

SERFF Tracking Number: CHUB-125270257 State: Arkansas  
First Filing Company: Federal Insurance Company, ... State Tracking Number: AR-PC-07-025879  
Company Tracking Number: 06-CMQ-3-RR  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions Liability  
Product Name: CUSTOMARQ SERIES - E & O Market Segment  
Project Name/Number: E & O Market Segment/06-CMQ-3-RR

## Filing at a Glance

Companies: Federal Insurance Company, Great Northern Insurance Company, Pacific Indemnity Company, Vigilant Insurance Company

Product Name: CUSTOMARQ SERIES - E & O SERFF Tr Num: CHUB-125270257 State: Arkansas

Market Segment

TOI: 17.0 Other Liability - Claims  
Made/Occurrence

SERFF Status: Closed

State Tr Num: AR-PC-07-025879

Sub-TOI: 17.0019 Professional Errors &  
Omissions Liability

Co Tr Num: 06-CMQ-3-RR

State Status: Fees verified and  
received

Filing Type: Rule

Co Status:

Reviewer(s): Betty Montesi, Edith  
Roberts, Brittany Yielding

Author: Karen Pender

Disposition Date: 02/27/2008

Date Submitted: 08/24/2007

Disposition Status: Filed

Effective Date Requested (New): 03/01/2008

Effective Date (New):

Effective Date Requested (Renewal): 03/01/2008

Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: E & O Market Segment

Status of Filing in Domicile: Authorized

Project Number: 06-CMQ-3-RR

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: 02/27/2008

State Status Changed: 02/27/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Filing CUSTOMARQ Error & Omissions Market Segment Rewrite. It consists of rate and rule manual pgs. IUn order to facilitate your review of this filing, we have included the following:

Rates and Rules Explanatory Memorandum;

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Checking Slip listing all proposed rules;  
 State Forms, where applicable.

Your approval will be appreciated for policies effective on and after March 1, 2008.

## Company and Contact

### Filing Contact Information

Jane Gutman, Unit Manager jgutman@chubb.com  
 202 Hall's Mill Road (908) 572-4422 [Phone]  
 Whitehouse Station, NJ 08889-1650 (908) 572-4820[FAX]

### Filing Company Information

Federal Insurance Company	CoCode: 20281	State of Domicile: Indiana
202 Hall's Mill Road	Group Code: 38	Company Type:
P.O. Box 1650		
Whitehouse Station, NJ 08889-1650	Group Name:	State ID Number:
(908) 572-4726 ext. [Phone]	FEIN Number: 13-1963496	

Great Northern Insurance Company	CoCode: 20303	State of Domicile: Minnesota
202 Hall's Mill Road	Group Code: 38	Company Type:
P.O. Box 1650		
Whitehouse Station, NJ 08889-1650	Group Name:	State ID Number:
(908) 572-4726 ext. [Phone]	FEIN Number: 41-0729473	

Pacific Indemnity Company	CoCode: 20346	State of Domicile: Wisconsin
202 Hall's Mill Road	Group Code: 38	Company Type:
P.O. Box 1650		
Whitehouse Station, NJ 08889-1650	Group Name:	State ID Number:
(908) 572-4726 ext. [Phone]	FEIN Number: 95-1078160	

Vigilant Insurance Company	CoCode: 20397	State of Domicile: New York
202 Hall's Mill Road	Group Code: 38	Company Type:
P.O. Box 1650		

SERFF Tracking Number: CHUB-125270257

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17.0019 Professional Errors & Omissions  
Liability

Product Name: CUSTOMARQ SERIES - E & O Market Segment

Project Name/Number: E & O Market Segment/06-CMQ-3-RR

Whitehouse Station, NJ 08889-1650  
(908) 572-4726 ext. [Phone]

Group Name:  
FEIN Number: 13-1963495  
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State ID Number:

SERFF Tracking Number: CHUB-125270257 State: Arkansas  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$125.00  
 Retaliatory? No  
 Fee Explanation: \$25.00 for rule section and \$100.00 for independent rate section per directions from state of Arkansas  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Federal Insurance Company	\$0.00	08/24/2007	
Great Northern Insurance Company	\$0.00	08/24/2007	
Pacific Indemnity Company	\$0.00	08/24/2007	
Vigilant Insurance Company	\$0.00	08/24/2007	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
00363725	\$125.00	07/30/2007

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	02/27/2008	02/27/2008

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Edith Roberts	02/12/2008	02/12/2008			
Pending Industry Response	Edith Roberts	08/28/2007	08/28/2007	Karen Pender	02/21/2008	02/21/2008

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## Disposition

Disposition Date: 02/27/2008  
 Effective Date (New):  
 Effective Date (Renewal):  
 Status: Filed  
 Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
Federal Insurance Company	0.000%	\$0	188	\$1,386,502	0.000%	0.000%	0.000%
Great Northern Insurance Company	0.000%	\$0	82	\$438,697	0.000%	0.000%	0.000%
Pacific Indemnity Company	0.000%	\$0	17	\$113,888	0.000%	0.000%	0.000%
Vigilant Insurance Company	0.000%	\$0	11	\$12,489	0.000%	0.000%	0.000%

**Overall Rate Information for Multiple Company Filings**  
**Overall Percentage Rate Indicated For This Filing**

0.000%

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<b>Overall Percentage Rate Impact For This Filing</b>	0.000%
<b>Effect of Rate Filing-Written Premium Change For This Program</b>	\$0
<b>Effect of Rate Filing - Number of Policyholders Affected</b>	298



