

SERFF Tracking Number: AGNY-125427096 State: Arkansas
Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AIC-07-GL-13
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
Product Name: Storage Tank Program
Project Name/Number: Storage Tank Program/AIC-07-GL-13

Filing at a Glance

Company: Commerce and Industry Insurance Company

Product Name: Storage Tank Program SERFF Tr Num: AGNY-125427096 State: Arkansas
TOI: 17.1 Other Liability - Claims Made Only SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 17.1011 Environmental Pollution Liability Co Tr Num: AIC-07-GL-13 State Status: Fees verified and received
Liability
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
Author: Janine Graham Disposition Date: 02/07/2008
Date Submitted: 01/15/2008 Disposition Status: Approved
Effective Date Requested (New): 02/17/2008 Effective Date (New):
Effective Date Requested (Renewal): 02/17/2008 Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Storage Tank Program Status of Filing in Domicile: Not Filed
Project Number: AIC-07-GL-13 Domicile Status Comments:
Reference Organization: N/A Reference Number: N/A
Reference Title: N/A Advisory Org. Circular: N/A
Filing Status Changed: 02/07/2008
State Status Changed: 02/07/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:

Commerce and Industry Insurance Company has on file with your Department their Storage Tank Program. The Company submits, for your review and approval, eight (8) endorsements to be used with their Storage Tank Third-Party Liability, Corrective Action and Clean-Up Costs Policy - Form No. 81106 (10/02).

Please refer to the attached Forms Listing for information about the forms included in this submission.

The endorsements with a premium impact will be rated using the rating guide on file with your Department (our filing no.

SERFF Tracking Number: AGNY-125427096 State: Arkansas
 Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AIC-07-GL-13
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
 Product Name: Storage Tank Program
 Project Name/Number: Storage Tank Program/AIC-07-GL-13
 AIC-02-GL-09).

Company and Contact

Filing Contact Information

Janine Graham, Filings Analyst Janine.Graham@AIG.com
 175 Water Street (212) 458-7463 [Phone]
 New York, NY 10038 (212) 458-7077[FAX]

Filing Company Information

Commerce and Industry Insurance Company CoCode: 19410 State of Domicile: New York
 70 Pine Street Group Code: Company Type:
 New York, NY 10270 Group Name: State ID Number:
 (212) 770-7000 ext. [Phone] FEIN Number: 13-1938623

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: (\$50 X 1 Form Filing) X 1 Group = \$50.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Commerce and Industry Insurance Company	\$50.00	01/15/2008	17491365

SERFF Tracking Number: AGNY-125427096 State: Arkansas
Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AIC-07-GL-13
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
Product Name: Storage Tank Program
Project Name/Number: Storage Tank Program/AIC-07-GL-13

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	02/07/2008	02/07/2008

SERFF Tracking Number: *AGNY-125427096* *State:* *Arkansas*
Filing Company: *Commerce and Industry Insurance Company* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *AIC-07-GL-13*
TOI: *17.1 Other Liability - Claims Made Only* *Sub-TOI:* *17.1011 Environmental Pollution Liability*
Product Name: *Storage Tank Program*
Project Name/Number: *Storage Tank Program/AIC-07-GL-13*

Disposition

Disposition Date: 02/07/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AGNY-125427096 State: Arkansas
 Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AIC-07-GL-13
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
 Product Name: Storage Tank Program
 Project Name/Number: Storage Tank Program/AIC-07-GL-13

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes
Supporting Document	Form Listing	Approved	Yes
Form	Dedicated Limits Endorsement	Approved	Yes
Form	Split Deductible Endorsement	Approved	Yes
Form	Deductible Endorsement	Approved	Yes
Form	Deletion Endorsement	Approved	Yes
Form	Extended Reporting Period (Site Specific) Endorsement	Approved	Yes
Form	Limit of Liability Endorsement	Approved	Yes
Form	Minimum Earned Premium Endorsement	Approved	Yes
Form	Storage Tank Site Addition/Deletion Endorsement	Approved	Yes

SERFF Tracking Number: AGNY-125427096 State: Arkansas
 Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AIC-07-GL-13
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
 Product Name: Storage Tank Program
 Project Name/Number: Storage Tank Program/AIC-07-GL-13

