

SERFF Tracking Number: *HNST-125876250* *State:* *Arkansas*
Filing Company: *Lincoln General Insurance Company* *State Tracking Number:* *EFT \$25*
Company Tracking Number: *2008AR12CF*
TOI: *01.0 Property* *Sub-TOI:* *01.0001 Commercial Property (Fire and Allied Lines)*

Product Name: *ISO Property - Delay Adoption Form Filing*
Project Name/Number: *ISO Property - Delay Adoption Form Filing/2008AR12CF*

Filing at a Glance

Company: Lincoln General Insurance Company

Product Name: ISO Property - Delay Adoption Form Filing SERFF Tr Num: HNST-125876250 State: Arkansas

TOI: 01.0 Property SERFF Status: Closed State Tr Num: EFT \$25
 Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines) Co Tr Num: 2008AR12CF State Status: Fees verified and received
 Filing Type: Form Co Status: Cathy Ruppel Reviewer(s): Betty Montesi, Llyweyia Rawlins

Authors: Christy Parks, Phyllis

Rakittke, Catherine Ruppel

Date Submitted: 10/31/2008

Disposition Date: 11/03/2008

Effective Date Requested (New): 12/01/2009

Disposition Status: Filed

Effective Date Requested (Renewal): 12/01/2009

Effective Date (New): 12/01/2009

Effective Date (Renewal): 12/01/2009

State Filing Description:

General Information

Project Name: ISO Property - Delay Adoption Form Filing

Status of Filing in Domicile: Pending

Project Number: 2008AR12CF

Domicile Status Comments:

Reference Organization: ISO

Reference Number: CF-2007-OFR07

Reference Title:

Advisory Org. Circular: LI-CF-2008-059

Filing Status Changed: 11/03/2008

State Status Changed: 11/03/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

As a participating member of the Insurance Services Office (ISO), Lincoln General Insurance Company would like to adopt the Commercial Property Forms submitted under ISO filing CF-2007-OFR07.

The company chosen effective date is December 1, 2009.

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Company and Contact

Filing Contact Information

Christy Parks, Sr. State Filing Analyst christy.parks@lincolngeneral.com
 P. O. Box 3709 (800) 876-3350 [Phone]
 York, PA 17402 (717) 757-3350[FAX]

Filing Company Information

Lincoln General Insurance Company CoCode: 33855 State of Domicile: Pennsylvania
 P.O. Box 3709 Group Code: 1326 Company Type: Property & Casualty
 3501 Concord Rd
 York, PA 17402 Group Name: Kingsway Financial State ID Number:
 Group
 (717) 757-0000 ext. [Phone] FEIN Number: 23-2023242

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25 for ISO reference filing
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Lincoln General Insurance Company	\$25.00	10/31/2008	23644474

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Llyweyia Rawlins	11/03/2008	11/03/2008

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Disposition

Disposition Date: 11/03/2008

Effective Date (New): 12/01/2009

Effective Date (Renewal): 12/01/2009

Status: Filed

Comment: Adopt the Commercial Property Forms submitted under ISO filing CF-2007-OFR07.

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	Accepted for Informational Purposes	Yes

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Accepted for Informational Purposes 11/03/2008
Comments: please see attached
Attachment: Transmittal.pdf

Property & Casualty Transmittal Document

<p>1. Reserved for Insurance Dept. Use Only</p>	<p>2. Insurance Department Use only</p> <p>a. Date the filing is received:</p> <p>b. Analyst:</p> <p>c. Disposition:</p> <p>d. Date of disposition of the filing:</p> <p>e. Effective date of filing:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></td> </tr> </table> <p>f. State Filing #:</p> <p>g. SERFF Filing #:</p> <p>h. Subject Codes</p>	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #

5. Company Tracking Number	
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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

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

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

9. Type of Insurance (TOI)	
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)	
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input 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: <input type="text"/> Renewal: <input type="text"/>
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 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 #

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

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 #:
Amount:

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.)

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