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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	Ark Ex Memos for rate-rule	Filed	Yes
Supporting Document	Cover Letter Arkansas	Filed	Yes
Rate	V.A. - Commercial Errors or Omissions Liability - Products and Services	Filed	Yes
Rate	V.A. Commercial Errors or Omissions Liability - Designated Services	Filed	Yes
Rate	V.A. Commercial Errors or Omissions Liability - Printing Services	Filed	Yes
Rate	V.A. Printing Correction Expenses - E & O	Filed	Yes
Rate	V.A. Commercial Errors or Omissions Liability Classification	Filed	Yes
Rate	V.A. Condition - Minimum Earned Premium - E & O	Filed	Yes
Rate	V.33 - Interior Designers Errors or Omissions	Filed	Yes
Rate	Arkansas Mandatory Forms Section XVI -	Filed	Yes
Rate	Arkansas Errors or Omissions Rate and Supplementary	Filed	Yes
Rate	Section V. Metalworkers Errors or Omissions (Rule V.38 only)	Filed	Yes
Rate	Section V. Plasticworkers Errors or Omissions (Rule 47 only)	Filed	Yes
Rate	Section V. Printers Errors or Omissions Including Correction of Work (Rule V.50 only)	Filed	Yes
Rate	Section V. Errors or Omissions Excluding Correction of Work (Rule V51 only)	Filed	Yes
Rate	Arkansas exceptions Section XV	Filed	Yes

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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 02/12/2008  
Submitted Date 02/12/2008  
Respond By Date 02/22/2008

Dear Jane Gutman,

This will acknowledge receipt of the captioned filing.

Please respond within ten (10) days, or I must disapprove for lack of response.

Please feel free to contact me if you have questions.

Sincerely,

Edith Roberts

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Project Name/Number: E & O Market Segment/06-CMQ-3-RR

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 08/28/2007  
Submitted Date 08/28/2007

Respond By Date

Dear Jane Gutman,

This will acknowledge receipt of the captioned filing.

These rate pages contain "a" rates and "refer to company". Please add rule that an individual risk filing will be made to the Arkansas Insurance Department for any risk written under these categories, pursuant to AR Code Anno. 23-67-211 (a) (1) which requires the filing of final rates for this line of insurance.

Please feel free to contact me if you have questions.

Sincerely,

Edith Roberts

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 02/21/2008  
Submitted Date 02/21/2008

Dear Edith Roberts,

### Comments:

#### Response 1

Comments: This is in response to your Objection Letter of August 28, 2007 concerning the above captioned filing. Enclosed is a copy of previously approved Arkansas Exceptions, Section XV - Page 6.0 (Ed. 6/9/98). Please refer to Rule XV.6.A which states that we will file an individual risk filing with the Arkansas Insurance Department for each classification or coverage that is "a" rated.

I trust this responds to your concerns and places you in a position to approve our filing effective August 1, 2008. If additional information is needed or if I can be of further assistance, please do not hesitate to contact me.

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Jane Gutman

**Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

**Rate/Rule Schedule Item Changes**

<b>Exhibit Name</b>	<b>Rule # or Page #</b>	<b>Rate Action</b>	<b>Previous State Filing #</b>
Arkansas exceptions Section XV	Page 6.0 (Edition 6/9/98)	New	

Sincerely,  
Karen Pender

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## Rate Information

Rate data applies to filing.

**Filing Method:** Prior Approval  
**Rate Change Type:** Neutral  
**Overall Percentage of Last Rate Revision:** 0.000%  
**Effective Date of Last Rate Revision:** 07/01/2008  
**Filing Method of Last Filing:** Prior Approval

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
Federal Insurance Company	0.000%	0.000%	\$0	188	\$1,386,502	0.000%	0.000%
Great Northern Insurance Company	0.000%	0.000%	\$0	82	\$438,697	0.000%	0.000%
Pacific Indemnity Company	0.000%	0.000%	\$0	17	\$113,888	0.000%	0.000%
Vigilant Insurance Company	0.000%	0.000%	\$0	11	\$12,489	0.000%	0.000%

<i>SERFF Tracking Number:</i>	<i>CHUB-125270257</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Federal Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-025879</i>
<i>Company Tracking Number:</i>	<i>06-CMQ-3-RR</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0019 Professional Errors &amp; Omissions Liability</i>
<i>Product Name:</i>	<i>CUSTOMARQ SERIES - E &amp; O Market Segment</i>		
<i>Project Name/Number:</i>	<i>E &amp; O Market Segment/06-CMQ-3-RR</i>		

### **Overall Rate Information for Multiple Company Filings**

<b>Overall % Rate Indicated:</b>	0.000%
<b>Overall Percentage Rate Impact For This Filing:</b>	0.000%
<b>Effect of Rate Filing - Written Premium Change For This Program:</b>	\$0
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	298

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## Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Number:	Attachments
Filed	V.A. - Commercial Errors or Omissions Liability - Products and Services	Page 1.0 (Ed. 02-15-06)	New		Sect05a_WR6906_CommE&O_ProductsServices_021506.pdf
Filed	V.A. Commercial Errors or Omissions Liability - Designated Services	Page 1.0 (Ed. 02-15-06)	New		Sect05a_WR6906_CommE&O_DesignatedServices_021506.pdf
Filed	V.A. Commercial Errors or Omissions Liability - Printing Services	Page 1.0 (Ed. 02-15-06)	New		Sect05a_WR6906_CommE&O_PrintingServices_021506.pdf
Filed	V.A. Printing Correction Expenses - E & O	Page 1.0 (Ed. 02-15-06)	New		Sect05a_WR6906_PrintingCorrectionExpenses_021506.pdf
Filed	V.A. Commercial Errors or Omissions Liability Classification	Page 1.0, 2.0 (Ed. 2-15-06)	New		CommE&O_classification_021506.pdf
Filed	V.A. Condition - Minimum Earned Premium - E & O	Page 1.0 (Ed. 2-15-06)	New		Sect05a_WR6906_MinEarnedPremE&O_021506.pdf
Filed	V.33 - Interior	Page 14.0 (Ed. 2-15-06)	Replacement	N/A	Sect05_WR6906_Pg

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Project Name/Number: E & O Market Segment/06-CMQ-3-RR  
Designers Errors or Omissions (2-15-06) 14\_V33 Interior Designers E&O\_021506.pdf

