68	0.83	1.00	1.14	1.25	1.35	1.46	1.53	1.67	1.83	2.01	2.18	2.38	2.63	2.86	3.10	3.30	3.66	4.15	4.69	5.19	5.71	6.49	7.59	8.76	+	+	
1998	0.66	0.80	0.97	1.10	1.20	1.30	1.41	1.47	1.61	1.76	1.94	2.10	2.30	2.54	2.76	2.98	3.18	3.53	4.00	4.52	5.00	5.50	6.26	7.32	8.44	+	+	
1997	0.63	0.77	0.93	1.05	1.16	1.26	1.36	1.42	1.55	1.69	1.86	2.02	2.21	2.44	2.66	2.87	3.06	3.40	3.85	4.35	4.81	5.30	6.02	7.05	8.12	+	+	
1996	0.60	0.73	0.88	1.00	1.10	1.19	1.28	1.34	1.47	1.61	1.77	1.92	2.10	2.31	2.52	2.72	2.91	3.22	3.65	4.14	4.56	5.02	5.71	6.68	7.70	+	+	
1995	0.58	0.71	0.86	0.97	1.07	1.16	1.25	1.31	1.43	1.56	1.72	1.87	2.04	2.25	2.45	2.65	2.83	3.13	3.55	4.01	4.44	4.88	5.55	6.50	7.49	+	+	
1994	0.56	0.68	0.82	0.93	1.02	1.11	1.20	1.25	1.37	1.50	1.65	1.79	1.95	2.16	2.35	2.54	2.71	3.00	3.40	3.84	4.25	4.68	5.32	6.22	7.17	+	+	
1993	0.53	0.65	0.79	0.89	0.98	1.06	1.14	1.20	1.31	1.43	1.57	1.71	1.87	2.06	2.24	2.42	2.69	2.87	3.25	3.67	4.06	4.47	5.08	5.95	6.86	+	+	
1992	0.50	0.61	0.74	0.84	0.92	0.99	1.07	1.12	1.23	1.34	1.48	1.60	1.75	1.93	2.10	2.28	2.43	2.89	3.05	3.45	3.81	4.20	4.77	5.58	6.44	+	+	
1991	0.47	0.57	0.69	0.78	0.86	0.93	1.00	1.05	1.15	1.25	1.38	1.50	1.64	1.81	1.97	2.13	2.27	2.51	2.85	3.22	3.56	3.92	4.46	5.22	6.01	+	+	
1990	0.47	0.57	0.69	0.78	0.86	0.93	1.00	1.05	1.15	1.25	1.38	1.50	1.64	1.81	1.97	2.13	2.27	2.51	2.85	3.22	3.56	3.92	4.46	5.22	6.01	+	+	
1989	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	6.03	6.03	6.03	6.03	6.03	+	+
thru 1981	0.24	0.24	0.24	0.24	0.30	0.43	0.57	0.73	0.94	1.10	1.31	1.58	1.89	2.27	2.65	3.06	3.56	4.13	4.82	6.03	6.03	6.03	6.03	6.03	6.03	6.03	+	+

+ Develop the Comprehensive Base Rates for Symbol 27 vehicles by:
 a. Increasing the factor for Symbol 26 by +1.50 for each 10,000 or fraction of 10,000 above 80,000 of Original Cost and
 b. applying this factor to the Symbol 2 Base Rate on the State Rate Page for the applicable Model Year.

