

SERFF Tracking Number: PERR-125438055 State: Arkansas
Filing Company: Liberty Mutual Insurance Company State Tracking Number: #101685 \$50
Company Tracking Number: LMIC-AR-OL-CLIP-F
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: LMIC-AR-OL-CLIP-F
Project Name/Number: LMIC-AR-OL-CLIP-F/LMIC-AR-OL-CLIP-F

Filing at a Glance

Company: Liberty Mutual Insurance Company

Product Name: LMIC-AR-OL-CLIP-F

SERFF Tr Num: PERR-125438055 State: Arkansas

TOI: 17.0 Other Liability - Claims
Made/Occurrence

SERFF Status: Closed

State Tr Num: #101685 \$50

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: LMIC-AR-OL-CLIP-F

State Status: Fees verified and
received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi, Edith
Roberts, Brittany Yielding

Authors: Lance Julian, Laura
Jennette, Addy Anggelico

Disposition Date: 01/23/2008

Date Submitted: 01/17/2008

Disposition Status: Approved

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

Effective Date (New):

Effective Date Requested (Renewal):

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: LMIC-AR-OL-CLIP-F

Status of Filing in Domicile: Not Filed

Project Number: LMIC-AR-OL-CLIP-F

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 01/23/2008

State Status Changed: 01/23/2008

Deemer Date:

Corresponding Filing Tracking Number: N/A

Filing Description:

On behalf of Liberty Mutual Insurance Company, we are submitting this filing to introduce forms associated with a new program, Extended Limited Warranty or Service Contract Reimbursement Insurance. The proposed policy provides for the insurer to assume the legal liability of the named insured, an Extended Limited Warranty or Service Contract obligor, in the event they are financially unable to fulfill their financial or performance obligations to their Extended Limited Warranty or Service Contract Holders. The policy form describes the coverage in more detail.

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TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: LMIC-AR-OL-CLIP-F
Project Name/Number: LMIC-AR-OL-CLIP-F/LMIC-AR-OL-CLIP-F

Enclosed is authorization for Perr&Knight to submit this filing on behalf of the Company. All correspondence related to this filing should be directed to Perr&Knight. The Company has prepared the forms contained in this filing. If there are any requests for additional information related to items prepared by the Company, we will forward the request immediately to the Company contact. The Company's response will be submitted to your attention as soon as we receive it.

We respectfully request that the proposed forms be implemented for policies on February 1, 2008 or the earliest possible date upon approval.

Please do not hesitate to contact us with any questions or comments.

Company and Contact

Filing Contact Information

(This filing was made by a third party - perrandknightactuaryconsultants)

Lance Julian, State Filings Project Coordinator doi@perrknight.com
881 Alma Real Drive ste 205 (888) 201-5123 [Phone]
Pacific Palisades, CA 90272 (310) 230-8529[FAX]

Filing Company Information

Liberty Mutual Insurance Company CoCode: 23043 State of Domicile: Massachusetts
175 Berkeley Street Group Code: 111 Company Type:
Boston, MA 02117 Group Name: Liberty Mutual Group State ID Number:
(617) 357-9500 ext. [Phone] FEIN Number: 04-1543470

Filing Fees

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

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty Mutual Insurance Company	\$0.00	01/17/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
101685	\$50.00	01/17/2008

SERFF Tracking Number: PERR-125438055 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	01/23/2008	01/23/2008

SERFF Tracking Number: *PERR-125438055* *State:* *Arkansas*
Filing Company: *Liberty Mutual Insurance Company* *State Tracking Number:* *#101685 \$50*
Company Tracking Number: *LMIC-AR-OL-CLIP-F*
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *LMIC-AR-OL-CLIP-F*
Project Name/Number: *LMIC-AR-OL-CLIP-F/LMIC-AR-OL-CLIP-F*

