

SERFF Tracking Number: CNAB-125847682 State: Arkansas
First Filing Company: Continental Insurance Company, ... State Tracking Number: EFT \$100
Company Tracking Number: 08-R3211
TOI: 17.2 Other Liability - Occurrence Only Sub-TOI: 17.2001 Commercial General Liability
Product Name: Withdrawal of Manual Pages
Project Name/Number: Withdrawal of Manual Pages/08-R3211

Filing at a Glance

Companies: Continental Insurance Company, American Casualty Company of Reading PA, National Fire Insurance Company of Hartford, Transportation Insurance Company, Valley Forge Insurance Company, Continental Casualty Company

Product Name: Withdrawal of Manual Pages SERFF Tr Num: CNAB-125847682 State: Arkansas
TOI: 17.2 Other Liability - Occurrence Only SERFF Status: Closed State Tr Num: EFT \$100
Sub-TOI: 17.2001 Commercial General Liability Co Tr Num: 08-R3211 State Status: Fees verified and received
Filing Type: Rate Co Status: Reviewer(s): Betty Montesi, Edith Roberts
Author: Mercy Marasigan Disposition Date: 10/27/2008
Date Submitted: 10/07/2008 Disposition Status: Withdrawn
Effective Date Requested (New): 10/01/2008 Effective Date (New):
Effective Date Requested (Renewal): 10/01/2008 Effective Date (Renewal):
State Filing Description:

General Information

Project Name: Withdrawal of Manual Pages Status of Filing in Domicile: Not Filed
Project Number: 08-R3211 Domicile Status Comments: Not Required
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 10/27/2008 Deemer Date:
State Status Changed: 10/27/2008
Corresponding Filing Tracking Number:
Filing Description:
CNA is filing a revision to their Commercial General Liability Program by withdrawing the manual pages CNA-EX-Cg-CWR-50(d), CNA-EX-CG-CWR-50(f) and CNA-EX-CG-CWR-78/79

These pages contain the rates for the classes (Boat Beauty Shop and Morticians/Cemetery) that are no longer

<i>SERFF Tracking Number:</i>	<i>CNAB-125847682</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>08-R3211</i>		
<i>TOI:</i>	<i>17.2 Other Liability - Occurrence Only</i>	<i>Sub-TOI:</i>	<i>17.2001 Commercial General Liability</i>
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competitive. The overall impact of these classes on the General Liability line of business is negligible.

The Class Codes 10101 (Boat Dealers), 10107 (Boat Yards or Marine-Public, 10111 (Barber or Beauty Shop Supply) and 72810 (Morticians Prof. Liability) would follow the ISO rate levels.

CNA intended implementation date for this filing is October 15, 2008.

Company and Contact

Filing Contact Information

Mercy A. Marasigan, State Filing Analyst	mercedes.marasigan@cna.com
333 S. Wabash	(312) 822-6609 [Phone]
Chicago, IL 60685	(312) 755-2394[FAX]

Filing Company Information

Continental Insurance Company	CoCode: 35289	State of Domicile: Pennsylvania
333 South Wabash	Group Code: 218	Company Type: Property and Casualty

37th Floor	Group Name: CNA Insurance	State ID Number:
Chicago, IL 60604	Companies	
(312) 822-4292 ext. [Phone]	FEIN Number: 13-5010440	

American Casualty Company of Reading PA	CoCode: 20427	State of Domicile: Pennsylvania
333 South Wabash	Group Code: 218	Company Type: Property and Casualty

37th Floor	Group Name: CNA Insurance	State ID Number:
Chicago, IL 60604	Companies	
(312) 822-4292 ext. [Phone]	FEIN Number: 23-0342560	

National Fire Insurance Company of Hartford	CoCode: 20478	State of Domicile: Illinois
333 South Wabash	Group Code: 218	Company Type: Property and

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Casualty

37th Floor
 Chicago, IL 60604
 (312) 822-4292 ext. [Phone]
 Transportation Insurance Company
 333 South Wabash