1976 thru 1980
 1975 & PRIOR

COLLISION
 SYMBOL

MODEL YEAR	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	
2008	1.03	1.12	1.22	1.30	1.37	1.43	1.51	1.56	1.60	1.69	1.76	1.85	1.92	1.96	2.02	2.13	2.24	2.35	2.48	2.60	2.80	2.96	3.12	3.42	3.92	4.31	+	
2007	1.00	1.09	1.19	1.26	1.33	1.40	1.47	1.52	1.56	1.65	1.71	1.80	1.86	1.96	2.07	2.18	2.29	2.41	2.53	2.73	2.88	3.04	3.32	3.82	4.20	+	+	
2006	0.98	1.06	1.16	1.23	1.29	1.36	1.43	1.47	1.52	1.60	1.66	1.75	1.81	1.91	2.01	2.12	2.23	2.34	2.46	2.65	2.82	2.96	3.23	3.71	4.08	+	+	
2005	0.95	1.03	1.12	1.19	1.26	1.32	1.39	1.43	1.47	1.56	1.62	1.70	1.76	1.85	1.96	2.06	2.16	2.28	2.39	2.58	2.72	2.87	3.14	3.61	3.97	+	+	
2004	0.92	1.00	1.09	1.16	1.22	1.28	1.35	1.39	1.43	1.51	1.57	1.65	1.71	1.80	1.90	2.00	2.10	2.21	2.32	2.50	2.64	2.79	3.05	3.50	3.85	+	+	
2003	0.89	0.97	1.06	1.13	1.18	1.24	1.31	1.35	1.39	1.46	1.52	1.60	1.66	1.75	1.84	1.94	2.04	2.14	2.25	2.43	2.56	2.71	2.96	3.40	3.73	+	+	
2002	0.86	0.94	1.02	1.09	1.15	1.20	1.27	1.31	1.34	1.42	1.48	1.55	1.61	1.69	1.79	1.88	1.97	2.08	2.18	2.35	2.48	2.62	2.87	3.29	3.62	+	+	
2001	0.84	0.91	0.99	1.06	1.11	1.16	1.23	1.26	1.30	1.37	1.43	1.50	1.56	1.64	1.73	1.82	1.91	2.01	2.11	2.28	2.40	2.54	2.78	3.19	3.50	+	+	
2000	0.81	0.88	0.96	1.02	1.07	1.13	1.19	1.22	1.26	1.33	1.38	1.45	1.50	1.58	1.67	1.76	1.85	1.94	2.04	2.20	2.32	2.46	2.68	3.08	3.39	+	+	
1999	0.76	0.83	0.90	0.96	1.01	1.06	1.12	1.15	1.19	1.25	1.30	1.37	1.42	1.49	1.58	1.66	1.74	1.83	1.93	2.08	2.19	2.32	2.53	2.91	3.20	+	+	
1998	0.73	0.79	0.86	0.92	0.96	1.01	1.07	1.10	1.13	1.19	1.24	1.30	1.35	1.42	1.50	1.58	1.66	1.75	1.83	1.98	2.09	2.20	2.41	2.77	3.04	+	+	
1997	0.69	0.75	0.82	0.87	0.92	0.96	1.01	1.04	1.07	1.13	1.18	1.24	1.28	1.35	1.43	1.50	1.58	1.66	1.74	1.88	1.98	2.09	2.29	2.63	2.89	+	+	
1996	0.63	0.69	0.75	0.80	0.84	0.88	0.93	0.96	0.99	1.04	1.08	1.14	1.18	1.24	1.31	1.38	1.45	1.52	1.60	1.71	1.82	1.92	2.10	2.42	2.66	+	+	
1995	0.60	0.65	0.71	0.75	0.79	0.83	0.88	0.90	0.93	0.98	1.02	1.07	1.11	1.17	1.24	1.30	1.37	1.44	1.51	1.63	1.72	1.81	1.98	2.28	2.50	+	+	
1994	0.53	0.58	0.63	0.67	0.71	0.74	0.78	0.81	0.83	0.88	0.91	0.96	0.99	1.04	1.10	1.16	1.22	1.28	1.35	1.45	1.53	1.62	1.77	2.03	2.23	+	+	
1993	0.51	0.55	0.60	0.64	0.67	0.70	0.74	0.76	0.79	0.83	0.86	0.91	0.94	0.99	1.05	1.10	1.16	1.22	1.28	1.38	1.45	1.53	1.66	1.93	2.12	+	+	
1992	0.47	0.51	0.56	0.59	0.62	0.65	0.69	0.71	0.73	0.77	0.80	0.84	0.87	0.92	0.97	1.02	1.07	1.13	1.18	1.28	1.35	1.42	1.56	1.79	1.96	+	+	
1991	0.44	0.48	0.52	0.56	0.59	0.61	0.65	0.67	0.69	0.72	0.75	0.79	0.82	0.86	0.91	0.96	1.01	1.06	1.11	1.20	1.27	1.34	1.46	1.68	1.85	+	+	
1990	0.44	0.48	0.52	0.56	0.59	0.61	0.65	0.67	0.69	0.72	0.75	0.79	0.82	0.86	0.91	0.96	1.01	1.06	1.11	1.20	1.27	1.34	1.46	1.68	1.85	+	+	
1989	0.28	0.28	0.28	0.28	0.35	0.42	0.48	0.55	0.61	0.68	0.72	0.80	0.91	1.01	1.14	1.22	1.32	1.44	1.59	1.85	1.85	1.85	1.85	1.85	1.85	1.85	+	+
thru 1981	0.28	0.28	0.28	0.28	0.35	0.42	0.48	0.55	0.61	0.68	0.72	0.80	0.91	1.01	1.14	1.22	1.32	1.44	1.59	1.85	1.85	1.85	1.85	1.85	1.85	1.85	+	+