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Filed	Arkansas Mandatory Forms Section XVI -	Pages 1.0,2.0,3.0 07-02-07	Replacement	N/A	Arkansas Section XVI pgs 1.0, 2.0 3.0 Ed. 7-02-07.pdf
Filed	Arkansas Errors or Omissions Rate and Supplementary	Page 1.0 (Ed. 21-06)	Replacement	N/A	Arkansas Rate Pages E & O Liab Pages 07-27-07.pdf
Filed	Section V. Metalworkers Errors or Omissions (Rule V.38 only)	Page 15.0 (Ed. 2/1/98) Rule V.38 only	Withdrawn	N/A	
Filed	Section V. Plasticworkers Errors or Omissions (Rule 47 only)	Page 18.0 (Ed. 2/1/98) Rule V.47 only	Withdrawn	N/A	
Filed	Section V. Printers Errors or Omissions Including Correction of Work (Rule V.50 only)	Page 19.0 (Ed. 2/1/98) Rule V.50 only	Withdrawn	N/A	
Filed	Section V. Errors or Omissions Excluding Correction of Work (Rule V51 only)	Page 20.0 (Ed. 2/1/98) Rule V.51 only	Withdrawn	N/A	
Filed	Arkansas exceptions Section XV	Page 6.0 (Edition 6/9/98)	New		ARK Rule Page Section XV - Og 6.0 02-21-08.pdf

## **COMMERCIAL ERRORS OR OMISSIONS LIABILITY – PRODUCTS & SERVICES**

For details of coverage, refer to the policy.

### **A. Rules**

Basic limits rates reflect the following limits:

\$1,000,000 Aggregate Limit

### **B. Minimum Premium**

The minimum premium is \$2,500.

### **C. Premium Determination**

Refer to rule IV.3 to compute premium.

## **COMMERCIAL ERRORS OR OMISSIONS LIABILITY – DESIGNATED SERVICES**

For details of coverage, refer to the policy.

### **A. Rules**

Basic limits rates reflect the following limits:

\$1,000,000 Aggregate Limit

### **B. Minimum Premium**

The minimum premium is \$2,500.

### **C. Premium Determination**

Refer to rule IV.3 to compute premium.

## **COMMERCIAL ERRORS OR OMISSIONS LIABILITY – PRINTING SERVICES**

For details of coverage, refer to the policy.

### **A. Rules**

Basic limits rates reflect the following limits:

\$1,000,000 Aggregate Limit

### **B. Minimum Premium**

The minimum premium is \$2,500.

### **C. Premium Determination**

Refer to rule IV.3 to compute premium.

## **PRINTING CORRECTION EXPENSES – ERRORS OR OMISSIONS**

For details of coverage, refer to the policy.

### **A. Rules**

Attach this endorsement to the policy when adding Printing Correction Expenses.

### **B. Premium Determination**

Refer to company to compute the premium.

## COMMERCIAL ERRORS OR OMISSIONS LIABILITY

The following is added to the *Chubb General Liability Classification Manual* in the section labeled “*Miscellaneous Liability Coverages*”:

<u>Class Code</u>	<u>Description</u>	<u>Premium Base</u>
00431-01	Commercial Errors Or Omissions – Very Low Hazard	Gross Sales
00431-02	Commercial Errors Or Omissions – Low Hazard	Gross Sales
00431-03	Commercial Errors Or Omissions – Medium Hazard	Gross Sales
00431-04	Commercial Errors Or Omissions – High Hazard	Gross Sales
00431-05	Commercial Errors Or Omissions – Very High Hazard	Gross Sales
00412-01	Commercial Errors Or Omissions SERP	Policy Premium

Note: The Basic Limit for these classes is \$1,000,000.

# COMMERCIAL ERRORS OR OMISSIONS LIABILITY

## Hazard Group Definitions

<i>Hazard Descriptions</i>	<i>Hazard Group Rating</i>
Expectation of this type of hazard reflects a very low exposure to financial injury. Losses are expected to be very rare for minor consequential damages. E&O losses expected to be infrequent and generally less than \$50,000.	Very Low
Expectation of this type of hazard reflects a low exposure to financial injury. Losses are expected to be infrequent with potential for minor consequential damages. E&O losses expected to be infrequent and generally range between \$50,000 and \$100,000.	Low
Expectation of this type of hazard reflects a moderate exposure to financial injury. Losses are expected to be occasional with potential for moderate to severe consequential damages. E&O losses expected to be occasional and generally range between \$100,000 and \$500,000.	Medium
Expectation of this type of hazard reflects a high exposure to financial injury. Losses are expected to have some frequency with potential for severe consequential damages. E&O losses expected to be somewhat frequent and generally range between \$500,000 and \$1,000,000.	High
Expectation of this type of hazard reflects a very high exposure to financial injury. Losses are expected to have frequency with potential for severe to catastrophic consequential damages. E&O losses expected to have frequency and generally exceed \$1,000,000.	Very High

## **CONDITION – MINIMUM EARNED PREMIUM – E&O**

For details of coverage, refer to the policy.

### **A. Rules**

Endorsement Form 80-02-6425 is attached at the option of the insured.

### **B. Adjustments to the Rate**

The Adjustment Factor applicable to the Errors Or Omissions rate is 0.950.

### **C. Premium Determination**

Refer to rule IV.3 to compute the premium.

### **V.33. INTERIOR DESIGNERS ERRORS OR OMISSIONS**

For details of coverage, refer to the policy.

#### **A. Rules**

Basic limits rates reflect the following limits:

\$1,000,000 Aggregate Limit

#### **B. Minimum Premium**

The minimum premium is \$1,000.

#### **C. Premium Determination**

Refer to rule IV.3. to compute premium.

### **V.34. LIMITATION TO DESIGNATED PREMISES OR PROJECT**

For details of coverage, refer to the policy.

#### **A. Adjustments to the Rate**

The Adjustment Factor applicable to the Premises/Operations rate is 0.990.

#### **B. Premium Determination**

##### **1. Premises/Operations**

Refer to rule IV.3. to compute premium.

##### **2. Products-Completed Operations**

When this form is used, do not compute a premium for Products-Completed Operations for the designated premises or project.

### **V.35. LIMITED LIABILITY COMPANY**

For details of coverage, refer to the policy.