Disposition

Disposition Date: 01/23/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PERR-125438055 State: Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Forms List & Letter of Authorization	Approved	Yes
Form	Extended Limited Warranty or Service Contract Reimbursement Insurance Policy---Asurion	Approved	Yes
Form	State Amendatory Endorsement Reimbursement Insurance Requirements For Extended Limited Warranty or Service Contracts Sold in Arkansas	Approved	Yes
Form	Extended Limited Warranty or Service Contract Insurance Reimbursement Insurance Policy-Asurion (Declarations)	Approved	Yes
Form	Listing of Policy Provisions and Endorsements Form a Part of the Policy at Issue	Approved	Yes
Form	Additional Insured Endorsement	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Extended Limited Warranty or Service Contract Reimbursement Insurance Policy--Asurion	CLIP 2001	11/05	Policy/Coverage Form		0.00	CLIP 2001 11-05.pdf
Approved	State Amendatory Endorsement Reimbursement Insurance Requirements For Extended Limited Warranty or Service Contracts Sold in Arkansas	CLIP 2002-AR	11/05	Endorsement/Amendment/Conditions		0.00	CLIP 2002-AR 10-07.pdf
Approved	Extended Limited Warranty or Service Contract Insurance Reimbursement Insurance Policy-Asurion (Declarations)	CLIP 2003	11/05	Declaration New s/Schedule		0.00	CLIP 2003 11-05.pdf
Approved	Listing of Policy Provisions and Endorsements Form a Part of the Policy at Issue	CLIP 2004	11/05	Declaration New s/Schedule		0.00	CLIP 2004 11-05.pdf
Approved	Additional Insured	CLIP 2005	11/05	Endorsement/Amendment		0.00	CLIP 2005-11-05.pdf



EXTENDED LIMITED WARRANTY OR SERVICE CONTRACT REIMBURSEMENT INSURANCE POLICY---ASURION

**VARIOUS PROVISIONS IN THIS POLICY RESTRICT COVERAGE. READ THE
ENTIRE POLICY CAREFULLY TO DETERMINE RIGHTS, DUTIES AND WHAT IS
AND WHAT IS NOT COVERED.**

Throughout this policy the words “you” and “your” refer to the Named Insured in the Declarations or by endorsement, and any other person or organization qualifying as a Named Insured under this policy. The words “we,” “us” and “our” refer to the insurance company shown on the Declarations Page as the Insurer.

The word “insured” means any person or organization qualifying as such under WHO IS AN INSURED (SECTION II).

Other words and phrases that appear in quotation marks are defined in SECTION V (DEFINITIONS) of this policy. In consideration of the payment of the premium when due, and

- a. In reliance upon the statements made in the Declarations; and
- b. Subject to the Limits of Liability, Exclusions, Definitions, Conditions and all other terms of this policy, including those modified, replaced or added by endorsements we issue forming part of this policy,

we agree with you, that subject to the terms and conditions of this policy, as follows:

SECTION I – COVERAGES

1. Insuring Agreement

- a. In the event you are financially unable to fulfill your financial or performance obligations to your “Extended Limited Warranty or Service Contract Holders” under any “Extended Limited Warranty or Service Contract” issued by you during the policy period, we will:
 - (1) Indemnify the “Extended Limited Warranty or Service Contract Holder” for all sums which you would otherwise be legally obligated to pay; or
 - (2) Perform the service which you would otherwise be legally obligated to perform in accordance with the terms and conditions of the “Extended Limited Warranty or Service Contract.”
- b. If you have been found liable pursuant to a claim, suit or arbitration proceeding and have not satisfied such liability within 60 days of the judgment or decision, then we will indemnify the “Extended Limited Warranty or Service Contract Holder.”
- c. No other obligation or liability to pay sums or perform acts or services is covered.
- d. We have no duty to defend, represent, or pay defense expenses of any insured or any “Extended Limited Warranty or Service Contract Holder” in a lawsuit or other judicial, quasi-judicial or administrative proceeding.

2. Exclusions

This policy does not apply to:

- a. Any:
 - (1) Claims, sums, costs or expenses; or

(2) Liabilities assumed by you or anyone.

Not covered by the “Extended Limited Warranty or Service Contract.”

- b. Breach of any warranty, expressed or implied, relating to work, products or services sold, performed or afforded by or through you, or by others on your behalf, except as may be provided in the “Extended Limited Warranty or Service Contract”.
- c. Bodily injury, property damage, or personal and advertising injury.
- d. Any and all damages or liabilities for negligence, criminal acts, intentional misconduct of you or any repair facility, or abuse or misuse of the product, item, component or part.
- e. Any liability under a product recall.
- f. Any fees, costs, or expenses incurred by:
 - (1) You, in defending or responding to any claim, arbitration or mediation proceeding suit, or any other judicial, quasi-judicial or administrative proceeding; or
 - (2) The “Extended Limited Warranty or Service Contract Holder” in making or bringing any claim arbitration, suit, or any other judicial, quasi-judicial or administrative proceeding.

However, subject to the provisions of paragraph 1.b. of the Insuring Agreement, this exclusion will not apply to non-discretionary fees awarded to the prevailing party pursuant to state statute.

