

SERFF Tracking Number: SMPJ-125941693 State: Arkansas
Filing Company: Sompo Japan State Tracking Number: #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Filing at a Glance

Company: Sompo Japan

Product Name: General Liability SERFF Tr Num: SMPJ-125941693 State: Arkansas
TOI: 17.0 Other Liability-Occ/Claims Made SERFF Status: Closed State Tr Num: #86014 \$50
Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: 08-GL-154 State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Edith Roberts
Author: Mary Lynn Teel Disposition Date: 12/19/2008
Date Submitted: 12/11/2008 Disposition Status: Approved
Effective Date Requested (New): 02/01/2009 Effective Date (New):
Effective Date Requested (Renewal): 02/01/2009 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Extended Product Warranty Program Status of Filing in Domicile: Not Filed
Project Number: 08-GL-154 Domicile Status Comments: N/A
Reference Organization: N/A Reference Number: N/A
Reference Title: N/A Advisory Org. Circular: N/A
Filing Status Changed: 12/19/2008
State Status Changed: 12/19/2008 Deemer Date:
Corresponding Filing Tracking Number: N/A
Filing Description:

We are introducing a new amendatory endorsement; SEW 01 026 (08-2008 ed.) ~ Arkansas Changes. This is a mandatory attachment to all such policies written in Arkansas, and complies with Arkansas requirements for Extended Service Warranty Providers.

Enclosed please find the required transmittals, filing forms and a copy of the endorsement for your review.

Our companion rule page containing the rules of usage for this endorsement does not require filing in your state.

SERFF Tracking Number: SMPJ-125941693 State: Arkansas
 Filing Company: Sompo Japan State Tracking Number: #86014 \$50
 Company Tracking Number: 08-GL-154
 TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
 Product Name: General Liability
 Project Name/Number: Extended Product Warranty Program/08-GL-154

Company and Contact

Filing Contact Information

Mary Lynn Teel, State Filings Analyst mteel@sompo-japan-us.com
 13850 Ballantyne Corporate Place (704) 759-2158 [Phone]
 Charlotte, NC 28277-2711 (704) 759-2542[FAX]

Filing Company Information

Sompo Japan CoCode: 11126 State of Domicile: New York
 2 WFC, 43rd Floor Group Code: 3219 Company Type:
 225 Liberty St
 New York, NY 10281 Group Name: State ID Number:
 (212) 416-1200 ext. [Phone] FEIN Number: 13-2554270

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sompo Japan	\$0.00	12/11/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
86014	\$50.00	12/05/2008

SERFF Tracking Number: SMPJ-125941693 State: Arkansas
Filing Company: Sompo Japan State Tracking Number: #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	12/19/2008	12/19/2008

SERFF Tracking Number: SMPJ-125941693 *State:* Arkansas
Filing Company: Sompo Japan *State Tracking Number:* #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made *Sub-TOI:* 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Disposition

Disposition Date: 12/19/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SMPJ-125941693 *State:* Arkansas
Filing Company: Sompo Japan *State Tracking Number:* #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made *Sub-TOI:* 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	No
Form	Arkansas Changed	Approved	No

SERFF Tracking Number: SMPJ-125941693 State: Arkansas
 Filing Company: Sompo Japan State Tracking Number: #86014 \$50
 Company Tracking Number: 08-GL-154
 TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
 Product Name: General Liability
 Project Name/Number: Extended Product Warranty Program/08-GL-154

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Arkansas Changed	SEW 01 026	08-2008	Endorsement/Amendment/Conditions New			SEW 01 026 _08-2008 ed._ ~ Arkansas Changes.pdf



ARKANSAS CHANGES

This endorsement modifies coverage provided under the following:

CONTRACTUAL LIABILITY COVERAGE FOR EXTENDED PRODUCT WARRANTY

The following condition is added to **SECTION IV – CONDITIONS:**

Nonperformance By You

In the event covered service is not provided by **you** within sixty (60) days of proof of loss by the service contract holder, the service contract holder is entitled to apply directly to **us**.

This endorsement forms a part of:

Policy Number:

Insured:

Effective Date:

SERFF Tracking Number: SMPJ-125941693 *State:* Arkansas
Filing Company: Sompo Japan *State Tracking Number:* #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made *Sub-TOI:* 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: SMPJ-125941693 State: Arkansas
Filing Company: Sompo Japan State Tracking Number: #86014 \$50
Company Tracking Number: 08-GL-154
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
Product Name: General Liability
Project Name/Number: Extended Product Warranty Program/08-GL-154

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status: Approved 12/19/2008

Comments:

Attachments:

PCTD-1forms.pdf

AR FFS-1.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 border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">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					

3. Group Name	Group NAIC #
N/A	3219

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Sompo Japan Ins. Co. of America	New York	11126	13-2554270	AR

5. Company Tracking Number	08-GL-154
-----------------------------------	------------------

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Mary Lynn Teel 13850 Ballantyne Corporate Place Suite 200 Charlotte, NC 28277	State Filings Analyst	704-759-2158	704-759-2542	mteel@sompo-japan-us.com

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Mary Lynn Teel

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

9.	Type of Insurance (TOI)	17.0 Other Liability-Occ/Claims Made
10.	Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12.	Company Program Title (Marketing title)	Commercial Lines - General Liability Extended Product Warranty 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: 02/01/2009 Renewal: 02/01/2009

Property & Casualty Transmittal Document---

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	12/11/2008
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Disapproved

20.	This filing transmittal is part of Company Tracking #	08-GL-154
------------	--	-----------

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

We are introducing a new amendatory endorsement; **SEW 01 026 (08-2008 ed.) ~ Arkansas Changes**. This is a mandatory attachment to all such policies written in Arkansas, and complies with Arkansas requirements for Extended Service Warranty Providers.

Enclosed please find the required transmittals, filing forms and a copy of the endorsement for your review.

Our companion rule page containing the rules of usage for this endorsement does not require filing in your state.

We trust this submission will prove satisfactory and respectfully request your approval for policies written/effective on or after February 1, 2009.

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]
<p>Check #: 86014 Amount: \$50.00</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

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

Effective March 1, 2007

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.)

1.	This filing transmittal is part of Company Tracking #	08-GL-154			
2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>	N/A			
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	Arkansas Changes	SEW 01 026 (08-2008 ed.)	<input checked="" 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		
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		