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Dedicated Limits Endorsement	87408	(12/06)	Endorsement/New Amendment/Conditions		0.00	87408 (12-06) C12939 - Dedicated Limits End't.pdf
Approved	Split Deductible Endorsement	95915	(9/07)	Endorsement/New Amendment/Conditions		0.00	95915 (9-07) C13215 - Split Deductible End't.pdf
Approved	Deductible Endorsement	83597	(11/03)	Endorsement/New Amendment/Conditions		0.00	83597 (11-03) C12193 - Deductible End't .pdf
Approved	Deletion Endorsement	83600	(11/03)	Endorsement/New Amendment/Conditions		0.00	83600 (11-03) C12196 Deletion End't.pdf
Approved	Extended Reporting Period (Site Specific) Endorsement	83596	(11/03)	Endorsement/New Amendment/Conditions		0.00	83596 (11-03) C12192 - Extended Reporting Period (Site Specific) End't.pdf
Approved	Limit of Liability Endorsement	83599	(11/03)	Endorsement/New Amendment/Conditions		0.00	83599 (11-03) C12195 - Limit of Liability End't.pdf
Approved	Minimum Earned Premium Endorsement	86330	(7/04)	Endorsement/New Amendment/Conditions		0.00	86330 (7-04) C12344 - Minimum

SERFF Tracking Number: AGNY-125427096 State: Arkansas
 Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
 Company Tracking Number: AIC-07-GL-13
 TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
 Product Name: Storage Tank Program
 Project Name/Number: Storage Tank Program/AIC-07-GL-13

				ons		Earned Premium End't.pdf
Approved	Storage Tank Site Addition/Deletion Endorsement	83601	(11/03)	Endorseme New nt/Amendm ent/Condi ons	0.00	83601 (11- 03) CI2197 - Storage Tank and Site Addition- Deletion End't.pdf

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DEDUCTIBLE ENDORSEMENT

Solely with respect to the covered **Storage Tank System(s)** listed below, the amount stated in **Item 4. DEDUCTIBLE** of the Declarations is deleted in its entirety and replaced with the Deductible amount stated below for each corresponding covered **Storage Tank System**:

Site* #	Tank #	AST/ UST	Install Date	Capacity (Gallons)	Tank Construction	Policy Period		Retro Date	Deductible
						From:	To:		

Specimen

* Site #, name and address are located within the Site Schedule attached to the Policy

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DEDUCTIBLE ENDORSEMENT

In consideration of [an additional/a return] premium of \$_____, it is hereby agreed that **Item 4. DEDUCTIBLE** of the Declarations is deleted in its entirety and replaced with the following:

Item 4. DEDUCTIBLE: \$ _____ EACH INCIDENT

Specimen

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DELETION ENDORSEMENT

It is hereby agreed that for [an additional/a return] premium of \$ _____, Endorsement No. [], entitled [] is deleted in its entirety.

Specimen

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EXTENDED REPORTING PERIOD ENDORSEMENT

In consideration of an additional premium of \$ _____, it is hereby agreed that an Optional **Extended Reporting Period**, as described in **SECTION VII. EXTENDED REPORTING PERIOD FOR CLAIMS**, Paragraph B. **Optional Extended Reporting Period**, applies to **Storage Tank System(s)** as indicted below:

Site* #	Tank #	AST/ UST	Install Date	Capacity (Gallons)	Extended Period From:	Reporting To:
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Specimen

* Site #, name and address are located within the **Site Schedule** attached to the Policy.

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMIT OF LIABILITY ENDORSEMENT

In consideration of [an additional/a return] premium of \$ _____, it is hereby agreed that **Item 3. LIMIT OF LIABILITY** of the Declarations is deleted in its entirety and replaced with the following:

Item 3. LIMIT OF LIABILITY: \$ _____ EACH INCIDENT LIMIT
 \$ _____ AGGREGATE LIMIT

Specimen

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MINIMUM EARNED PREMIUM ENDORSEMENT

In consideration of the premium charged, it is a condition of this policy that in the event of cancellation of any coverage or the entire policy by the **Insured**, the premium shown on the Declarations page of this policy shall be subject to a minimum earned premium of \$.

Specimen

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

ENDORSEMENT NO.

This endorsement, effective 12:01 AM,

Forms a part of Policy No:

Issued to:

By:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

STORAGE TANK AND SITE ADDITION/DELETION ENDORSEMENT

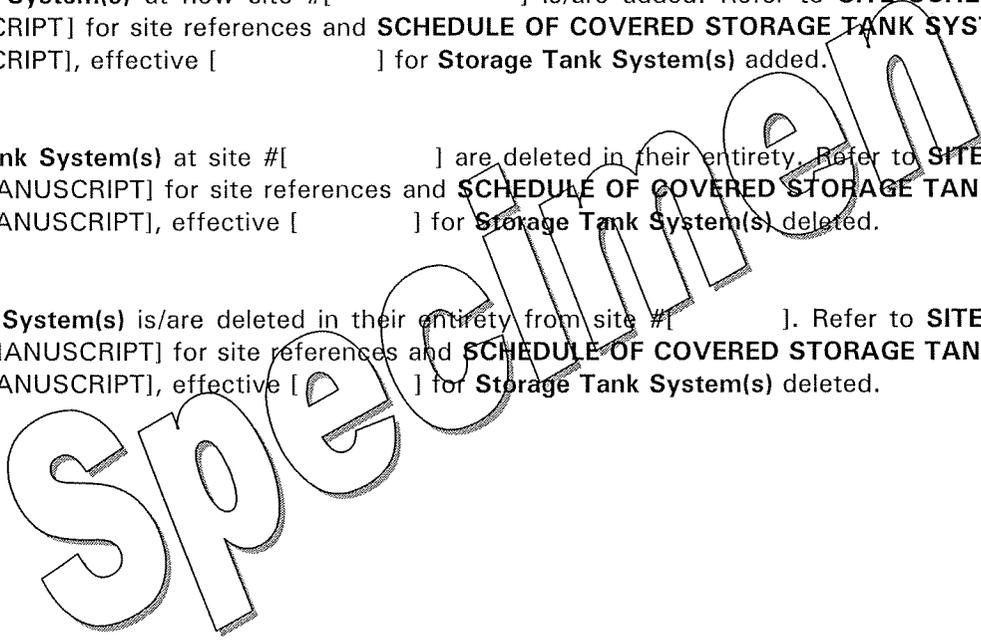
In consideration of [an additional/a return] premium of \$_____, it is hereby agreed that the policy is amended as reflected below only where an "x" is shown in the box provided:

[] **Storage Tank System(s)** is/are added to existing site(s) #[] . Refer to **SITE SCHEDULE**, [Form #81029/MANUSCRIPT] for site references and **SCHEDULE OF COVERED STORAGE TANK SYSTEMS**, [Form #81017/MANUSCRIPT], effective [] for **Storage Tank System(s)** added.

[] **Storage Tank System(s)** at new site #[] is/are added. Refer to **SITE SCHEDULE**, [Form #81029/MANUSCRIPT] for site references and **SCHEDULE OF COVERED STORAGE TANK SYSTEMS**, [Form #81017/MANUSCRIPT], effective [] for **Storage Tank System(s)** added.

[] All **Storage Tank System(s)** at site #[] are deleted in their entirety. Refer to **SITE SCHEDULE**, [Form #81029/MANUSCRIPT] for site references and **SCHEDULE OF COVERED STORAGE TANK SYSTEMS**, [Form #81017/MANUSCRIPT], effective [] for **Storage Tank System(s)** deleted.

[] **Storage Tank System(s)** is/are deleted in their entirety from site #[] . Refer to **SITE SCHEDULE**, [Form # 81029/MANUSCRIPT] for site references and **SCHEDULE OF COVERED STORAGE TANK SYSTEMS**, [Form #81017/MANUSCRIPT], effective [] for **Storage Tank System(s)** deleted.



All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE
or countersignature (in states where applicable)

SERFF Tracking Number: *AGNY-125427096* *State:* *Arkansas*
Filing Company: *Commerce and Industry Insurance Company* *State Tracking Number:* *EFT \$50*
Company Tracking Number: *AIC-07-GL-13*
TOI: *17.1 Other Liability - Claims Made Only* *Sub-TOI:* *17.1011 Environmental Pollution Liability*
Product Name: *Storage Tank Program*
Project Name/Number: *Storage Tank Program/AIC-07-GL-13*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: AGNY-125427096 State: Arkansas
Filing Company: Commerce and Industry Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AIC-07-GL-13
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1011 Environmental Pollution Liability
Product Name: Storage Tank Program
Project Name/Number: Storage Tank Program/AIC-07-GL-13

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Approved 02/07/2008

Comments:

Attachment:

01-15-08 AR PCTD-1 - Storage Tank.pdf

Satisfied -Name: Cover Letter
Review Status: Approved 02/07/2008

Comments:

Attachment:

01-15-08 AR - Cover Letter (Storage Tank Program).pdf

Satisfied -Name: Form Listing
Review Status: Approved 02/07/2008

Comments:

Attachment:

Form Listing - Storage Tank.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: New Business Renewal Business f. State Filing #: g. SERFF Filing #: h. Subject Codes
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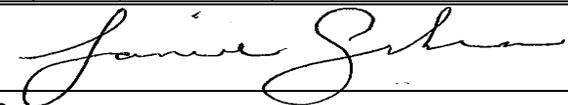
3. Group Name	Group NAIC #
American International Group	012

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Commerce and Industry Insurance Company	NY	19410	13-1938623	

5. Company Tracking Number	AIC-07-GL-13
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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
	Janine Graham 175 Water Street, 17 th Floor New York, New York 10038	Filing Analyst	(212) 458-7463	(212) 458-7077	janine.graham@aig.com