- g. Liability for consequential damages, including, but not limited to, any penalties for your failure to comply with a decision granting equitable relief, any extra contractual damages or loss of use.
- h. Any claim arising out of the failure on the part of the “Extended Limited Warranty or Service Contract Holder” or any other party to follow installation, maintenance, operation or use instructions for the product, item or component or part covered by “Extended Limited Warranty or Service Contract,” if such condition is excluded from or otherwise not covered under the “Extended Limited Warranty or Service Contract.”
- i. Any liability arising out of, directly or indirectly, any violation of any federal, state or local laws or regulations by the Named Insured or an “Extended Limited Warranty or Service Contract Holder”.
- j. Any liability arising out of misrepresentation made to the “Extended Limited Warranty or Service Contract Holder” or any other party during the sale by the Named Insured:
 - (1) Of the items(s) covered under the “Extended Limited Warranty or Service Contract”, or any part or component of such item; or
 - (2) “The Extended Limited Warranty or Service Contract.”
- k. Any obligation, liability or claim arising out of any fraudulent, dishonest or criminal act of any insured, its agents or employees, or an “Extended Limited Warranty or Service Contract Holder”.
- l. Any liabilities, fees, costs or expenses arising out of any “Extended Limited Warranty or Service Contracts” not sold during the policy period
- m. Any reimbursement whatsoever to you for any sums you have paid or losses you have sustained under an “Extended Limited Warranty or Service Contract” or in any other matter.
- n. Any punitive or exemplary damages or penalties or fines of any kind.

SECTION II– WHO IS AN INSURED

If you are designated in the Declarations, you are an insured, but only with respect to your liability to which this policy applies arising out of “Extended Limited Warranty or Service Contracts” sold during the policy period. “Extended Limited Warranty or Service Contract Holders” nor any service providers performing work on your behalf are not insured and are not covered under this policy.

SECTION III – LIMITS OF LIABILITY

The Limit of Liability under this policy is the total amount for which you are legally obligated under all “Extended Limited Warranty or Service Contracts” sold to all “Extended Limited Warranty or Service Contract Holders” during the policy period.

SECTION IV – CONDITIONS

1. Bankruptcy

Bankruptcy or insolvency of the Named Insured or of an insured’s estate will neither diminish nor increase our obligations under this policy.

2. Cancellation and Nonrenewal.

A. Cancellation

- a. The First Named Insured may cancel this policy by:
 - (1) Mailing or delivering to us advance written notice of cancellation; or
 - (2) Surrendering the policy to us or to any of our authorized agents.
- b. We may cancel this policy by mailing or delivering to the First Named Insured written notice of cancellation at least:
 - (1) 10 days before the effective date of cancellation, if we cancel for non-payment of any premium when due; or
 - (2) 60 days before the effective date of cancellation, if we cancel for any other reason.
- c. If this policy is cancelled:
 - (1) And the policy is not financed with a premium finance company, we will send the first Named Insured any premium refund due.
 - (2) And the policy is financed with a premium finance company, we shall return, within 30 days after the effective date of the cancellation, whatever gross unearned premiums are due under the insurance policy directly to the premium finance company for the account of the First Named Insured.

The refund will be pro rata if:

- (1) We cancel; or
- (2) The policy is cancelled at the request of a premium finance company that has financed this policy under a premium finance agreement.

The refund may be less than pro rata if the First Named Insured cancels the policy.

The cancellation will be effective even if we have not made or offered a refund.

- d. If this policy is has been in effect for 60 days or more, or if this policy is a renewal of a policy we issued, we may cancel this policy only for one or more of the following reasons:
 - (1) Nonpayment of premium, including any additional premium, calculated in accordance with our current rating manual, justified by a material increase in hazard.
 - (2) Your conviction of a crime increasing any hazard insured against;
 - (3) Discovery of fraud or material misrepresentation on the part of either of the following:
 - (a) You or your representative in obtaining this policy; or
 - (b) You, in pursuing a “claim” under this policy;
 - (4) Failure to comply with written loss control recommendations;

- (5) Material change in risk which increases the risk of loss after we issued or renewed insurance coverage;
- (6) Determination by the insurance commissioner that the continuation of the policy would jeopardize our solvency or would place us in violation of the insurance laws of Tennessee or any other state;
- (7) Your violation or breach of any policy terms or conditions; or
- (8) Other reasons that are approved by the insurance commissioner.

Notice of cancellation will state the reason for cancellation.

