

SERFF Tracking Number: ARKS-125482177 State: Arkansas  
Filing Company: 11126 - Sompo Japan Insurance Company of America State Tracking Number: \$0  
Company Tracking Number: 08-ML-9001  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: n/a  
Project Name/Number: /

## Filing at a Glance

Company: 11126 - Sompo Japan Insurance Company of America

Product Name: n/a	SERFF Tr Num: ARKS-125482177	State: Arkansas
TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: \$0
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: 08-ML-9001	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author:	Disposition Date: 02/22/2008
	Date Submitted: 02/11/2008	Disposition Status: Accepted For Informational Purposes
Effective Date Requested (New): 02/22/2008		Effective Date (New): 02/22/2008
Effective Date Requested (Renewal): 02/22/2008		Effective Date (Renewal): 02/22/2008

State Filing Description:

## General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 02/22/2008	
State Status Changed: 02/11/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Disclosure Notice for Terrorism Risk Insurance	

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Product Name: n/a  
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## Company and Contact

### Filing Contact Information

NA NA, NA@NA.com  
NA (123) 555-4567 [Phone]  
NA, AR 00000

### Filing Company Information

11126 - Sompo Japan Insurance Company of America CoCode: 11126 State of Domicile: Arkansas  
No Address Group Code: Company Type:  
City, AR 99999 Group Name: State ID Number:  
(999) 999-9999 ext. [Phone] FEIN Number: 99-9999999  
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## Filing Fees

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

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Llyweyia Rawlins Informational Purposes		02/22/2008	02/22/2008

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*TOI:* 01.0 Property      *Sub-TOI:* 01.0001 Commercial Property (Fire and Allied  
Lines)  
*Product Name:* n/a  
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## **Disposition**

Disposition Date: 02/22/2008

Effective Date (New): 02/22/2008

Effective Date (Renewal): 02/22/2008

Status: Accepted For Informational Purposes

Comment: Disclosure Notice for Terrorism Risk Insurance

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
Supporting Document	ARKS-125482177	Approved	No

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## **Rate Information**

Rate data does NOT apply to filing.

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TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: n/a  
Project Name/Number: /

## Supporting Document Schedules

**Satisfied -Name:** ARKS-125482177 **Review Status:** Approved 02/25/2008  
**Comments:**  
**Attachment:**  
ARKS-125482177.pdf



ARKS-125482177

LR

Sompo Japan Insurance Company of America

13850 Ballantyne Corporate Place, Suite 200  
Charlotte, NC 28277  
Tel: 704-759-2200  
Fax: 704-759-2542  
www.sompo-japan-us.com

February 8, 2008

Approved until withdrawn  
or revoked

Honorable Julie Benafield Bowman  
Commissioner of Insurance  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock, Arkansas 72201-1904

FEB 22 2008

Arkansas Insurance Department

By:

*AK - accepted informational purpose*

Re: **COMMERCIAL LINES  
COMMERCIAL INTERLINE  
SUBMISSION OF DISCLOSURE NOTICE FOR TERRORISM RISK INSURANCE  
PROGRAM REAUTHORIZATION ACT OF 2007 (TRIPRA)  
COMPANY FILING # 08-ML-9001  
SOMPO JAPAN INSURANCE COMPANY OF AMERICA #3219-11126**

To Whom It May Concern:

On behalf of the above captioned company, we submit for your review our Disclosure Notice, **SIL PN 011 (01-2008 ed.) ~ Policyholder Notice - Notice of Terrorism Insurance Coverage**. Our Notice is based on the sample notice developed by the NAIC.

As of the date of this letter, we not aware of a bulletin issued from your state outlining the filing procedures for compliance with TRIPRA, but for consistency with the majority of other states, we are submitting this Notice for informational purposes. Please be advised that this Notice will be used with all policies for the applicable lines of insurance/programs written by Sompo:

- Commercial Property
- Equipment Breakdown
- Commercial Crime and Fidelity
- Commercial Inland Marine
- General Liability
- Commercial Multiperil
- Commercial Umbrella
- Commercial Output
- Non-Filed Inland Marine

RECEIVED

FEB 11 2008

PROPERTY AND CASUALTY DIVISION  
ARKANSAS INSURANCE DEPARTMENT

Enclosed please find the Expedited Filing Transmittal Document for Terrorism Risk Insurance Forms and Pricing and a copy of the Disclosure Notice for your review.

We respectfully request your earliest acknowledgment of this submission.

Should you have any questions regarding this submission, you may contact me at mteel@sompo-japan-us.com or at the phone number shown below.

**EXPEDITED FILING TRANSMITTAL DOCUMENT  
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

This page applies to the following state(s) ARKANSAS

Indicate Type of Filing
<input type="checkbox"/> Filing Related to <i>Certified Losses</i>
<input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i>
<input checked="" type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
Sompo Japan Insurance Company of America	New York	3219-11129	13-2554270

**Contact Info for Filer**

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Mary Lynn Teel, State Filings Analyst 13850 Ballantyne Corporate Place Suite 200 Charlotte, NC 28277-2711	704-759-2158	704-759-2542	mteel@sompo-japan-us.com

**Filing information**

Line of Insurance (see attachment)	Commercial Interline
Company Program Title (Marketing title) (if applicable)	Commercial Lines
Filing Type ** see note below	Form Filing
This application is used with:	N/A
Effective Date Requested	Earliest date possible
Filing date	02/08/2008
Company Tracking Number	08-ML-9001
Date filing approved in domiciliary state, if applicable	Pending

**RECEIVED**

FEB 11 2008

PROPERTY AND CASUALTY DIVISION  
ARKANSAS INSURANCE DEPARTMENT

	Component/Form Name /Description/Synopsis	Form # or Rate Page Include edition date	Replacement Or withdrawn?	If replacement, give form # or rate page(s) it replaces	Previous State Filing Number, if required by state
01	Policyholder Disclosure Notice of Terrorism Insurance Coverage	SIL PN 011 (01-2008 ed.)	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither	N/A	N/A
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

- X Is in compliance with the terms of the Terrorism Risk Insurance Act, as amended, and the laws of this state; and
- X Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.

M. Teel  
Signature

Mary Lynn Teel  
Print Name:

State Filings Analyst  
Title:



Sompo Japan Insurance Company of America

POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM INSURANCE COVERAGE

Table with 4 columns: Named Insured, Offer Date, Policy Number, Effective Date

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, as defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury—in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

DISCLOSURE OF FEDERAL PARTICIPATION:

WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

DISCLOSURE OF CAP ON LOSSES:

THE TERRORISM RISK INSURANCE ACT AS AMENDED CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR (January 1 - December 31) EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

ACCEPTANCE OR REJECTION OF TERRORISM INSURANCE COVERAGE:

Your signature and the return of this notice are required prior to binding related commercial insurance coverage. Premium is based on exposures at policy inception and may change if exposures change during the policy term.

- I hereby elect to purchase terrorism coverage for the prospective premium of: \$
I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

Insured: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

ADDITIONAL INFORMATION FOR PROPERTY and INLAND MARINE POLICIES ONLY:

In Standard Fire Policy (SFP) states, the mandated policy language provides some coverage for fire losses resulting from an act of terrorism. You can not reject this coverage. If you reported exposure in an SFP state and decline to purchase terrorism coverage you will be charged the premium for this coverage as shown below. Premium is based on exposures at policy inception and may change if exposure changes during the policy term.

SFP Premium: \$

This Notice does not form a part of your insurance contract. If there is any conflict between this Notice and the policy (including its endorsements), the provisions of the policy (including its endorsements) apply.

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