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

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

9. Type of Insurance (TOI)	17.1000 Other Liability – Claims Made Only
10. Sub-Type of Insurance (Sub-TOI)	17.1011 Environmental Pollution Liability
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Storage Tank 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: February 17, 2008 Renewal: February 17, 2008
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	January 15, 2008
19. Status of filing in domicile	<input checked="" 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 #	AIC-07-GL-13
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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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Commerce and Industry Insurance Company has on file with your Department their Storage Tank Program. The Company submits, for your review and approval, eight (8) endorsements to be used with their Storage Tank Third-Party Liability, Corrective Action and Clean-Up Costs Policy - Form No. 81106 (10/02).

Please refer to the attached Forms Listing for information about the form included in this submission.

The endorsements with a premium impact will be rated using the rating guide on file with your Department (our filing no. AIC-02-GL-09).

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

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.)

1.	This filing transmittal is part of Company Tracking #	AIC-07-GL-13
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2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if 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	Dedicated Limits Endorsement	87408 (12/06)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Split Deductible Endorsement	95915 (9/07)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	Deductible Endorsement	83597 (11/03)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04	Deletion Endorsement	83600 (11/03)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05	Extended Reporting Period (Site Specific) Endorsement	83596 (11/03)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06	Limit of Liability Endorsement	83599 (11/03)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07	Minimum Earned Premium Endorsement	86330 (7/04)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08	Storage Tank Site Addition/Deletion Endorsement	83601 (11/03)	<input checked="" 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		



American International Companies®

DBG Legal Services
State Filings Department
175 Water Street, 17th Floor
New York, NY 10038

January 15, 2008

Honorable Mike Pickens
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

RE: COMMERCE AND INDUSTRY INSURANCE COMPANY

NAIC #012-19410 FEIN # 13-1938623

Storage Tank Program

Dedicated Limits Endorsement – Form No. 87408 (12/06)

Split Deductible Endorsement – Form No. 95915 (9/07)

Deductible Endorsement – Form No. 83597 (11/03)

Deletion Endorsement – Form No. 83600 (11/03)

Extended Reporting Period (Site Specific) Endorsement – Form No. 83596 (11/03)

Limit of Liability Endorsement – Form No. 83599 (11/03)

Minimum Earned Premium Endorsement – Form No. 86330 (7/04)

Storage Tank Site Addition/Deletion Endorsement – Form No. 83601 (11/03)

Our Filing Number: AIC-07-GL-13

Dear Commissioner Pickens:

Commerce and Industry Insurance Company has on file with your Department their Storage Tank Program. The Company submits, for your review and approval, eight (8) endorsements to be used with their Storage Tank Third-Party Liability, Corrective Action and Clean-Up Costs Policy - Form No. 81106 (10/02).

Please refer to the attached Forms Listing for information about the forms included in this submission.

This filing will be rated using the rating guide on file with your Department (our filing no. AIC-02-GL-09).

We wish to make this filing effective for all policies effective on or after February 17, 2008, or the earliest date permitted by your Department.

Your favorable consideration and approval are respectfully requested.

Sincerely,

Janine Graham
Filings Analyst

State Filings Department

Phone: (212) 458-7463

Fax: (212) 458-7077

Email: janine.graham@aig.com

Form Listing - AIC-07-GL-13

	Form Title	Form Number	Form Type	New or Replacement	Form No. Being Replaced	Mandatory or Optional	Restricts, Broadens or Clarifies	Rate or Premium Impact	Description of Form
1	Dedicated Limits End't	87408 (12/06)	E	New		Optional	Broadens	Y	Dedicated Limits for USTs & ASTs
2	Split Deductible End't	95915 (9/07)	E	New		Optional	Broadens	Y	Variable deductible by tank
3	Deductible End't	83597 (11/03)	E	New		Optional	Broadens	Y	Amend policy deductible mid-term
4	Deletion End't	83600 (11/03)	E	New		Optional	Broadens	Y	Delete an Endorsment
5	Extended Reporting Period (Site Specific) End't	83596 (11/03)	E	New		Optional	Broadens	Y	ERP for specified sites
6	Limit of Liability End't	83599 (11/03)	E	New		Optional	Broadens	Y	Amend policy limit mid-term
7	Minimum Earned Premium End't	86330 (7/04)	E	New		Optional	Clarifies	N	Specify policy MEP
8	Storage Tank Site Addition/Deletion End't	83601 (11/03)	E	New		Optional	Broadens	Y	Mid-term changes to tank schedule

A = Application
D = Declarations
E = Endorsement
P = Policy
O = Other (Please explain)

Yes or No