- e. We will mail or deliver our notice to the last mailing address known to us of the first named insured.
- f. Notice of cancellation by us will state the effective date of the cancellation. The policy period will end on that date.

However, we shall in any event be entitled to retain any Minimum Retained Premium stated in the Declarations.

B. Nonrenewal

- a. If we decide not to renew this policy, we will mail or deliver written notice of non renewal to the First Named Insured and agent, at least 60 days before the expiration date unless:
 - (1) We have offered to issue a renewal policy; or
 - (2) You have obtained replacement coverage or have agreed in writing to obtain replacement coverage.
- b. Any notice of nonrenewal will be mailed or delivered to the First Named Insured's and agent's addresses shown in the policy. If notice is mailed, proof of mailing will be sufficient proof of notice.

Cancellation or nonrenewal will not reduce our responsibility for the "Extended Limited Warranty or Service Contracts sold during the policy period but prior to the date of the cancellation or nonrenewal.

3. Compliance

You will be responsible for all registration, application, licensure, payment of fees, providing of all information, filing and any other activity required to obtain and maintain your status as a service contract provide, obligor, and/or administrator as applicable in good standing in each state in which you sell "Extended Limited Warranty or Service Contracts."

4. Duties In The Event Of A Claim Or Suit

If suit or an arbitration or mediation proceeding is brought or commenced against you in relation to the "Extended Limited Warranty or Service Contract", you must see to it that we are notified as soon as practicable of any such action. However, this will in no way be construed as a commitment by us to bear those costs unless you are unable to fulfill your financial obligations in accordance with the terms and conditions of the "Extended Limited Warranty or Service Contract."

If we have paid sums or incurred expenses on your behalf pursuant to item 1.b of the Insuring Agreement, you shall reimburse us within seven (7) business days.

5. Effect of Termination

- a. In the event of termination of this policy, we will remain liable for all sums pertaining to unexpired "Extended Limited Warranty or Service Contracts" issued by you, during the policy period, prior to the effective date of termination.
- b. Termination will not relieve you of any of your duties or obligations under this policy or any unexpired "Extended Limited Warranty or Service Contracts,"

c. All premiums will be fully earned by us whether termination is effected by you or by us.

6. Examination Of Your Books And Records

You agree to keep a true record of each “Extended Limited Warranty or Service Contract” and relevant information to which this policy applies, open at all times to inspection by us or by our representatives.

We may examine and audit your books and records as they relate to this policy at any time during the policy period and up to three (3) years afterward.

7. Legal Action Against Us

No person or organization has a right under this policy:

- a. To join us as a party or otherwise bring us into a suit asking for damages from an insured; or
- b. To sue us on this policy unless all of its terms have been fully complied with.

8. No Benefit To Bailee

The insurance afforded under this policy will not inure, either directly or indirectly, to the benefit of any carrier or other bailee.

9. Other Insurance

If other valid and collectible insurance is available to the Named Insured for coverage afforded by this policy, our obligations are limited as follows:

a. Primary Insurance

This insurance is primary. Our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in b. below.

b. Method of Sharing

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of liability or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of liability to the total applicable limits of liability of all insurers.

10. Policy Territory

This policy applies to “Extended Limited Warranty or Service Contracts” which are sold or issued in and subject to the laws of the states, territories and jurisdictions in which “Extended Limited Warranty Contracts” are sold or issued by you, as set forth by an endorsement attached to this policy by us.

11. Premiums

- a. We will compute all premiums for this policy, including any applicable Minimum Retained Premium, in accordance with our rules, rates and rating plans.
- b. The Deposit Premium set forth in Item 4. of the Declarations is adjustable, and is only an estimated premium for the Audit Period set forth in Item 3. of the Declaration.
- c. The Minimum Retained Premium shall be computed by a rate to be determined at audit, per 1% of the gross receipts generated from Extended Warranty Coverage provided by the Named Insured.
- d. The Minimum Retained Premium stated in the Declarations shall be considered as fully earned at the inception of the policy.

12. Representations

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- b. Those statements are based upon representations you made to us; and
- c. We have issued this policy in reliance upon your representations.

If there is any material increase in the likelihood that you will be or are unable to fulfill your financial obligations in accordance with the terms and conditions of the "Extended Limited Warranty or Service Contract," you must notify us immediately.

13. Transfer of Rights Of Recovery Against Others To Us

If the insured has rights to recover all or part of any payment we have made under this policy, from the obligator or any other party, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring suit or transfer those rights to us and help us enforce them.