#### **Premium Determination**

There is no premium adjustment.

**SECTION XVI**  
**ARKANSAS MANDATORY FORMS**

**XVI.1. Exceptions to General Rules.**

*Add the following rule:*

**MANDATORY ENDORSEMENT RULE**

Form 80-02-9718 must be attached to Form 80-02-9090.

**XVI.2. Exceptions to Section I. - Property-Risk Classification, Rate and Premium Determination**

None

**XVI.3. Exceptions to Section II. - Property Rules**

*Add the following rule:*

**MANDATORY ENDORSEMENT RULE**

Form 80-02-1718 must be attached to Forms 80-02-1030 and 80-02-1035.

Form 80-02-5184 must be attached to Forms 80-02-1030 and 80-02-1035, if the policy contains a Limit Of Insurance for building.

**XVI.4. Exceptions to Section III. - Crime**

None

**XVI.5. Exceptions to Section IV. - Liability Coverages - Exposure Base, Classification, Rate and Premium Determination**

None

**XVI.6. Exceptions to Section V. - Liability Coverages - Rules**

*Add the following rule:*

**MANDATORY ENDORSEMENT RULE**

Form 80-02-2322 must be attached to Forms 80-02-2012, 80-02-2020 and 80-02-2021.

Form 80-02-2722 must be attached to Form 80-02-2012.

Form 80-02-2723 must be attached to Form 80-02-2001.

**XVI.7. Exceptions to Section V.A. - Additional Coverages - Rules**

Form 80-02-6820 must be attached to Form 80-02-2055.

Form 80-02-6929 must be attached to Form 80-02-2089.

Form 80-02-6930 must be attached to Form 80-02-2089 and 80-02-2090.

**XVI.8. Exceptions to Section VI. - Exceptions for Energy Producing or Mineral Mining Risks**

Form 80-02-5184 must be attached to Form 42-02-1200, if the policy contains a Limits Of Insurance for building.

**XVI.9. Exceptions to Section VII. - Miscellaneous Rating Plans**

Form 80-02-5184 must be attached to Forms 17-02-3060, 17-02-3062 and 17-02-3070, if the policy contains a Limit Of Insurance for building.

**XVI.10. Exceptions to Section VIII. - Transition Rule**

None

**XVI.11. Exceptions to Section IX. - Exceptions for Banks and Other Financial Institutions Risks**

*Add the following rule:*

**MANDATORY ENDORSEMENT RULE**

Form 80-02-1718 must be attached to Form 17-02-5200.

Form 80-02-5184 must be attached to Form 17-02-3069, if the policy contains a Limit Of Insurance for building.

**XVI.12. Exceptions to Section X. - Programs**

See Section X. Exceptions.

**XVI.13. Reserved for future use.**

**XVI.14. Reserved for future use.**

**XVI.15. Exceptions to Section XIII. Mandatory Endorsements**

A. Delete Mandatory Endorsement Rule XIII.8.D.

**XVI.16. Reserved for future use.**

**XVI.17. Exceptions to Section XV. – State Exception Pages**

See State Exception Pages.

**XVI.18. Exceptions to Section XVI. – State Mandatory Form Rules**

See State Mandatory Pages.

**XVI.19. Reserved for future use.**

**XVI.20. Exceptions to Section XVIII. – V3 Property Rules**

*Add the following rule:*

**MANDATORY ENDORSEMENT RULE**

Form 80-02-1718 must be attached to Form 80-02-1097.

Form 80-02-5184 must be attached to Forms 80-02-1000, 80-02-1002, 80-02-1025, and 80-02-1028, if the policy contains a Limit Of Insurance for building.

Errors or Omissions  
Rate Page

Arkansas

Federal Insurance Company  
Great Northern Insurance Company  
Pacific Indemnity Company  
Vigilant Insurance Company

Class Code	Applicable Increased Limits Factor Table	Applicable Claims-Made Table	Rate
00174-24	EOIL01	EOCM01	7.920
00174-25	EOIL12	EOCM01	529.000
00174-26	EOIL01	EOCM01	(a)
00426-01	EOIL12	EOCM01	(a)
00426-02	EOIL12	EOCM01	(a)
00426-03	EOIL12	EOCM01	(a)
00426-04	EOIL12	EOCM01	(a)
00426-05	EOIL12	EOCM01	(a)
00426-06	EOIL12	EOCM01	(a)
00426-07	EOIL12	EOCM01	(a)
00426-08	EOIL12	EOCM01	(a)
00426-09	EOIL12	EOCM01	(a)
00426-10	EOIL12	EOCM01	(a)
00431-01	EOIL12	EOCM01	(a)
00431-02	EOIL12	EOCM01	(a)
00431-03	EOIL12	EOCM01	(a)
00431-04	EOIL12	EOCM01	(a)
00431-05	EOIL12	EOCM01	(a)

NA - not applicable

Errors or Omissions  
Supplementary Rating Information Table

Federal Insurance Company  
Great Northern Insurance Company  
Pacific Indemnity Company  
Vigilant Insurance Company

Arkansas

Class Code	Size of Risk Parameters				Is an IRSR Applic.?	Applicable Increased Limits Factors Adjustment Table	Applicable Deductible Table
	A	B	C	D			
00174-24	6.489	-0.581	99.00	0.000	N	NA	EODD06
00174-25	1.000	1.000	1.000	1.000	N	NA	EODD17
00174-26	6.852	-0.240	1.000	0.000	N	NA	EODD02
00426-01	2.907	-0.133	1.000	0.000	N	NA	NA
00426-02	2.907	-0.133	1.000	0.000	N	NA	NA
00426-03	2.907	-0.133	1.000	0.000	N	NA	NA
00426-04	2.907	-0.133	1.000	0.000	N	NA	NA
00426-05	2.907	-0.133	1.000	0.000	N	NA	NA
00426-06	2.907	-0.133	1.000	0.000	N	NA	NA
00426-07	2.907	-0.133	1.000	0.000	N	NA	NA
00426-08	2.907	-0.133	1.000	0.000	N	NA	NA
00426-09	2.907	-0.133	1.000	0.000	N	NA	NA
00426-10	2.907	-0.133	1.000	0.000	N	NA	NA
00431-01	2.907	-0.133	1.000	0.000	N	NA	EODD17
00431-02	2.907	-0.133	1.000	0.000	N	NA	EODD17
00431-03	2.907	-0.133	1.000	0.000	N	NA	EODD17
00431-04	2.907	-0.133	1.000	0.000	N	NA	EODD17
00431-05	2.907	-0.133	1.000	0.000	N	NA	EODD17

NA - not applicable

**B. Rating Exposure**

Limit of Insurance in hundreds.