+ Develop the Collision Base Rates for Symbol 27 vehicles by:
 a. Increasing the factor for Symbol 26 by +0.50 for each 10,000 or fraction of 10,000 above 80,000 of Original Cost and
 b. applying this factor to the Symbol 2 Base Rate on the State Rate Page for the applicable Model Year.

1976 thru 1980
 1975 & PRIOR

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

ARKANSAS RATE PAGES

PERSONAL AUTOMOBILE MANUAL

RULE 6. DISCOUNTS AND MISCELLANEOUS RATING FACTORS

Section	Discount	Description	Bodily Injury	Property Damage	Single Limit Liability	Coverage			Comprehensive	Collision
						Medical Payments	Uninsured Motorists	Medical Payments		
A.	Anti-Theft Devices Discount	Alarm Only or Active Disabling Devices	---	---	---	---	---	---	5%	---
		Passive Disabling Devices	---	---	---	---	---	---	15%	---
B.	Passive Restraint Discount	Air Bags Both Sides	---	---	---	30%	---	---	---	---
		Air Bags Driver Side	---	---	---	20%	---	---	---	---
		Passive/Auto Seat Belts Both Sides	---	---	---	15%	---	---	---	---
		Passive/Auto Seat Belts Driver Side	---	---	---	10%	---	---	---	---
C.	Anti-Lock Brake Discount		5%	5%	5%	---	---	---	---	---
D.	Safe Boater/Safe Driver Discount		15%	15%	15%	15%	---	15%	15%	15%
E.	Aviation Policy Discount		2%	2%	2%	2%	---	2%	2%	2%
F.	Senior Operator Motor Vehicle Accident Prevention Course Discount		10%	10%	10%	10%	---	10%	10%	10%
G.	Homeowner Discount		10%	10%	10%	10%	---	10%	10%	10%

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

ARKANSAS RATE PAGES

PERSONAL AUTO MANUAL

RULE 6.H. CLAIM FREE DISCOUNT

Bodily Injury Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	5%	8%	14%	20%	25%	27%	30%	35%
60	0%	6%	10%	17%	24%	29%	31%	35%	41%
72	0%	8%	12%	20%	28%	34%	36%	40%	47%
84	0%	9%	14%	23%	31%	38%	40%	45%	53%
96	0%	10%	14%	25%	35%	41%	43%	49%	57%
108	0%	12%	16%	28%	37%	44%	46%	52%	61%
120	2%	13%	18%	30%	40%	46%	48%	55%	64%
132	2%	14%	19%	32%	42%	48%	50%	57%	67%
>=144	2%	16%	21%	34%	44%	50%	53%	60%	70%

Property Damage Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	4%	8%	11%	16%	21%	23%	26%	30%
60	0%	6%	10%	14%	19%	25%	27%	31%	35%
72	0%	7%	12%	16%	22%	28%	31%	35%	40%
84	0%	8%	14%	19%	24%	32%	34%	40%	45%
96	0%	10%	14%	20%	27%	34%	37%	43%	49%
108	0%	11%	16%	22%	29%	37%	40%	46%	52%
120	2%	12%	18%	24%	31%	39%	42%	48%	55%
132	2%	14%	19%	26%	33%	40%	43%	50%	57%
>=144	2%	15%	21%	28%	35%	42%	46%	53%	60%

Medical Payments Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	5%	8%	12%	16%	22%	25%	29%	32%
60	0%	7%	10%	15%	20%	25%	29%	34%	37%
72	0%	8%	12%	17%	23%	29%	34%	39%	42%
84	0%	9%	14%	20%	26%	33%	38%	44%	47%
96	0%	11%	14%	21%	28%	35%	41%	48%	51%
108	0%	12%	16%	23%	31%	38%	44%	51%	55%
120	2%	14%	18%	25%	32%	40%	46%	54%	58%
132	2%	15%	19%	27%	34%	41%	48%	56%	60%
>=144	2%	16%	21%	29%	36%	44%	51%	59%	63%

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RULE 6.H. CLAIM FREE DISCOUNT

