

SERFF Tracking Number: ARKS-125533276 State: Arkansas  
Filing Company: 20052 - National Liability & Fire Ins. Co. State Tracking Number: #19978 \$50  
Company Tracking Number: CA-3-3298  
TOI: 20.0 Commercial Auto Sub-TOI: 20.0002 Garage  
Product Name: n/a  
Project Name/Number: /

## Filing at a Glance

Company: 20052 - National Liability & Fire Ins. Co.

Product Name: n/a

TOI: 20.0 Commercial Auto

Sub-TOI: 20.0002 Garage

Filing Type: Form

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

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

SERFF Tr Num: ARKS-125533276 State: Arkansas

SERFF Status: Closed

Co Tr Num: CA-3-3298

Co Status:

Author:

Date Submitted: 03/10/2008

State Tr Num: #19978 \$50

State Status: Fees verified and received

Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding

Disposition Date: 03/14/2008

Disposition Status: Approved

Effective Date (New): 01/01/2008

Effective Date (Renewal): 01/01/2008

State Filing Description:

## General Information

Project Name:

Project Number:

Reference Organization:

Reference Title:

Filing Status Changed: 03/14/2008

State Status Changed: 03/14/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

## Company and Contact

### Filing Contact Information

NA NA,

NA

NA@NA.com

(123) 555-4567 [Phone]

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NA, AR 00000

**Filing Company Information**

20052 - National Liability & Fire Ins. Co.  
3024 Harney St.

CoCode: 20052  
Group Code: 31

State of Domicile: Connecticut  
Company Type: Property &  
Casualty  
State ID Number:

Omaha, NE 68131  
(402) 536-3478 ext. [Phone]

Group Name:  
FEIN Number: 36-2403971  
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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
Approved	Llyweyia Rawlins	03/14/2008	03/14/2008

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*Product Name:* n/a  
*Project Name/Number:* /

## **Disposition**

Disposition Date: 03/14/2008

Effective Date (New): 01/01/2008

Effective Date (Renewal): 01/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

*SERFF Tracking Number:* ARKS-125533276      *State:* Arkansas  
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*Product Name:* n/a  
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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Approved	Yes
<b>Supporting Document</b>	ARKS-125533276		No

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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

### Review Status:

**Satisfied -Name:** ARKS-125533276

03/14/2008

**Comments:**

**Attachment:**

ARKS-125533276.pdf

ARKS-125.533276

# 19978

LR

EXPEDITED FILING TRANSMITTAL DOCUMENT FOR TERRORISM RISK INSURANCE FORMS AND PRICING

\$ 50

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 #
National Liability & Fire Insurance Company	CT	0031-20052	36-2403971

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Marni Frandson 3024 Harney Street Omaha, NE 68131	(402) 536-3152	(402) 536-3445	mmfrandson@nationalindemnity.com

Filing information

Line of Insurance (see attachment)	9.0000; 20.0000; 20.0002	<b>RECEIVED</b>  <b>MAR 10 2008</b>
Company Program Title (Marketing title) (if applicable)	N/A	
Filing Type ** see note below	Form Filing	
This application is used with:	Garage, Truckers, Cargo	
Effective Date Requested	1/1/2008	<b>PROPERTY AND CASUALTY DIVISION</b> <b>ARKANSAS INSURANCE DEPARTMENT</b>
Filing date	3/6/2008	
Company Tracking Number	CA-3-3298	
Date filing approved in domiciliary state, if applicable	N/A	

	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	Terrorism Risk Insurance Endorsement	M-5150b (12/2007)	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	M-5150a (12/2005)	CA-03-2983
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a form 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 or 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.

Approved on behalf of insurer or advisory organization

MAR 14 2008

Arkansas Insurance Department  
By: *LR*

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

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

*Marni Frandson*  
Signature

Marni Frandson  
Print Name:

Industry/Reg. Relations Analyst  
Title:

## TERRORISM RISK INSURANCE ENDORSEMENT

### NOTICE TO POLICYHOLDERS REQUIRED UNDER TERRORISM RISK INSURANCE ACT OF 2002

Pursuant to the requirements of the Terrorism Risk Insurance Act of 2002 (the "Act"), including all amendments thereto, we advise you of the following information:

Coverage for acts of terrorism is included in this policy subject to the terms, conditions, limits and exclusions contained therein. Under this coverage, certain losses caused by certified acts of terrorism may be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a portion (85% in Calendar Year 2008 through expiration) of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. While your insurer faces significant exposure under your policy for losses caused by acts of terrorism, the premium you paid for the policy does not reflect that exposure. **Consequently, no premium is currently being charged on your policy for the risk of losses caused by certified acts of terrorism.**

THERE IS AN ANNUAL LIABILITY CAP FOR COVERED TERRORISM LOSSES UNDER THE ACT EQUAL TO \$100,000,000,000 OF AGGREGATE INSURED LOSSES AS DEFINED IN THE ACT. LOSSES PAID UNDER THIS COVERAGE WILL BE PARTIALLY REIMBURSED BY THE UNITED STATES UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. UNDER THIS FORMULA, THE UNITED STATES PAYS A PORTION (85% IN CALENDAR YEAR 2008 THROUGH EXPIRATION) OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. ANY INSURER THAT HAS SATISFIED THEIR STATUTORILY ESTABLISHED DEDUCTIBLE IS NOT LIABLE FOR AND THE UNITED STATES SECRETARY OF THE TREASURY IS NOT AUTHORIZED TO PAY ANY PORTION OF SUCH LOSSES EXCEEDING THE CAP ON ANNUAL LIABILITY OF \$100,000,000,000.

Premium on renewal of your coverage may be charged for you to maintain coverage for losses arising out of acts of terrorism. In that event you will be informed of such charges to the extent required by federal or state law.

Company Name	Policy Number
	Endorsement Effective
Named Insured	Countersigned at
	By

(Authorized Representative)

(The Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)