**C. Premium Determination**

Refer to rule I.9. to compute premium.

**D. Add the following rule:**

**INDIVIDUAL RISK FILINGS**

For each coverage that is "consent-to-rate" or "refer to company" rated, file an individual risk filing with the Arkansas Insurance Department.

**XV.4. Exceptions to Section III. - Crime**

None

**XV.5. Exceptions to Section IV. - Liability Coverages - Exposure Base, Classification, Rate and Premium Determination**

None

**XV.6. Exceptions to Section V. - Liability Coverages - Rules**

**A. Add the following paragraph to rule V.70.**

**C.** For each classification or coverage that is:

1. "a" rated or,
2. "refer to company" rated or,
3. "consent-to-rate" rated,

file an individual risk filing with the Arkansas Insurance Department.

**B. Delete rule V.71.C. and replace it with:**

**C. Retroactive Date**

Once established, a Retroactive Date may only be changed with the written consent of the first named insured and only if:

1. There is a change in insurer other than another insurer within the Chubb Group of Insurance Companies;
2. There is a substantial change in the insured's operations which would have materially affected our acceptance or declination of the risk; or
3. The first named insured requests the change.

SERFF Tracking Number: CHUB-125270257 State: Arkansas  
 First Filing Company: Federal Insurance Company, ... State Tracking Number: AR-PC-07-025879  
 Company Tracking Number: 06-CMQ-3-RR  
 TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions Liability  
 Product Name: CUSTOMARQ SERIES - E & O Market Segment  
 Project Name/Number: E & O Market Segment/06-CMQ-3-RR

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-Property & Casualty **Review Status:** Filed 02/27/2008

**Comments:**

Arkansas F777

Arkansas F779

**Attachments:**

Arkansas F777AR rate-rule 07-31-07.pdf

Arkansas form F779AR 08-16-07.pdf

**Bypassed -Name:** NAIC Loss Cost Filing Document for OTHER than Workers' Comp **Review Status:** Filed 02/27/2008

**Bypass Reason:** Not applicable

**Comments:**

**Bypassed -Name:** NAIC loss cost data entry document **Review Status:** Filed 02/27/2008

**Bypass Reason:** Not applicable

**Comments:**

**Satisfied -Name:** Ark Ex Memos for rate-rule **Review Status:** Filed 02/27/2008

**Comments:**

Arkansas Manual Rate Indication Table

Arkansas Explanatory Memo for rate-rule section

Arkansas Rule Explanatory Memo

**Attachments:**

Arkansas Manual Rate Indication table 07-27-07.pdf

Arkansas Explanatory Memo for rate-rule section 06-CMQ-3-RR 8-21-07.pdf

*SERFF Tracking Number:* CHUB-125270257      *State:* Arkansas  
*First Filing Company:* Federal Insurance Company, ...      *State Tracking Number:* AR-PC-07-025879  
*Company Tracking Number:* 06-CMQ-3-RR  
*TOI:* 17.0 Other Liability - Claims Made/Occurrence      *Sub-TOI:* 17.0019 Professional Errors & Omissions Liability

*Product Name:* CUSTOMARQ SERIES - E & O Market Segment

*Project Name/Number:* E & O Market Segment/06-CMQ-3-RR

Arkansas Rule Explanatory Memo 07-31-07.pdf

SERFF Tracking Number: CHUB-125270257 State: Arkansas  
First Filing Company: Federal Insurance Company, ... State Tracking Number: AR-PC-07-025879  
Company Tracking Number: 06-CMQ-3-RR  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0019 Professional Errors & Omissions  
Liability  
Product Name: CUSTOMARQ SERIES - E & O Market Segment  
Project Name/Number: E & O Market Segment/06-CMQ-3-RR

**Satisfied -Name:** Cover Letter Arkansas **Review Status:** Filed 02/27/2008  
**Comments:**  
**Attachment:**  
chubb logo w address Arkansas rate-rule.pdf

## Property & Casualty Transmittal Document Arkansas

<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:
	New Business
	Renewal Business
	f. State Filing #:
	g. SERFF Filing #:
	h. Subject Codes

<b>3. Group Name</b>	<b>Group NAIC #</b>
Chubb Group	038

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Federal Insurance Company	Indiana	20281	13-1963496	
Pacific Indemnity Company	Wisconsin	20346	95-1078160	
Vigilant Insurance Company	New York	20397	13-1963495	
Great Northern Insurance Company	Minnesota	20303	41-0729473	

<b>5. Company Tracking Number</b>	<b>06-CMQ-3-RR</b>
-----------------------------------	--------------------

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

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Jane G. Gutman	Mgr. Specialty Lines Div SFD/CCI	(908) 572-4422	(908) 572-4820	jgutman@chubb.com
	202 Hall's Mill Road Whitehouse Station, New Jersey 08889				
<b>7.</b>	Signature of authorized filer		<i>Jane G. Gutman</i>		
<b>8.</b>	Please print name of authorized filer		Jane G. Gutman		

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

<b>9. Type of Insurance (TOI)</b>	17.0
<b>10. Sub-Type of Insurance (Sub-TOI)</b>	17.0019
<b>11. State Specific Product code(s)</b> (if applicable)[See State Specific Requirements]	N/A
<b>12. Company Program Title</b> (Marketing title)	CUSTOMARQ SERIES E & O Market Segment Rewrite
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules X Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
<b>14. Effective Date(s) Requested</b>	New: 03-01-08                      Renewal: 03-01-08
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>16. Reference Organization</b> (if applicable)	N/A
<b>17. Reference Organization # &amp; Title</b>	N/A
<b>18. Company's Date of Filing</b>	08-24-07
<b>19. Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

