

SERFF Tracking Number: ASPX-125913884 State: Arkansas
 Filing Company: American Security Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: CF AR03005ASF02
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
 Product Name: Residential & Commercial Flood Program
 Project Name/Number: Residential & Commercial Flood Program/CF AR03005ASF02

Filing at a Glance

Company: American Security Insurance Company

Product Name: Residential & Commercial Flood Program
 SERFF Tr Num: ASPX-125913884 State: Arkansas

TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: CF AR03005ASF02	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins
	Author: SPI AssurantPC	Disposition Date: 11/21/2008
	Date Submitted: 11/20/2008	Disposition Status: Approved
Effective Date Requested (New): 01/01/2009		Effective Date (New): 01/01/2009
Effective Date Requested (Renewal): 01/01/2009		Effective Date (Renewal): 01/01/2009

State Filing Description:

General Information

Project Name: Residential & Commercial Flood Program

Project Number: CF AR03005ASF02

Reference Organization:

Reference Title:

Filing Status Changed: 11/21/2008

State Status Changed: 11/21/2008

Corresponding Filing Tracking Number:

Filing Description:

We recently received an approval from your department for form numbers, N8051-0108, Disclosure Notice -Pursuant to Terrorism Insurance Risk Act and MSP CERT ACTS END (03-08), Certified Acts of Terrorism Coverage and Cap On Certified Acts Losses, to be used with the commercial property coverage. Your date of approval is 004-04-08 and SERFF tracking is #ASPX-.125583850.

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

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The requested effective date is on or after January 1, 2009.

Company and Contact

Filing Contact Information

Toni Taylor, Contract Compliance Analyst Toni.Taylor@assurant.com
 11222 Quail Roost Drive (305) 253-2244 [Phone]
 Miami, FL 33157 (305) 252-6987[FAX]

Filing Company Information

American Security Insurance Company CoCode: 42978 State of Domicile: Delaware
 260 Interstate N. Circle NW Group Code: 19 Company Type:
 Atlanta, GA 33039 Group Name: Assurant, Inc. Group State ID Number:
 (305) 253-2244 ext. [Phone] FEIN Number: 581529575

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Security Insurance Company	\$50.00	11/20/2008	24071354

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	11/21/2008	11/21/2008

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Disposition

Disposition Date: 11/21/2008

Effective Date (New): 01/01/2009

Effective Date (Renewal): 01/01/2009

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes

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Rate Information

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty **Review Status:** Approved 11/21/2008

Comments:

Attachment:

Property and Casualty Filing Form.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: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">New Business</td> <td style="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	Group NAIC #
Assurant, Inc. Group	0019

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
American Security Insurance Company	DE	42978	581529575	

5. Company Tracking Number	RCF CF AR03005ASF02
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #	FAX #	e-mail
	Toni J. Taylor 11222 Quail Roost Drive Miami FL 33157	Contract Compliance Analyst	800-852-2244 Ext. 33104	305-252-6987	Toni.Taylor@assurant.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Toni J. Taylor

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

9.	Type of Insurance (TOI)	01.0 Property
10.	Sub-Type of Insurance (Sub-TOI)	01.0001 Commercial Property (Fire and Allied Lines)
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Residential and Commercial Flood Program
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms - for Information only <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 01/01/2009 Renewal:
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	N/A
17.	Reference Organization # & Title	N/A
18.	Company's Date of Filing	November 19, 2008
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	RCF CF AR03005ASF02
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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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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 #: N/A
Amount: \$50.00 via EFT

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

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