Uninsured Motorists Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	5%	8%	12%	16%	22%	26%	31%	34%
60	0%	6%	10%	15%	20%	25%	30%	36%	39%
72	0%	8%	12%	17%	23%	29%	35%	41%	45%
84	0%	9%	14%	20%	26%	32%	39%	46%	50%
96	0%	10%	14%	21%	28%	35%	42%	50%	54%
108	0%	12%	16%	23%	31%	37%	45%	53%	58%
120	2%	13%	18%	25%	32%	39%	47%	56%	61%
132	2%	14%	19%	27%	34%	41%	49%	58%	64%
>=144	2%	16%	21%	29%	36%	43%	52%	62%	67%

Comprehensive Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	4%	8%	12%	16%	22%	27%	33%	36%
60	0%	6%	10%	15%	20%	25%	31%	38%	42%
72	0%	7%	12%	17%	23%	29%	36%	44%	49%
84	0%	8%	14%	20%	26%	33%	40%	49%	54%
96	0%	10%	14%	21%	28%	35%	44%	53%	59%
108	0%	11%	16%	23%	31%	38%	47%	57%	63%
120	2%	12%	18%	25%	32%	40%	49%	60%	66%
132	2%	14%	19%	27%	34%	41%	51%	62%	69%
>=144	2%	15%	21%	29%	36%	44%	54%	65%	73%

Collision Discounts

Months Continuously Inforce with AIG and Accident and Major Violation Free	Rate Level Tier								
	0	1	2	3	4	5	6	7	8
12	0%	0%	0%	3%	5%	6%	7%	8%	9%
24	0%	0%	4%	7%	9%	11%	13%	16%	18%
36	0%	4%	6%	10%	12%	16%	20%	24%	28%
48	0%	4%	8%	11%	16%	24%	26%	29%	33%
60	0%	6%	10%	14%	19%	28%	30%	34%	38%
72	0%	7%	12%	17%	22%	32%	35%	39%	44%
84	0%	8%	14%	19%	25%	36%	39%	44%	49%
96	0%	10%	14%	21%	28%	39%	42%	47%	53%
108	0%	11%	16%	23%	30%	41%	45%	51%	57%
120	2%	12%	18%	25%	32%	43%	47%	53%	60%
132	2%	14%	19%	27%	34%	45%	49%	55%	62%
>=144	2%	15%	21%	28%	36%	48%	52%	58%	66%

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RULE 6.K. RATE LEVEL TIER FACTORS

Refer to the Underwriting Guidelines for assignment to the appropriate rate level tier. Apply rate level tier factor to the applicable coverages as listed below:

Tier	Bodily Injury Factor*	Property Damage Factor	Medical Payments Factor	Uninsured Motorists Factor**	Comprehensive Factor	Collision Factor
0	0.81	0.80	0.82	0.81	0.80	0.79
1	0.94	0.93	0.95	0.94	0.93	0.93
2	1.00	1.00	1.00	1.00	1.00	1.00
3	1.21	1.10	1.12	1.12	1.12	1.11
4	1.43	1.22	1.25	1.25	1.25	1.24
5	1.60	1.38	1.41	1.40	1.41	1.52
6	1.69	1.47	1.61	1.65	1.72	1.64
7	2.00	1.68	1.93	2.07	2.30	1.91
8	2.68	1.99	2.15	2.42	2.90	2.31

* Also applies to Combined Single Limits

** Also applies to Uninsured Motorists Property Damage and Underinsured Motorists Bodily Injury

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RULE 11. MISCELLANEOUS COVERAGES

SECTION A. MISCELLANEOUS COVERAGES

Section 1. Uninsured Motorists

Single Limit Bodily Injury Only Increased Limits Factors			Single Limit Bodily Injury & Property Damage Increased Limits Factors		
Limit	Single	Multi-Car	Limit	Single	Multi-Car
\$50,000	1.00	1.00	\$75,000	1.00	1.00
75,000	1.33	1.35	100,000	1.06	1.04
100,000	1.38	1.41	200,000	1.23	1.22
200,000	1.67	1.65	300,000	1.40	1.39
300,000	1.86	1.82	500,000	1.54	1.54
500,000	2.10	2.12			