### Property & Casualty Transmittal Document—

<b>20. This filing transmittal is part of Company Tracking #</b>	06-CMQ-3-RR
--	-------------

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

Enclosed for filing is our CUSTOMARQ Error & Omissions Market Segment Rewrite. It consists of a set of rate and rule manual pages. In order to facilitate your review of this filing, we have included the following:

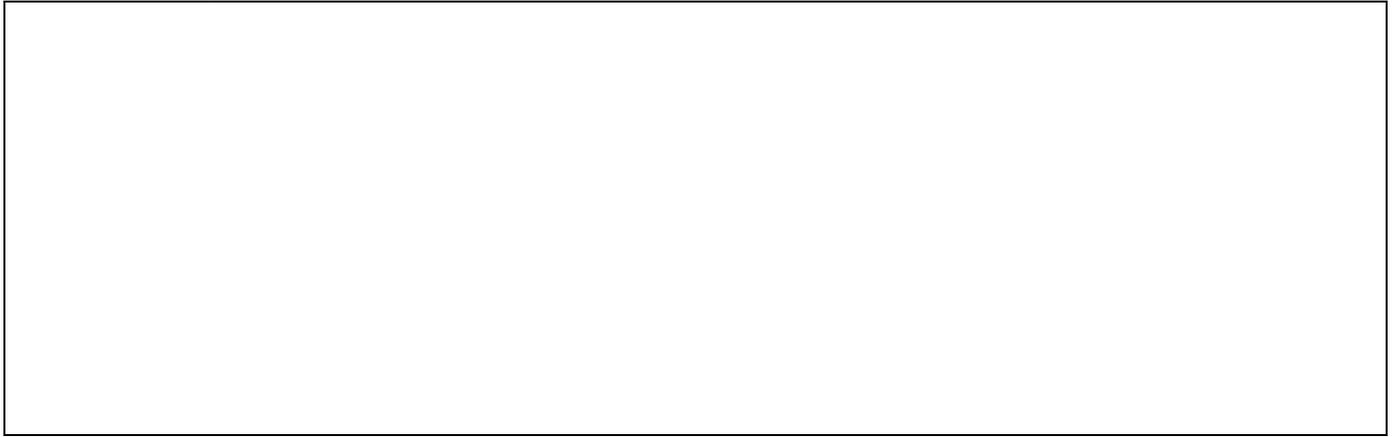
Rates and Rules Explanatory Memorandum;  
 Checking Slip listing all proposed rules;  
 State Forms, where applicable.

Your approval will be appreciated for policies effective on and after March 1, 2008.

<b>22. Filing Fees</b> (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 #:** 00363725  
**Amount:** \$125.00

**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.)**

**RATE/RULE FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate &amp; Rule; Reference; Loss Cost; Loss Cost &amp; Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #		06-CMQ-3-RR					
2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)		06-CMQ-4-F					
	<input type="checkbox"/> Rate Increase		<input type="checkbox"/> Rate Decrease		<input checked="" type="checkbox"/> Rate Neutral (0%)			
3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)		Prior approval					
4a.	Rate Change by Company (As Proposed)							
	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)
	Federal Insurance Company	0.000%	0.000%	\$0	188	\$1386502	0.000%	0.000%
	Great Northern Insurance Company	0.000%	0.000%	\$0	82	\$ 438697	0.000%	0.000%
	Pacific Indemnity Company	0.000%	0.000%	\$0	17	\$113888	0.000%	0.000%
	Vigilant Insurance Company	0.000%	0.000%	\$0	11	\$12489	0.000%	0.000%
4b.	Rate Change by Company (As Accepted) For State Use Only							
	Company Name	Overall % Indicated Change	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)
Overall Rate Information (Complete for Multiple Company Filings only)								
						COMPANY USE	STATE USE	
5a.	Overall percentage rate indication (when applicable)				0.000%			
5b.	Overall percentage rate impact for this filing				0.000%			
5c.	Effect of Rate Filing – Written premium change for this program				\$0			
5d.	Effect of Rate Filing – Number of policyholders affected				298			
6.	Overall percentage of last rate revision				0.000%			
7.	Effective Date of last rate revision				07/01/2006			
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)				Prior Approval			
9.	Rule # or Page # Submitted for Review			Replacement or Withdrawn?			Previous state filing number, if required by state	

Effective March 1, 2007

01	Section V.A. - Commercial Errors or Omissions Liability - Products & Services Page 1.0 (Ed. 02/15/2006)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
02	Section V.A. - Commercial Errors or Omissions Liability - Designated Services Page 1.0 (Ed. 02/15/2006)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
03	Section V.A. - Commercial Errors or Omissions Liability - Printing Services Page 1.0 (Ed. 02/15/2006)	X New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
04	Section V.A. Printing Correction Expenses - E & O Page 1.0 (Ed. 02/15/2006)	X New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
05	Section V.A. - Commercial Errors or Omissions Liability Classification Pages 1.0 and 2.0 (Ed. 02/15/2006)	X New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
06	Section V.A. Condition - Minimum Earned Premium - E & O Page 1.0 (Ed. 02/15/2006)	New X Replacement <input type="checkbox"/> Withdrawn	N/A
07	Section V. Interior Designers - Page 14.0 (Ed. 02/15/2006)	New X Replacement <input type="checkbox"/> Withdrawn	N/A
08	Arkansas Mandatory Forms Section XVI - Page 1.0 (Ed. 07/02/07)	New X Replacement <input type="checkbox"/> Withdrawn	N/A
09	Arkansas Mandatory Forms Section XVI - Page 2.0 (Ed. 07/02/07)	New X Replacement <input type="checkbox"/> Withdrawn	AR-PC-06-021042
10	Arkansas Mandatory Forms Section XVI - Page 3.0 (Ed. 07/02/07)	X New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A
11	Section V. Page 15.0 (Ed. 2/1/98) - Metalworkers Errors or Omissions (Rule V 38 only)	New <input type="checkbox"/> Replacement X Withdrawn	N/A
12	Section V. Page 18.0 (Ed. 2/1/98) Plasticworkers Errors or Omissions (Rule Page V 47 only)	New <input type="checkbox"/> Replacement X Withdrawn	N/A
13	Section V. Page 19.0 (Ed. 2/1/98) Printers Errors or Omissions Including Correction of work (Rule V 50 only)	New <input type="checkbox"/> Replacement X Withdrawn	N/A
14	Section V. Page 20.0 (Ed. 2/1/98) Printers Errors or Omissions Excluding Correction of Work (Rule V 51 only)	New <input type="checkbox"/> Replacement X Withdrawn	N/A
<b>RATE PAGES</b>			
15	Errors or Omissions Liability Rates - 1.0 (Ed. 02/21/2006)	New X Replacement <input type="checkbox"/> Withdrawn	N/A
16	Errors or Omissions Liability Supplementary 1.0 (Ed. 02/21/2006)	New X Replacement <input type="checkbox"/> Withdrawn	N/A

