

SERFF Tracking Number: PERR-125454367 State: Arkansas
Filing Company: DaimlerChrysler Insurance Company State Tracking Number: #? \$25
Company Tracking Number: DCIC-WC-NCCI-AR-08-01-R
TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC
Product Name: DCIC-WC-NCCI-AR-08-01-R
Project Name/Number: DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R

Filing at a Glance

Company: DaimlerChrysler Insurance Company

Product Name: DCIC-WC-NCCI-AR-08-01-R SERFF Tr Num: PERR-125454367 State: Arkansas
TOI: 16.0 Workers Compensation SERFF Status: Closed State Tr Num: #? \$25
Sub-TOI: 16.0004 Standard WC Co Tr Num: DCIC-WC-NCCI-AR-08-01-R State Status: Fees verified

Filing Type: Rule

Co Status: Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding
Authors: Laura Jennette, Patricia Heckman, Addy Angelico
Disposition Date: 01/30/2008
Date Submitted: 01/28/2008 Disposition Status: Approved

Effective Date Requested (New): 03/01/2008

Effective Date (New): 03/01/2008

Effective Date Requested (Renewal): 03/01/2008

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: DCIC-WC-NCCI-AR-08-01-R

Status of Filing in Domicile: Not Filed

Project Number: DCIC-WC-NCCI-AR-08-01-R

Domicile Status Comments:

Reference Organization: National Council on Compensation Insurance, Inc. (NCCI)
Reference Number: Item B-1405

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 01/30/2008

State Status Changed: 01/29/2008

Deemer Date:

Corresponding Filing Tracking Number: DCIC-WC-NCCI-AR-08-01-F

Filing Description:

On behalf of DaimlerChrysler Insurance Company ("the Company"), we are submitting this filing to notify your Department that the Company would like to adopt the following reference filing:

Reference Organizations: National Council on Compensation Insurance, Inc. (NCCI)

Reference Filing Number: Item B-1405

SERFF Tracking Number: PERR-125454367 State: Arkansas
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 TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC
 Product Name: DCIC-WC-NCCI-AR-08-01-R
 Project Name/Number: DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R

Reference Filing Description: Removal of the December 31, 2005 expiration date from Rule 3-A-24-a of NCCI's Basic Manual for Workers Compensation and Employers Liability Insurance

We respectfully request that this filing be effective on March 1, 2008.

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)
 Patricia Heckman, Bureau Monitoring Manager doi@perrknight.com
 2030 Main Street Suite 235 (949) 474-0362 [Phone]
 Irvine, CA 92614

Filing Company Information

DaimlerChrysler Insurance Company	CoCode: 10499	State of Domicile: Michigan
27777 Inkster Road	Group Code: 240	Company Type:
CIMS 405-17-06		
Farmington Hills, MI 48334-5326	Group Name:	State ID Number:
(248) 427-4155 ext. [Phone]	FEIN Number: 38-1775863	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
DaimlerChrysler Insurance Company	\$0.00	01/28/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
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101736 \$25.00 01/25/2008

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	01/30/2008	01/30/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending	Carol Stiffler	01/29/2008	01/29/2008	Laura Jennette	01/29/2008	01/29/2008
Industry Response						

SERFF Tracking Number: PERR-125454367 *State:* Arkansas
Filing Company: DaimlerChrysler Insurance Company *State Tracking Number:* #? \$25
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Project Name/Number: DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R

Disposition

Disposition Date: 01/30/2008

Effective Date (New): 03/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PERR-125454367 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	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
Supporting Document	NAIC loss cost data entry document	Approved	Yes
Supporting Document	Letter of Authorization	Approved	Yes

SERFF Tracking Number: PERR-125454367 State: Arkansas
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Project Name/Number: DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 01/29/2008
Submitted Date 01/29/2008
Respond By Date

Dear Patricia Heckman,

This will acknowledge receipt of the captioned filing.

Item B-1405 is the new NCCI terrorism filing. Because it is based on a federal law, the Commission has agreed to approve it retroactively to 1/1/08 if the company requests it. You requested a March 1, 2008 effective date. Would you prefer to do it on January 1, 2008? I can approve this filing as soon as you let me know if you want to change the effective date.

Please feel free to contact me if you have questions.

Sincerely,
Carol Stiffler

Response Letter

Response Letter Status Submitted to State
Response Letter Date 01/29/2008
Submitted Date 01/29/2008

Dear Carol Stiffler,

Comments:

Response 1

Comments: Thank you for your letter informing the Company that they may use a retroactive date.

Please accept this letter as confirmation that the Company would like to use a March 1, 2008 effective date.

Should you have any additional questions or comments, please do not hesitate to contact us. Your time and assistance with this filing are greatly appreciated.