Split Limit Bodily Injury Increased Limits Factors			Property Damage Increased Limits Factors		
Limit	Single	Multi-Car	Limit	Single	Multi-Car
\$25/50	1.00	1.00	\$25,000	1.00	1.00
50/100	1.50	1.50	50,000	1.17	1.17
100/200	1.83	1.86	100,000	1.83	1.50
100/300	2.00	2.00	200,000	2.00	1.83
250/500	2.22	2.29			
300/300	2.28	2.36			
500/500	2.60	2.70			
500/1000	2.89	3.00			
1000/1000	3.00	3.07			

Section 2. Underinsured Motorists

Single Limit Bodily Injury Only Increased Limits Factors			Split Limit Bodily Injury Increased Limits Factors		
Limit	Single	Multi-Car	Limit	Single	Multi-Car
\$50,000	1.00	1.00	\$25/50	1.00	1.00
75,000	1.22	1.29	50/100	1.75	1.57
100,000	1.78	1.86	100/200	3.38	3.14
200,000	3.44	3.57	100/300	3.88	3.71
300,000	4.22	4.29	250/500	5.13	4.71
500,000	6.00	6.14	300/300	5.50	5.14
			500/500	6.57	6.02
			500/1000	7.88	7.29
			1000/1000	9.50	8.86

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RULE 11. MISCELLANEOUS COVERAGES

SECTION A. MISCELLANEOUS COVERAGES

Section 4. Increased Transportation Expenses Coverage

Limit	Annual Rate Per Auto
\$50/1,500	\$6

Section 5. Towing and Labor Costs

Limit	Annual Rate Per Auto
\$25	\$4
\$50	\$6
\$75	\$8

Section 6. Limited Mexico Coverage

\$6 per policy annually.

Section 9. Arkansas Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit

B.2. Work Loss Coverage

\$5 per car, per year

B.3. Accidental Death Benefit

\$5,000 \$3 per car, per year

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RULE 11. MISCELLANEOUS COVERAGES

SECTION C. EXTENDED NON-OWNED LIABILITY COVERAGE

Person Named	Annual Rate		
	Bodily Injury	Property Damage	Single Limit
Insured Named or Spouse	\$4	\$1	\$6
Relative	\$8	\$2	\$12

Medical Payments Limit of Policy To Which Attached	Auto Furnished For Regular Use	Auto Not Furnished For Regular Use
\$500	\$4	\$2
\$1,000	\$5	\$3
\$2,000	\$6	\$4
\$5,000	\$9	\$7
\$10,000	\$17	\$15

SECTION D. AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT COVERAGE

Total Cost New of Equipment and Accessories	Premium
\$ 0 - 500	\$30
501 - 1,000	\$60
1,001 - 1,500	\$90
1,501 - 2,000	\$120
2,001 - 2,500	\$150
2,501 - 3,000	\$180
3,001 - 3,500	\$210
3,501 - 4,000	\$240
4,001 - 4,500	\$270
4,501 - 5,000	\$300
5,001 and over	\$330

SECTION E. TAPES, RECORDS, DISCS AND OTHER MEDIA COVERAGE

\$16 per auto

SECTION F. CUSTOMIZING EQUIPMENT COVERAGE

Customized Equipment

	Rate per \$100
Comprehensive	0.017
Collision	0.010

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RULE 12. NON-PREMIUM POLICY CHARGES

Section B. Miscellaneous Fees

¹ Any insured who pays their policy premium through a cash/check installment plan or through a recurring credit card payment plan is subject to the following Installment Billing Fee on each payment subsequent to the initial down payment.

Cash/Check payments	\$5.00 per installment
Recurring credit card payments	\$3.00 per installment

² Other Fees are listed below:

	<u>Charge</u>
Bounced Check (Non sufficient funds)	\$25.00
Reinstatement Fee	\$15.00
Cancellation Fee	\$5.00

³ Listed below are the available payment options:

Full Pay
50-50%
Monthly Direct Bill

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RULE 13. MISCELLANEOUS TYPES

Motor Home and Recreational Trailers

Coverage	Motor Home Factor	Rec Trailer Factor
Liability	50%	N/A
Comprehensive	120%	120%
Collision	60%	60%

Exception:

For 1989 and Prior Model Year motor homes with stated value of \$65,001 and over, increase the Symbol 20 base rate as follows in excess of \$65,000:

	Factor for each \$1000
Comprehensive	0.017
Collision	0.014

All Other Trailers

Coverage	Rate Per \$100
Comprehensive - \$100 Deductible	\$ 1.00
Comprehensive - \$200 Deductible	\$ 0.85
Collision - \$200 Deductible	\$ 0.80
Collision - \$300 Deductible	\$ 0.72