Exhibit A

MANUAL RATE INDICATION  
Anticipated Effective Date 7/1/2006

COMPANY: Chubb Commercial Insurance  
STATE: Int Design SIC=7389.agent=50789  
LINE: Errors & Omissions (CMP & Mono)

Accident Year	Actual Earned Premium	Schedule Mods	Experience Mods	Company Deviations	Rate On Level Factors	Premium Trend To 1/1/2007	Adjusted Earned Premium
2001	495	0.946	1.000	0.996	1.000	1.000	524
2002	519	1.004	1.000	0.996	1.000	1.000	518
2003	516	1.026	1.000	0.996	1.000	1.000	504
2004	521	1.035	1.000	0.998	1.000	1.000	504
2005	471	1.058	1.000	0.999	1.000	1.000	445
Total/Current	2,521	1.000	1.000	0.998			2,495

Accident Year	Reported Loss & ALAE @01/2006	Actual CAT Losses	Expected CAT Losses	Loss Dev Factor	Excess Loss Adjustment	Loss Trend To 7/1/2007	Adjusted Ultimate Loss & ALAE	Adjusted Loss & ALAE Ratio	Weights
2001	962	0	0	1.055	0	1.543	1,567	298.9%	10.0%
2002	22	0	0	1.071	0	1.436	34	6.5%	15.0%
2003	266	0	0	1.109	0	1.336	395	78.3%	20.0%
2004	12	0	0	1.386	0	1.242	21	4.1%	25.0%
2005	284	0	0	3.880	0	1.156	1,276	286.9%	30.0%
Total	1,547	0	0		0		3,291	133.6%	100.0%

(19)	Weighted Loss & ALAE Ratio	133.6%
(20)	ULAE Factor	1.050
(21)	Weighted Loss & LAE Ratio	140.3%
(22)	Statistical Credibility (Based on 32 Occurrences)	11.8%
(23)	Target Combined Ratio	100.0%
(24)	Target Loss & LAE Ratio	67.8%
(25)	Pure Indication	106.9%
(26)	Complementary Indication	7.5%
(27)	Credibility Weighted Indication	19.2%

# EXPLANATORY MEMORANDUM

## Arkansas

### Rate Changes and Effects

This filing affects our current Errors or Omissions business for Metalworkers, Plasticworkers, Printers, and Interior Designers.

#### Commercial Errors or Omissions

Currently we have 12 errors or omissions class codes that cover specific groups of insureds Metalworkers, Plasticworkers, and Printers.

<u>Class Code</u>	<u>Description</u>
00174 – 12	Metalworkers – E&O Low Hazard
00174 – 13	Metalworkers – E&O Medium Hazard
00174 – 14	Metalworkers – E&O High Hazard
00174 – 15	Plasticworkers – E&O Low Hazard
00174 – 16	Plasticworkers – E&O Medium Hazard
00174 – 17	Plasticworkers – E&O High Hazard
00174 – 18	Printers – E&O excluding correction Low Hazard
00174 – 19	Printers – E&O excluding correction Medium Hazard
00174 – 20	Printers – E&O excluding correction High Hazard
00174 – 21	Printers – E&O including correction Low Hazard
00174 – 22	Printers – E&O including correction Medium Hazard
00174 – 23	Printers – E&O including correction High Hazard

In this filing we are withdrawing these class codes and filing 5 new errors or omissions class codes applicable to commercial business not otherwise addressed in Customarq. The new class codes are:

<u>Class Code</u>	<u>Description</u>
00431 – 01	Commercial Errors or Omissions – Very Low Hazard
00431 – 02	Commercial Errors or Omissions – Low Hazard
00431 – 03	Commercial Errors or Omissions – Medium Hazard
00431 – 04	Commercial Errors or Omissions – High Hazard
00431 – 05	Commercial Errors or Omissions – Very High Hazard

Changes between the withdrawn class codes and the new class codes:

- Change in the basic limit from \$100,000/\$100,000 to \$1,000,000/\$1,000,000
- Use the approved \$1,000,000 basic limit ILF table EOIL12 with the new class codes rather than the \$100,000 basic limit table EOIL01 used by the withdrawn class codes.
- Use the approved \$1,000,000 basic limit deductible table EODD17 with the new class codes rather than the \$100,000 basic limit deductible table EODD03, used by the withdrawn class codes.
- Apply the Size of Risk parameters used by other E&O class codes. The size of risk parameters for the deleted class codes was 1.00 across the board resulting in no adjustments based on the policies exposure. The new size of risk will decrease the base rate for larger exposure policies.
- Introduction of a minimum premium of \$2,500. Because these class codes encompass a wider array of insureds the cost to cover the additional time for the underwriter/loss control/quote preparation and meeting a basic coverage need is \$2,500.