Changed Items:

SERFF Tracking Number: *PERR-125454367* *State:* *Arkansas*
Filing Company: *DaimlerChrysler Insurance Company* *State Tracking Number:* *#? \$25*
Company Tracking Number: *DCIC-WC-NCCI-AR-08-01-R*
TOI: *16.0 Workers Compensation* *Sub-TOI:* *16.0004 Standard WC*
Product Name: *DCIC-WC-NCCI-AR-08-01-R*
Project Name/Number: *DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R*

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,
Addy Anggelico, Laura Jennette, Patricia Heckman

SERFF Tracking Number: *PERR-125454367* *State:* *Arkansas*
Filing Company: *DaimlerChrysler Insurance Company* *State Tracking Number:* *#? \$25*
Company Tracking Number: *DCIC-WC-NCCI-AR-08-01-R*
TOI: *16.0 Workers Compensation* *Sub-TOI:* *16.0004 Standard WC*
Product Name: *DCIC-WC-NCCI-AR-08-01-R*
Project Name/Number: *DCIC-WC-NCCI-AR-08-01-R/DCIC-WC-NCCI-AR-08-01-R*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: PERR-125454367 State: Arkansas
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Supporting Document Schedules

<p>Satisfied -Name: Uniform Transmittal Document-Property & Casualty</p> <p>Comments:</p> <p>Attachments: PCTD 03-07-R.pdf RRFS 03-07.pdf</p>	<p>Review Status: Approved 01/30/2008</p>
<p>Bypassed -Name: NAIC Loss Cost Filing Document for Workers' Compensation</p> <p>Bypass Reason: N/A - Rule Adoption</p> <p>Comments:</p>	<p>Review Status: Approved 01/30/2008</p>
<p>Bypassed -Name: NAIC loss cost data entry document</p> <p>Bypass Reason: N/A - Rule Adoption</p> <p>Comments:</p>	<p>Review Status: Approved 01/30/2008</p>
<p>Satisfied -Name: Letter of Authorization</p> <p>Comments:</p> <p>Attachment: 03 07 LOA.pdf</p>	<p>Review Status: Approved 01/30/2008</p>

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 #				
DaimlerChrysler Group	240				
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #	
DaimlerChrysler Insurance Company	MI	10499	38-1775863		
5. Company Tracking Number	DCIC-WC-NCCI-AR-08-01-R				
Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]					
6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Patti Heckman 2030 Main Street Suite 235 Irvine, CA 92614	Bureau Monitoring Manager	(949) 474-0362	(949) 474-0381	doi@perrknight.com
7.	Signature of authorized filer		<i>Patricia Heckman</i>		
8.	Please print name of authorized filer		Patti Heckman		
Filing information (see General Instructions for descriptions of these fields)					
9.	Type of Insurance (TOI)		16.0 Workers Compensation		
10.	Sub-Type of Insurance (Sub-TOI)		16.0004 Standard WC		
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 checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input 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: March 1, 2008 Renewal: March 1, 2008		
15.	Reference Filing?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
16.	Reference Organization (if applicable)		National Council on Compensation Insurance (NCCI)		
17.	Reference Organization # & Title		Item B-1405		
18.	Company's Date of Filing		January 28, 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 #	DCIC-WC-NCCI-AR-08-01-R
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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 DaimlerChrysler Insurance Company ("the Company"), we are submitting this filing to notify your Department that the Company would like to adopt the following reference filing:

Reference Organizations: National Council on Compensation Insurance, Inc. (NCCI)

Reference Filing Number: Item B-1405

Reference Filing Description: Removal of the December 31, 2005 expiration date from Rule 3-A-24-a of NCCI's Basic Manual for Workers Compensation and Employers Liability Insurance

We respectfully request that this filing be effective on March 1, 2008.

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]

Check #: 101736

Amount: \$25.00

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 #	DCIC-WC-NCCI-AR-08-01-R
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	DCIC-WC-NCCI-AR-08-01-F
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File and Use
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4a.	Rate Change by Company (As Proposed)
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Company Name	Overall % Indicated Change	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)
DaimlerChrysler Insurance Company	0.00%	0.00%	MA	N/A	N/A	0.00%	0.00%

4b.	Rate Change by Company (As Accepted) For State Use Only
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Company Name	Overall % Indicated Change (when applicable)	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)

Overall Rate Information (Complete for Multiple Company Filings only)

		COMPANY USE	STATE USE
5a.	Overall percentage rate indication (when applicable)	0.00%	
5b.	Overall percentage rate impact for this filing	0.00%	
5c.	Effect of Rate Filing – Written premium change for this program	0	
5d.	Effect of Rate Filing – Number of policyholders affected	N/A	

6.	Overall percentage of last rate revision	N/A
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7.	Effective Date of last rate revision	N/A
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	N/A
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9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	N/A	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

DAIMLERCHRYSLER**DaimlerChrysler
Insurance Company**

March 20, 2007

To Whom It May Concern:

Perr & Knight, Inc. is hereby authorized to submit rate, rule, and form filings on behalf of DaimlerChrysler Insurance Company. This authorization includes providing additional information and responding to questions regarding the filings on our behalf as necessary. The authorization is deemed to be in effect until December 31, 2008.

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

State Filings Department
Perr & Knight, Inc.
881 Alma Real Drive, Suite 205
Pacific Palisades, CA 90272

Please contact me at 248-427-4223 if you have any questions regarding this authorization.

Sincerely,



James S. Haan
Vice President & General Manager
DaimlerChrysler Insurance Company

Company

A member of the DaimlerChrysler Services Group

DaimlerChrysler Insurance

27777 Inkster Road
Farmington Hills, MI 48334-5326
www.dcxins.com