

SERFF Tracking Number: JMIC-125936613 State: Arkansas  
Filing Company: Jewelers Mutual Insurance Company State Tracking Number: EFT \$50  
Company Tracking Number: 288008REGMAILFM  
TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine  
Product Name: Jewelry Dealers Program  
Project Name/Number: Reg Mail Updates PA/288008REGMAILFM

## Filing at a Glance

Company: Jewelers Mutual Insurance Company

Product Name: Jewelry Dealers Program	SERFF Tr Num: JMIC-125936613	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 09.0005 Other Commercial Inland Marine	Co Tr Num: 288008REGMAILFM	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins
	Author: Joyce Neubauer	Disposition Date: 12/11/2008
	Date Submitted: 12/09/2008	Disposition Status: Approved
Effective Date Requested (New): 01/15/2009		Effective Date (New): 01/15/2009
Effective Date Requested (Renewal): 01/15/2009		Effective Date (Renewal): 01/15/2009

State Filing Description:

## General Information

Project Name: Reg Mail Updates PA  
Project Number: 288008REGMAILFM

Status of Filing in Domicile: Authorized  
Domicile Status Comments: Approved on 12/8/08.

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 12/11/2008

Deemer Date:

State Status Changed: 12/11/2008

Corresponding Filing Tracking Number:

Filing Description:

This filing amends our Jewelry Dealers Program to reflect Registered Mail as a selected limit, which includes the policy included limits along with optional increased purchased limits in total.

## Company and Contact

SERFF Tracking Number: JMIC-125936613 State: Arkansas  
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**Filing Contact Information**

Joyce Neubauer, Senior Analyst – Regulatory jneubaue@jminsure.com  
 Compliance  
 24 Jewelers Park Dr. (800) 336-5642 [Phone]  
 Neenah, WI 54957 (920) 969-1267[FAX]

**Filing Company Information**

Jewelers Mutual Insurance Company CoCode: 14354 State of Domicile: Wisconsin  
 24 Jewelers Park Dr Group Code: Company Type:  
 Neenah, WI 54914 Group Name: State ID Number:  
 (800) 336-5642 ext. [Phone] FEIN Number: 39-0493890  
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**Filing Fees**

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Jewelers Mutual Insurance Company	\$0.00	12/09/2008	
Jewelers Mutual Insurance Company	\$50.00	12/11/2008	24483199

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	12/11/2008	12/11/2008

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Filing Fee sent via EFT	Note To Reviewer	Joyce Neubauer	12/11/2008	12/11/2008
filing fee paid	Note To Reviewer	Courtney Krause	12/11/2008	12/11/2008
Filing Fee	Note To Filer	Llyweyia Rawlins	12/10/2008	12/10/2008

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## **Disposition**

Disposition Date: 12/11/2008

Effective Date (New): 01/15/2009

Effective Date (Renewal): 01/15/2009

Status: Approved

Comment:

Rate data does NOT apply to filing.

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Approved	Yes
<b>Supporting Document</b>	Side by Siide JB004A	Approved	Yes
<b>Form</b>	Jewelers Block Amendment	Approved	Yes

*SERFF Tracking Number:*      *JMIC-125936613*                      *State:*                      *Arkansas*  
*Filing Company:*              *Jewelers Mutual Insurance Company*              *State Tracking Number:*      *EFT \$50*  
*Company Tracking Number:*      *288008REGMAILFM*  
*TOI:*                      *09.0 Inland Marine*                      *Sub-TOI:*                      *09.0005 Other Commercial Inland Marine*  
*Product Name:*              *Jewelry Dealers Program*  
*Project Name/Number:*      *Reg Mail Updates PA/288008REGMAILFM*

**Note To Reviewer**

**Created By:**

Joyce Neubauer on 12/11/2008 01:44 PM

**Subject:**

Filing Fee sent via EFT

**Comments:**

Llyweyia, Thank you for the opportunity to submit the appropriate \$50 form filing fee. It was a recording error on my part when I set up my filing documentation. I appreciate your note! Joy

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**Note To Reviewer**

**Created By:**

Courtney Krause on 12/11/2008 01:40 PM

**Subject:**

filing fee paid

**Comments:**

We have used EFT to pay the \$50 filing fee.

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**Note To Filer**

**Created By:**

Llyweyia Rawlins on 12/10/2008 08:51 AM

**Subject:**

Filing Fee

**Comments:**

Hello Joyce

There is a form filing fee of \$50 for all Arkansas form filings. You can make payment by EFT or payment check. When can we expect payment on this filing?

Thank You

Llyweyia Rawlins

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## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Jewelers Block Amendment	JB004A	11-08	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 JB004A ed 06-05 Previous Filing #: 288005RMAILFM 01		JB004A 11-08 Jewelers Block Amendment.pdf

The Jewelers Block coverages are amended as follows:

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**PROPERTY NOT COVERED AND EXCLUSIONS**

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Item 3. is deleted and replaced by the following:

3. At any exhibition promoted or financially assisted by any jewelry trade association away from the “described premises”, except as provided in the EXTENSIONS OF COVERAGE section unless endorsed to the policy.

Item 4. is deleted.

---

**EXTENSIONS OF COVERAGE**

---

Item 2. is deleted.

The following items are added.

**Transit to and from the U.S. Postal Service** – “We” cover property in transit by “you”, “your” employee, or a commissioned salesperson to or from the U.S. Postal Service up to a limit of \$\_\_\_\_\_. This limit applies to any one loss involving an individual or two or more individuals traveling together. A \$1,000 deductible will apply to this extension only. (This does not increase the limits for item 2.d. of the Declarations.)