- Introduce a new rule addressing Printers correction. Of the class codes being eliminated there are Printer's E&O that contains printers correction. This coverage is to fix errors the printer may realize and wishes to correct before an E&O claim is filed. As with the deleted class code this coverage will be a sub-limit of the printer's E&O coverage. The rate for this coverage is the same base rate used by the printers E&O times the factor for the selected sub-limit. See rule portion of this filing for the limit and deductible options. The ILF/Deductible factor applied to the base rate times exposure produces the premium for the printer's correction. It should be noted that the base rate follows what is currently reflected in our printer's E&O class code which is printer's E&O including correction is twice the printer's E&O excluding correction.

For this part of the filing there are no Arkansas policies affected by this change.

### **Interior Designers**

The Interior Designers errors or omissions coverage was developed in the early 1990's and has not been changed since. Since this a countrywide fixed rate we are filing an increase of +15.0% for this coverage. Refer to the indication provided to see our countrywide need for this coverage (exhibit A). The complement use is our total E&O business. Other changes being made include:

- Change in the basic limit from \$100,000/\$100,000 to \$1,000,000/\$1,000,000
- Use the approved \$1,000,000 basic limit ILF table EOIL12 rather than the \$100,000 basic limit table EOIL02.
- Use the approved \$1,000,000 basic limit deductible table EODD17 rather than the \$100,000 basic limit deductible table EODD07.
- Introduction of a minimum premium of \$1,000. Since this a single type of insured the cost to cover the time for the underwriter/loss control/quote preparation and meeting a basic coverage need is at least \$1,000.

For this part of the filing there are no Arkansas policies affected by this change.

Based on our general liability book of business in the state, the effect of this filing is 0.0%.

## E&O Market Segment Rewrite Rule Explanatory Memorandum Arkansas

Contained within this filing are new rules to the existing V.A. Section.

In Section V.A., the format of the rules has been changed so that each rule begins on a new page. This is designed to facilitate future filings so that existing page numbers do not have to change to accommodate the addition or deletion of rules.

### SECTION V.A.

The following rules are being added to the existing Section V.A.:

<b>New Rule</b>	<b>Replaced or Withdrawn Rule</b>	<b>Explanation</b>
V.A. – Commercial Errors Or Omissions Liability – Products & Services, Page 1.0 (Ed. 02/15/2006)	New	This rule corresponds with new form 80-02-6572 which is included in this filing.
V.A. – Commercial Errors Or Omissions Liability – Designated Services, Page 1.0 (Ed. 02/15/2006)	New	This rule corresponds with new form 80-02-6583 which is included in this filing.
V.A. – Commercial Errors Or Omissions Liability – Printing Services, Page 1.0 (Ed. 02/15/2006)	New	This rule corresponds with new form 80-02-6584 which is included in this filing.
V.A. Printing Correction Expenses – E&O, Page 1.0 (Ed. 02/15/2006)	New	This rule corresponds with new form 80-02-6570 which is included in this filing.
V.A. Commercial Errors Or Omissions Liability Classification Pages – 1.0 - 2.0 (Ed. 02/15/06)	New	Classification Page for the new class codes included in this filing.
V.A. Condition – Minimum Earned Premium – E&O, Page 1.0 (Ed. 02/15/2006)	New	Revised rule to remove reference to specific INT E&O class code since the rule also applies to the Commercial E&O class codes.

### SECTION V.

The following rules are being revised in the existing Section V:

V. 33 Interior Designers Errors Or Omissions, Page 14.0 (Ed. 02/15/2006)	V. 33 Interior Designers Errors Or Omissions, Page 14.0 (Ed. 02/01/98)	Revised rule to reflect new basic limit and minimum premium.
--	--	--

### SECTION XVI.

The following rule is being revised in the existing Section XVI:

Arkansas Mandatory Forms – Section XVI – Rule XVI.7. Page 2.0 (Ed. 07/02/07)	Arkansas Mandatory Forms – Section XVI – Rule XVI.7. Page 2.0 (Ed. 07/21/06)	The mandatory form rules for 80-02-6929 and 80-02-6930 were previously filed and approved for the Customarq Staffing Services Program. We are extending them to the Customarq Product. The associated forms were previously filed and approved as a part of the Staffing Services Rewrite filing.
Arkansas Mandatory Forms – Section XVI – Rule XVI.6. Page 1.0 (Ed. 07/02/07)	Arkansas Mandatory Forms – Section XVI – Rule XVI.6. Page 1.0 (Ed. 03/24/05)	Removed references to withdrawn contracts 80-02-2015, 80-02-2016, 80-02-2017, 80-02-2018 and 80-02-2019.

This Explanatory Memorandum is provided for informational purposes only and does not modify, limit or enlarge policy provisions.



C H U B B

# CHUBB GROUP OF INSURANCE COMPANIES

202 Hall's Mill Road, P.O. Box 1650  
Whitehouse Station, NJ 08889-1650

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Arkansas Insurance Department  
Property & Casualty Division  
1200 W 3<sup>rd</sup> Street  
Little Rock, Arkansas 72201-1904

August 24, 2007

Re: E & O Market Segment Re-Write  
CUSTOMARQ SERIES  
Filing No. 06-CMQ-3-RR (Rates/Rules)  
038 20281 Federal Insurance Company  
038 20346 Pacific Indemnity Company  
038 20397 Vigilant Insurance Company  
038 20303 Great Northern Insurance Company

Dear Sir/Madam:

Enclosed for filing is our CUSTOMARQ Error & Omissions Market Segment Rewrite. It consists of a set of rate and rule manual pages. In order to facilitate your review of this filing, we have included the following:

- Rates and Rules Explanatory Memorandum:
- Checking Slip listing all proposed rules;
- State Forms, where applicable.

Your approval will be appreciated for policies effective on and after March 1, 2008.

Very truly yours,  
Chubb & Son  
A division of Federal Insurance Company  
Manager

By: *Jane G. Gutman*  
Jane G. Gutman, Manager  
Specialty Lines Division  
SFD/CCI – WHB/2N 50  
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