Group Name: CNA Insurance
 Companies
 FEIN Number: 06-0464510

 CoCode: 20494
 Group Code: 218

State ID Number:
 State of Domicile: Illinois
 Company Type: Property and
 Casualty

37th Floor
 Chicago, IL 60604
 (312) 822-4292 ext. [Phone]
 Valley Forge Insurance Company
 333 South Wabash

Group Name: CNA Insurance
 Companies
 FEIN Number: 36-1877247

 CoCode: 20508
 Group Code: 218

State ID Number:
 State of Domicile: Pennsylvania
 Company Type: Property and
 Casualty

37th Floor
 Chicago, IL 60604
 (312) 822-4292 ext. [Phone]
 Continental Casualty Company
 333 South Wabash

Group Name: CNA Insurance
 Companies
 FEIN Number: 23-1620527

 CoCode: 20443
 Group Code: 218

State ID Number:
 State of Domicile: Illinois
 Company Type: Property and
 Casualty

Chicago , IL 60604
 (312) 822-4292 ext. [Phone]

Group Name: CNA Insurance
 Companies
 FEIN Number: 36-2114545

State ID Number:

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Filing Fees

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No
Fee Explanation: \$100 pe group
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Continental Insurance Company	\$0.00	10/07/2008	
American Casualty Company of Reading PA	\$0.00	10/07/2008	
National Fire Insurance Company of Hartford	\$0.00	10/07/2008	
Transportation Insurance Company	\$0.00	10/07/2008	
Valley Forge Insurance Company	\$0.00	10/07/2008	
Continental Casualty Company	\$100.00	10/07/2008	23007121

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Withdrawn	Edith Roberts	10/27/2008	10/27/2008

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Disposition

Disposition Date: 10/27/2008

Effective Date (New):

Effective Date (Renewal):

Status: Withdrawn

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

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Exp. Memo	Withdrawn	Yes
Supporting Document	P & C Trans. Doc/Sched	Withdrawn	Yes

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Exp. Memo

Comments:

Exp. Memo attached

Attachment:

AR08-R3211 EXP. MEMO.pdf

Review Status:

Withdrawn

10/27/2008

Satisfied -Name: P & C Trans. Doc/Sched

Comments:

P & C Trans. Doc & RR Schedule attached

Attachment:

AR08-R3211 P & C Trans. Doc-RR Sched.pdf

Review Status:

Withdrawn

10/27/2008

AMERICAN CASUALTY COMPANY OF READING, PA 218-20427
TRANSPORTATION INSURANCE COMPANY 218-20494
CONTINENTAL CASUALTY COMPANY 218-20443
THE CONTINENTAL INSURANCE COMPANY 218-35289
VALLEY FORGE INSURANCE COMPANY 218-20508
NATIONAL FIRE INSURANCE COMPANY 218-20478

STATE OF ARKANSAS
EXPLANATORY MEMORANDUM
COMMERCIAL GENERAL LIABILITY
CNA FILING ID: 08-R3211

OVERVIEW

The captioned CNA companies are filing a revision to their Commercial General Liability program in Arkansas by withdrawing the proprietary pricing for the classes below and start adopting ISO rate levels. CNA filed these proprietary rates back in the '90s. However, these rates are no longer competitive, nor could CNA deviate from them since they are filed as rates. The overall rate impact of these classes on the General Liability book of business is neglectible.

Impact of these revisions for the General Liability coverage: 0.0%
Intended implementation of this filing for all policies written on and after: 10/15/2008

The following Exception Pages would be withdrawn:

Boat	CNA-EX-CG-CWR-50(d), 3rd Edition
Beauty Shop	CNA-EX-CG-CWR-50(f), 2nd Edition
Morticians/Cemetry	CNA-EX-CG-CWR-78 (79), 1st Edition

The following classes would follow ISO rate levels.

