

SERFF Tracking Number: GRTA-125458619 State: Arkansas
First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$25
Company Tracking Number: CA-AR-0801-RULE
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: Commercial Auto
Project Name/Number: Terrorism Rule Filing/CA-AR-0801-RULE

Filing at a Glance

Companies: Great American Alliance Insurance Company, Great American Assurance Company, Great American Insurance Company, Great American Insurance Company of New York

Product Name: Commercial Auto SERFF Tr Num: GRTA-125458619 State: Arkansas
TOI: 20.0 Commercial Auto SERFF Status: Closed State Tr Num: EFT \$25
Sub-TOI: 20.0001 Business Auto Co Tr Num: CA-AR-0801-RULE State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Author: Leah Borgmann Disposition Date: 02/07/2008
Date Submitted: 01/28/2008 Disposition Status: Accepted For Informational Purposes
Effective Date Requested (New): On Approval Effective Date (New): 02/07/2008
Effective Date Requested (Renewal): On Approval Effective Date (Renewal): 02/07/2008

State Filing Description:

General Information

Project Name: Terrorism Rule Filing Status of Filing in Domicile: Pending
Project Number: CA-AR-0801-RULE Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 02/07/2008 Deemer Date:
State Status Changed: 02/07/2008
Corresponding Filing Tracking Number:
Filing Description:
Terrorism Rule Filing

Company and Contact

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Filing Contact Information

Leah Borgmann, Product Technician lborgmann@gaic.com
 49 East 4th street (513) 333-6942 [Phone]
 Cincinnati, OH 45202

Filing Company Information

Great American Alliance Insurance Company	CoCode: 26832	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 95-1542353	

Great American Assurance Company	CoCode: 26344	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 15-6020948	

Great American Insurance Company	CoCode: 16691	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 31-0501234	

Great American Insurance Company of New York	CoCode: 22136	State of Domicile: New York
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 13-5539046	

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 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		02/07/2008	02/07/2008

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Disposition

Disposition Date: 02/07/2008
Effective Date (New): 02/07/2008
Effective Date (Renewal): 02/07/2008
Status: Accepted For Informational Purposes
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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 Product Name: Commercial Auto
 Project Name/Number: Terrorism Rule Filing/CA-AR-0801-RULE

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Accepted for Informational Purposes	Yes
Supporting Document	Entire Filing	Accepted for Informational Purposes	Yes
Rate	Terrorism Rule Page	Accepted for Informational Purposes	Yes

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Accepted for Informational Purposes	Terrorism Rule Page	Rule 111	New	Rule page.pdf

COMMERCIAL AUTO EXCEPTION PAGE

111. TERRORISM
Not applicable

Great American Insurance Company
Great American Insurance Company of New York
Great American Assurance Company
Great American Alliance Insurance Company

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty
Review Status: Accepted for Informational Purposes 02/07/2008

Comments:

Attachment:

PC Trans Doc.pdf

Satisfied -Name: Entire Filing
Review Status: Accepted for Informational Purposes 02/07/2008

Comments:

Attachment:

ca-ar-0801-rule.pdf

Property & Casualty Transmittal Document (Revised 1/1/06)

1. Reserved for Insurance Dept. Use Only

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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	

3. Group Name	Group NAIC #
Great American Insurance Group	084

4. Company Name(s)	Domicile	NAIC #	FEIN #
Great American Insurance Company	Ohio	16691	31-0501234
Great American Insurance Company of New York	New York	22136	13-5539046
Great American Assurance Company	Ohio	26344	15-6020948
Great American Alliance Insurance Company	Ohio	26832	95-1542353

5. Company Tracking Number	CA-AR-0801-RULE
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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
	Leah Borgmann 49 East Fourth Street, DTN-6 Cincinnati, Ohio 45202-3803	Product Analyst	(513) 333-6942	(513) 333-6996	lborgmann@gaic.com
7.	Signature of authorized filer		<i>Leah Borgmann</i>		
8.	Please print name of authorized filer		Leah Borgmann		

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

9.	Type of Insurance (TOI)	Commercial Automobile
10.	Sub-Type of Insurance (Sub-TOI)	Liability and Physical Damage
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12.	Company Program Title (Marketing title)	N/A
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14.	Effective Date(s) Requested	New: Upon Approval Renewal: Upon Approval

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	1/25/08
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

20.	This filing transmittal is part of Company Tracking #	CA-AR-0801-RULE
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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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The above mentioned companies hereby submit a rule filing for use under the Commercial Automobile coverage part. This rule is submitted as an exception to the ISO rule.

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 #:
Amount:

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

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

Corporate Services
Product Development & Compliance
49 East Fourth Street
Dixie Terminal North Building
6th Floor
Cincinnati, OH 45202-3803
PO Box 5425
Cincinnati, OH 45201-5425
1-800-605-6713
513.333.6996 fax



January 25, 2008

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

RE: GREAT AMERICAN INSURANCE GROUP

Great American Insurance Company	084-16691	31-0501234
Great American Insurance Company of New York	084-22136	13-5539046
Great American Assurance Company	084-26344	15-6020948
Great American Alliance Insurance Company	084-26832	95-1542353

**Commercial Automobile
Rule Filing
GAI File Number: CA AR 0801 RULE**

Dear Madam:

The Great American Insurance Group, consisting of the aforementioned companies, hereby submits a rule filing for use under the Commercial Automobile coverage part. This rule is submitted as an exception to the ISO rule.

Enclosed for your review are any required transmittals and a final printed copy of the exception page.

We request this filing be made applicable to all policies upon approval.

Please return the enclosed duplicate cover letter to indicate your receipt and approval. A self-addressed, stamped envelope is enclosed for your convenience.

Sincerely,

Leah Borgmann
Product Analyst
Product Development & Compliance
Ph: (513) 333-6942 or lborgmann@gaic.com
Fax: (513) 333-6996

Enclosures

Property & Casualty Transmittal Document (Revised 1/1/06)

1. Reserved for Insurance Dept. Use Only

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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	

3. Group Name	Group NAIC #
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4. Company Name(s)	Domicile	NAIC #	FEIN #
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7.	Signature of authorized filer		<i>Leah Borgmann</i>		
8.	Please print name of authorized filer		Leah Borgmann		

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

9. Type of Insurance (TOI)	Commercial Automobile
10. Sub-Type of Insurance (Sub-TOI)	Liability and Physical Damage
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	N/A
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules
	<input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms
	<input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14. Effective Date(s) Requested	New: Upon Approval Renewal: Upon Approval

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	1/25/08
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

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Not applicable

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