14. Transfer Of Your Rights And Duties Under This Policy

Your rights and duties under this policy may not be transferred without our written consent.

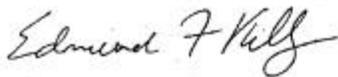
15. Terms of Policy Conform To Statute

The terms of this policy which are in conflict with the statutes of the states wherein "Extended Limited Warranty or Service Contracts" are issued are hereby amended to conform to such statutes. We reserve the right to recalculate the premium for this policy if this policy form is found not to be in conformity with the statutes of such state(s) and such changes would have resulted in a different premium at inception of this policy.

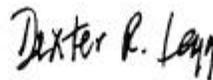
SECTION V – DEFINITIONS.

1. "Extended Limited Warranty or Service Contracts" means the extended warranty or service contract issued by you during the policy period, but only while you are covered under this policy
2. "Extended Limited Warranty or Service Contract Holder" means any person or legal entity who legally acquires the rights of ownership to a valid "Extended Limited Warranty or Service Contract."

In witness whereof, Liberty Mutual Insurance Company has caused this policy to be signed by its President and its Secretary at Boston, Massachusetts, and countersigned below by a duly authorized representative.



Edmund F. Kelly
President



Authorized Representative of
Liberty Mutual Insurance Company



**Policy
Number:**

Effective Date:

Named Insured and Address:

Endorsement Number: _____

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**STATE AMENDATORY ENDORSEMENT
REIMBURSEMENT INSURANCE REQUIREMENTS FOR
EXTENDED LIMITED WARRANTY OR SERVICE
CONTRACTS SOLD IN ARKANSAS**

It is agreed and understood that solely with respect to "Extended Limited Warranty or Service Contracts" that have been issued by the Named Insured during the policy period of this policy in the state of Arkansas, that the terms and conditions of this policy are hereby modified as set forth below to comply with the terms of A.C.A 4-114-101 et seq, regarding reimbursement policies covering service contracts.

I. Amendment of Insuring Agreement

The following is hereby added to the Insuring Agreement:

If you do not provide a covered service within sixty days of proof of loss by the "Extended Limited Warranty or Service Contract Holder," such contract holder is entitled to apply directly to us.

II. Conformity to Statute

Solely with respect to any "Extended Limited Warranty or Service Contract" issued by you during the policy period in Arkansas, any provisions of this policy not specifically modified above are hereby amended to conform to the extent required with A.C.A. 4-114-101 et seq.



EXTENDED LIMITED WARRANTY OR SERVICE CONTRACT REIMBURSEMENT INSURANCE POLICY – ASURION

Insurer:

DECLARATIONS

POLICY NO.

Items:

1. Named Insured and Mailing Address:

The Named Insured is:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Corporation |
| <input type="checkbox"/> Organization (Other than a Partnership or Joint Venture) | |

2. Policy Period

12:01 am Standard Time at the address of the
Named Insured as stated herein.

_____ Inception Date

_____ Expiration Date

**3. Audit Period is the Policy Period unless
Otherwise herein stated:**

- | | | |
|--------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Semi-Annual | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Monthly |
| <input type="checkbox"/> Annual | <input type="checkbox"/> Not Subject to Audit | |

4. Deposit Premium: _____, which is adjustable at the end of each Audit Period
Minimum Retained Premium: _____

5. Limits of Liability:

The total amount for which the insured is legally obligated under
the Extended Limited Warranty or Service Contracts sold during
the policy period shown above.

6. Form Numbers of Policy Provisions and Endorsements forming a part of this policy:

Authorized Representative



Policy
Number:

Effective Date:

Named Insured and Address:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**LISTING OF POLICY PROVISIONS AND ENDORSEMENTS
FORMING A PART OF THE POLICY AT ISSUE**

The following is a listing of policy provisions and endorsements by Form Number and Title that form a part of the policy at issue.

	FORM NUMBER	TITLE
1.		
2.		
3.		
4.		
5.		
6.		
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9.		
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11.		
12.		
13.		

	FORM NUMBER	TITLE
14.		
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16.		
17.		
18.		
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25.		
26.		
27.		
28.		
29.		
30.		



**Policy
Number:**

Effective Date:

Named Insured and Address:

Endorsement Number: _____

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED ENDORSEMENT

It is agreed and understood that, subject to the provisions of this policy and any applicable endorsement thereto:

I. Additional Named Insured:

The following is added as a Named Insured:

SERFF Tracking Number: PERR-125438055 State: Arkansas
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Product Name: LMIC-AR-OL-CLIP-F
Project Name/Number: LMIC-AR-OL-CLIP-F/LMIC-AR-OL-CLIP-F

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: PERR-125438055 State: Arkansas
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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 01/23/2008

Comments:

Attachments:

PCTD - GL.pdf

FFS - GL.pdf

Satisfied -Name: Forms List & Letter of Authorization **Review Status:** Approved 01/23/2008

Comments:

Attachments:

Forms List - Arkansas.pdf

LOA.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only
	a. Date the filing is received:
	b. Analyst:
	c. Disposition:
	d. Date of disposition of the filing:
	e. Effective date of filing:
	New Business
	Renewal Business
	f. State Filing #:
	g. SERFF Filing #:
	h. Subject Codes

3. Group Name	Group NAIC #
Liberty Mutual Group	111

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Liberty Mutual Insurance Company	MA	23043	04-1543470	

5. Company Tracking Number	LMIC-AR-OL-CLIP-F
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Lance Julian 881 Alma Real Dr Ste 205 Pacific Palisades, CA 90272	State Filings Analyst	(888) 201-5123 Ext. 149	(310) 230-8529	doi@perrknight.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Lance Julian

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

9. Type of Insurance (TOI)	17.0 Other Liability-Occ/Claims Made
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	N/A
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 2/1/2008 or earliest possible date upon approval Renewal: N/A
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	1/17/2008
19. Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	LMIC-AR-OL-CLIP-F
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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On behalf of Liberty Mutual Insurance Company, we are submitting this filing to introduce forms associated with a new program, Extended Limited Warranty or Service Contract Reimbursement Insurance. The proposed policy provides for the insurer to assume the legal liability of the named insured, an Extended Limited Warranty or Service Contract obligor, in the event they are financially unable to fulfill their financial or performance obligations to their Extended Limited Warranty or Service Contract Holders. The policy form describes the coverage in more detail.

We respectfully request that the proposed forms be implemented for policies on February 1, 2008 or the earliest possible date upon approval.

Please do not hesitate to contact us with any questions or comments.

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]
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Check #: 101685

Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do **not** refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	LMIC-AR-OL-CLIP-F			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A			
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state

01	Extended Limited Warranty or Service Contract Reimbursement Insurance Policy---Asurion	CLIP 2001 11/05	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
02	State Amendatory Endorsement Reimbursement Insurance Requirements For Extended Limited Warranty or Service Contracts Sold in Arkansas	CLIP 2002-AR 11/05	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
03	Extended Limited Warranty or Service Contract Insurance Reimbursement Insurance Policy-Asurion (Declarations)	CLIP 2003 11/05	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
04	Listing of Policy Provisions and Endorsements Form a Part of the Policy at Issue	CLIP 2004 11/05	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
05	Additional Insured Endorsement	CLIP 2005 11/05	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
06			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
07			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
08			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
09			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
10			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

Liberty Mutual Insurance Company
Extended Limited Warranty or Service Contract Reimbursement Insurance Coverage

Forms List - Arkansas

Form Name	Form Number/ Edition Date
Extended Limited Warranty or Service Contract Reimbursement Ins Policy	CLIP 2001 11/05
Declarations Page	CLIP 2003 11/05
Listing of Policy Provisions and Endorsements	CLIP 2004 11/05
Additional Insured Endorsement	CLIP 2005 11/05
 Arkansas Amendatory Endorsement	 CLIP-2002-AR 10/07



Bruce M. Eisler
Senior Vice President
55 Water Street
New York, NY 10041
212-208-4210
212-208-2866 Fax
Bruce.Eisler@libertyiu.com

March 15, 2005

To Whom It May Concern:

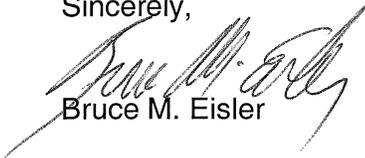
Perr & Knight, Inc. is hereby authorized to submit rate, rule, and form filings on behalf of Liberty Mutual Insurance Company. This authorization includes providing additional information and responding to questions regarding the filings on our behalf as necessary. This authorization is deemed in be in effect until rescinded in writing.

Please direct all correspondence and inquiries related to this filing to Perr & Knight, Inc. at the following address:

State Filings Department
Perr & Knight, Inc.
1200 North Federal Highway
Suite 309
Boca Raton, FL 33432
Tel: (561) 416-3992
Fax: (561) 416-3167

Please contact me at 212-208-4210 if you have any questions regarding this authorization.

Sincerely,


Bruce M. Eisler