<u>Class Code</u>	<u>Class Description</u>	<u>Overall Impact</u>
10101	Boat Dealers	-0.1%
10107	Boat Yards or Marine-Public	0.0%
10111	Barber or Beauty Shop Supply	0.0%
72610	Mortician Professional Liability	0.0%

IMPACT SUMMARY

<u>Loss Cost adoption (2008)</u>	0.00%
Total	0.00%

CONTACT

If you have any questions, please feel free to contact Amy Green by phone (312)-822-4573 or email amy.green@cna.com.

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: <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">New Business</td> <td style="width:50%; border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes				New Business		Renewal Business	
New Business									
Renewal Business									
3. Group Name CNA		Group NAIC # 218							
4. Company Name(s)		Domicile	NAIC #	FEIN #	State #				
Continental Casualty Company		IL	20443	36-2114545					
National Fire Insurance Company of Hartford		CT	20478	06-0464510					
American Casualty Company of Reading, PA		PA	20427	23-0342560					
Transportation Insurance Company		IL	20494	36-1877247					
Valley Forge Insurance Company		PA	20508	23-1620527					
Continental Insurance Company		SC	35289	13-5010440					
5. Company Tracking Number Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]		08-R3211							
6.	Name and address	Title	Telephone #s	FAX #	e-mail				
	Amy Green 333 S. Wabash Chicago, IL 60604	Actuarial Analyst	(312)822-4573		amy.green@cna.com				
7.	Signature of authorized filer <i>Mercy A. Marasigan</i>								
8.	Please print name of authorized filer Mercy A. Marasigan								
Filing information (see General Instructions for descriptions of these fields)									
9.	Type of Insurance (TOI) Other Liability								
10.	Sub-Type of Insurance (Sub-TOI) Commercial General Liability								
11.	State Specific Product code(s) (if applicable)								
12.	Company Program Title (Marketing title) General Liability								
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 checked="" type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)								
14.	Effective Date(s) Requested New: 10/15/2008 Renewal: 10/15/2008								
15.	Reference Filing? <input type="checkbox"/> Yes <input type="checkbox"/> No								
16.	Reference Organization (if applicable)								
17.	Reference Organization # & Title								
18.	Company's Date of Filing								
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 #	08-R3211
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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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With this filing we are proposing to withdraw several exception pages for our proprietary rates associated with General Liability. The impact of these rate revisions for the General Liability coverage is mostly neglectible.

The following Exception Pages would be withdrawn:

Boat	CNA-EX-CG-CWR-50(d), 3rd Edition	
Beauty Shop	CNA-EX-CG-CWR-50(f), 2nd Edition	
Morticians	CNA-EX-CG-CWR-78 (79), 1st Edition	

The following classes would follow ISO rate levels.

Class Code	Class Description	Overall Impact
10101	Boat Dealers	-0.1%
10107	Boat Yards or Marine-Public	0.0%
10111	Barber or Beauty Shop Supply	0.0%
72610	Mortician Professional Liability	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]				
<table style="width: 100%;"> <tr> <td style="width: 10%;">Check #:</td> <td style="width: 90%;">EFT</td> </tr> <tr> <td>Amount:</td> <td>\$100.00</td> </tr> </table>		Check #:	EFT	Amount:	\$100.00
Check #:	EFT				
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, © 2007 National Association of Insurance Commissioners

1. This filing transmittal is part of Company Tracking # 08-R3211

2. This filing corresponds to form filing number N/A
 Rate Increase Rate Decrease Rate Neutral (0%)

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

4a. Rate Change by Company (As Proposed)

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)
American Casualty		0.0%	0	0	0		
Continental Casualty		0.0%	0	0	0		
Continental Insurance		0.0%	0	0	0		
National Fire		0.0%	0	2	18,721		
Transportation		0.0%	0	0	0		
Valley Forge		0.0%	0	0	0		

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

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)		
5b. Overall percentage rate impact for this filing	0.0%	
5c. Effect of Rate Filing – Written premium change for	0	
5d. Effect of Rate Filing – Number of policyholders	2	

6. Overall percentage of last rate revision n/a
7. Effective Date of last rate revision n/a
8. Filing Method of Last filing n/a

9. Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn	
02	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn	
03	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn	