

SERFF Tracking Number: CNLC-125961796 State: Arkansas
Filing Company: CANAL INSURANCE COMPANY State Tracking Number: #? \$0
Company Tracking Number: CNLC-125961796
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: IA 110 CW 0208 - WITHDRAWAL
Project Name/Number: IA 110 CW 0208 - WITHDRAWAL/CNLC-125961796

Filing at a Glance

Company: CANAL INSURANCE COMPANY

Product Name: IA 110 CW 0208 - WITHDRAWAL SERFF Tr Num: CNLC-125961796 State: Arkansas

TOI: 35.0 Interline Filings

SERFF Status: Closed

State Tr Num: #? \$0

Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: CNLC-125961796

State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,
Llyweyia Rawlins

Author: Lisa Flynn

Disposition Date: 12/29/2008

Date Submitted: 12/22/2008

Disposition Status: Withdrawn

Effective Date Requested (New): On Approval

Effective Date (New): 12/29/2008

Effective Date Requested (Renewal): On Approval

Effective Date (Renewal):
12/29/2008

State Filing Description:

General Information

Project Name: IA 110 CW 0208 - WITHDRAWAL

Status of Filing in Domicile:

Project Number: CNLC-125961796

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 12/29/2008

Deemer Date:

State Status Changed: 12/29/2008

Corresponding Filing Tracking Number:

Filing Description:

We are filing to withdraw form number IA 110 CW 0208, Auto Physical Damage 80% Coinsurance Clause, as we have decided against using this form. It has not been implemented into our Policy Issuance System, nor has it been attached to any policies.

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Company and Contact

Filing Contact Information

Lisa Flynn, COMPLIANCE ANALYST LISA.FLYNN@CANAL-INS.COM
 400 EAST STONE AVENUE (800) 868-7538 [Phone]
 GREENVILLE, SC 29601 (864) 679-2527[FAX]

Filing Company Information

CANAL INSURANCE COMPANY CoCode: 10464 State of Domicile: South Carolina
 400 EAST STONE AVENUE Group Code: 262 Company Type: PROPERTY &
 CASUALTY

PO BOX 7
 GREENVILLE, SC 29690 Group Name: CANAL GROUP State ID Number:
 (864) 242-5365 ext. [Phone] FEIN Number: 57-0133332

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
CANAL INSURANCE COMPANY	\$0.00	12/22/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Withdrawn	Llyweyia Rawlins	12/29/2008	12/29/2008

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Disposition

Disposition Date: 12/29/2008

Effective Date (New): 12/29/2008

Effective Date (Renewal): 12/29/2008

Status: Withdrawn

Comment: Filing to withdraw form number IA 110 CW 0208, Auto Physical Damage 80% Coinsurance Clause

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 &Withdrawn Casualty		Yes
Form	Auto Physical Damage 80% Coinsurance Withdrawn Clause		Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Withdrawn	Auto Physical Damage 80% Coinsurance Clause	IA 110 CW	2-2008	Endorsement/Amendment/Conditions	Replaced Form #: Previous Filing #: CNLC- 125589489		IA 110 CW 0208 -- Auto Phys Dam 80% Coinsurance Clause.pdf

CANAL

Greenville, SC

POLICY NUMBER:

COMMERCIAL AUTO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AUTO PHYSICAL DAMAGE (80% COINSURANCE CLAUSE)

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement effective:
Named Insured:

SECTION IV, BUSINESS AUTO CONDITIONS, A. 4. is amended by the addition of the following:

We will not pay the full amount of any "loss" if the actual cash value of the "auto" at the time of "loss" times 80% is greater than the stated value for the "auto" as shown in the BUSINESS AUTO DECLARATIONS, ITEM THREE, SCHEDULE OF COVERED AUTOS YOU OWN.

Instead, we will determine the most we will pay by using the following steps:

1. Multiply the actual cash value of the "auto" at the time of "loss" by 80%;
2. Divide the stated value of the "auto" shown in the BUSINESS AUTO DECLARATIONS, ITEM

THREE, SCHEDULE OF COVERED AUTOS YOU OWN by the figure determined in step (1);

3. Multiply the total amount of "loss" before application of any deductible, by the figure determined in step (2); and
4. Subtract the deductible from the figure determined in step (3).

We will pay the amount determined in step (4) or the stated value for the "auto" as shown in the BUSINESS AUTO DECLARATIONS, ITEM THREE, SCHEDULE OF COVERED AUTOS YOU OWN, whichever is less.

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Supporting Document Schedules

Bypassed -Name:	Uniform Transmittal Document- Property & Casualty	Review Status: Withdrawn	12/29/2008
Bypass Reason:	Form withdrawal; not applicable.		
	lgf		
Comments:			