**Registered Buyer** – “We” cover property while at any exhibition promoted or financially assisted by any jewelry trade association away from the “described premises” where you are a registered buyer up to a limit of \$25,000. A \$1,000 deductible will apply to this extension only.

**Other Jewelers’ Goods** – Subject to the limits of insurance shown on the Declarations Page and in the event of a covered loss:

“We” cover jewels, jewelry, precious and semiprecious stones, and precious metals and alloys that are usual to “your” “business” and have been delivered or entrusted to “you” by others in the jewelry “business”.

**Accounting Expense** – “We” will pay up to \$1,500 to cover accounting expenses of a retained accounting firm that “you” incur to present a claim for loss of property covered from a covered peril. “You” must contact “us” to authorize these expenses in advance.

“We” do not pay for:

- a. any expenses incurred under the Appraisal provisions in the Valuation of Losses section of this policy, or
- b. any public adjusters’ fees.

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## **Rate Information**

Rate data does NOT apply to filing.

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Product Name: Jewelry Dealers Program  
Project Name/Number: Reg Mail Updates PA/288008REGMAILFM

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-  
Property & Casualty **Review Status:** Approved 12/11/2008

**Comments:**

**Attachment:**

AR industry\_rates\_pc\_trans. doc.pdf

**Satisfied -Name:** Side by Siide JB004A **Review Status:** Approved 12/11/2008

**Comments:**

**Attachment:**

SBS of JB004A 11-08 to 06-05.pdf

### Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b> a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <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> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

<b>3. Group Name</b>	<b>Group NAIC #</b>

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Jeweler Mutual Insurance	WI	000-14354	39-0493890	

<b>5. Company Tracking Number</b>	288008REGMAILFM
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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	Joyce M Neubauer

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

9. Type of Insurance (TOI)	Inland Marine
10. Sub-Type of Insurance (Sub-TOI)	Commercial Inland Marine
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Jewelry Dealers Program
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" 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: 1/15/09      Renewal: 1/15/09
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	12/9/08
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

## Property & Casualty Transmittal Document—

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	288008REGMAILFM
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<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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To continue to meet the needs of our policyholders, we are amending the Registered Mail Shipments coverage to a selected limit basis in order to meet the needs of the market and simplify the process for policyholders. A selected limit (registered mail coverage in total) will consist of policy included limits and optional purchased limits providing the available coverage limits for Registered Mail Shipments.

The rating method remains unchanged should the insured elect optional coverage limits above the included policy limits. The rating method is a standardized method and has not changed; therefore, there is no rate or rule impact as a result of this filing.

The main objective of this filing documentation is to submit a revised form for our jewelry dealers program. Form comparison of these changes are identified in side by side attachments.

Within our *Jewelers Block program* – the Registered Mail Shipments selected limit will be shown on the endorsement JB004A Ed 11-08. This new form replaces JB008 06-05 previously filed and approved in 2005 under our filing number #288005RMAILFR01.

**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 #: NA**  
**Amount: NA**

**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.)**

PC TD-1 pg 2 of 2

## FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)  
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	288008REGMAILFM
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<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> <small>(Company tracking number of rate/rule filing, if applicable)</small>	Not applicable
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3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Jewelers Amendatory Endorsement	JB004A Ed 11-08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	JB008 Ed 06-05	288005RMAIL FR01 or FM01
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		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

## 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.)**

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>NA</b>
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<b>2.</b>	<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	<b>No rate filing</b>
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Rate Increase     
  Rate Decrease     
  Rate Neutral (0%)

<b>3.</b>	<b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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<b>4a.</b>	<b>Rate Change by Company (As Proposed)</b>
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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)

<b>4b.</b>	<b>Rate Change by Company (As Accepted) For State Use Only</b>
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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	Minimum % Change

<b>5.</b>	<b>Overall Rate Information (Complete for Multiple Company Filings only)</b>
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		COMPANY USE	STATE USE
<b>5a</b>	<b>Overall percentage rate indication (when applicable)</b>		
<b>5b</b>	<b>Overall percentage rate impact for this filing</b>		
<b>5c</b>	<b>Effect of Rate Filing – Written premium change for this program</b>		
<b>5d</b>	<b>Effect of Rate Filing – Number of policyholders affected</b>		

<b>6.</b>	<b>Overall percentage of last rate revision</b>	
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<b>7.</b>	<b>Effective Date of last rate revision</b>	
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<b>8.</b>	<b>Filing Method of Last filing (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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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 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	

The Jewelers Block coverages are amended as follows:

---

**PROPERTY NOT COVERED AND EXCLUSIONS**

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Item 3. is deleted and replaced by the following:

3. At any exhibition promoted or financially assisted by any jewelry trade association away from the “described premises”, except as provided in the EXTENSIONS OF COVERAGE section unless endorsed to the policy.

Item 4. is deleted.

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**EXTENSIONS OF COVERAGE**

---

Item 2. is deleted.

The following items are added.

**Transit to and from the U.S. Postal Service** – “We” cover property in transit by “you”, “your” employee, or a commissioned salesperson to or from the U.S. Postal Service up to a limit of ~~\$75,000~~ \_\_\_\_\_. This limit applies to any one loss involving an individual or two or more individuals traveling together. A \$1,000 deductible will apply to this extension only. (This does not increase the limits for item 2.d. of the Declarations.)

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- a. any expenses incurred under the Appraisal provisions in the Valuation of Losses section of this policy, or
- b. any public adjusters’ fees.