

SERFF Tracking Number: ARKS-125533502 State: Arkansas
Filing Company: 14265 - INDIANA LUMBERMENS MUTUAL INS CO State Tracking Number: #90040023 \$50
Company Tracking Number: 4501
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: n/a
Project Name/Number: /

Filing at a Glance

Company: 14265 - INDIANA LUMBERMENS MUTUAL INS CO

Product Name: n/a	SERFF Tr Num: ARKS-125533502	State: Arkansas
TOI: 20.0 Commercial Auto	SERFF Status: Closed	State Tr Num: #90040023 \$50
Sub-TOI: 20.0001 Business Auto	Co Tr Num: 4501	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author:	Disposition Date: 03/17/2008
	Date Submitted: 03/10/2008	Disposition Status: Approved
Effective Date Requested (New): 04/15/2008		Effective Date (New): 04/15/2008
Effective Date Requested (Renewal): 04/15/2008		Effective Date (Renewal): 04/15/2008

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: 03/17/2008	
State Status Changed: 03/17/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Company and Contact

Filing Contact Information

NA NA, NA@NA.com

SERFF Tracking Number: ARKS-125533502 State: Arkansas
Filing Company: 14265 - INDIANA LUMBERMENS MUTUAL State Tracking Number: #90040023 \$50
INS CO
Company Tracking Number: 4501
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: n/a
Project Name/Number: /

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

Filing Company Information

14265 - INDIANA LUMBERMENS MUTUAL CoCode: 14265 State of Domicile: Arkansas
INS CO
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 Company: 14265 - INDIANA LUMBERMENS MUTUAL State Tracking Number: #90040023 \$50
INS CO
Company Tracking Number: 4501
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: n/a
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Filing Fees

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

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INS CO
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TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: n/a
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	03/17/2008	03/17/2008

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

Disposition

Disposition Date: 03/17/2008

Effective Date (New): 04/15/2008

Effective Date (Renewal): 04/15/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125533502 State: Arkansas
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 Product Name: n/a
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	ARKS-125533502		No

SERFF Tracking Number: ARKS-125533502 *State:* Arkansas
Filing Company: 14265 - INDIANA LUMBERMENS MUTUAL *State Tracking Number:* #90040023 \$50
INS CO
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Product Name: n/a
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125533502 State: Arkansas
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INS CO
Company Tracking Number: 4501
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: n/a
Project Name/Number: /

Supporting Document Schedules

Review Status:

Satisfied -Name: ARKS-125533502

03/17/2008

Comments:

Attachment:

ARKS-125533502.pdf



CHK# 90040025

\$50

ARKS-125533502

CR

Indiana Lumbermens Mutual Insurance Company · ILM

National Building Material Assurance Company · NBMA

Lone Star National Insurance Company · LSN

March 5, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 W 3rd St
Little Rock, AR 72201-1904

RECEIVED

MAR 10 2008

**PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT**

Re: INDIANA LUMBERMENS MUTUAL INSURANCE COMPANY
NAIC # 14265
ILM Filing #4501
COMMERCIAL AUTO FORM FILING
Form 15750108 - PUNITIVE DAMAGES EXCLUSION ENDORSEMENT revision

Indiana Lumbermens is filing to revise previously-approved form 15750702 – Extra Contractual Damages: Punitive or Exemplary Damage Exclusion Endorsement. This form is being revised to clarify our duty to defend in suits involving both compensatory and punitive damages. This change does not constitute a broadening or further restriction of coverage.

We are requesting an effective date of 4/15/2008.

We have included a final version of the revised form, as well as a markup copy showing the changes from the previous version. Also enclosed are the required copies of the filing, including transmittals, filing fees, certifications, and supplements, as may be required by the Commissioner's office, along with a postage paid envelope for your convenience in replying.

Respectfully submitted,

Christopher Noland
Regulatory Compliance Specialist
(800) 428-1441 EXT 606
cnoland@ilmgroup.com

Approved until withdrawn
or revoked

MAR 17 2008

Arkansas Insurance Department
By:

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

1. Reserved for Insurance Dept. Use Only

Approved until withdrawn or revoked

MAR 17 2008

Arkansas Insurance Department
By: *LR*

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 #** _____

4. Company Name(s)	Domicile	NAIC #	FEIN #
Indiana Lumbermens Mutual Insurance Co.	IN	14265	35-0410420

RECEIVED

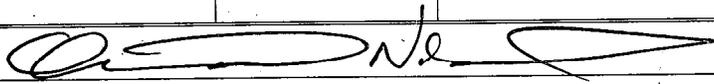
MAR 10 2008

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

5. Company Tracking Number 4501

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

6. Name and address	Title	Telephone #s	FAX #	e-mail
Christopher Noland 3600 Woodview Trace Indianapolis, IN 46268	Compliance Specialist	800-428-1441 x606	317-875-3601	cnoland@ilmgroup.com

7. Signature of authorized filer 

8. Please print name of authorized filer Christopher Noland

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

9. Type of Insurance (TOI)	20.0000 Commercial Auto
10. Sub-Type of Insurance (Sub-TOI)	20.0001 Business Auto
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	
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: 4/15/2008 Renewal: 4/15/2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	3/5/2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # 4501

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

Indiana Lumbermens is filing to revise previously-approved form 15750702 – Extra Contractual Damages: Punitive or Exemplary Damage Exclusion Endorsement. This form is being revised to clarify our duty to defend in suits involving both compensatory and punitive damages. This change does not constitute a broadening or further restriction of coverage.

We are requesting an effective date of 4/15/2008.

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]

Check #: 90040023
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 #	4501
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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	Punitive Damages Exclusion Endorsement	15750108	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	15750702	Approved 7/22/2002
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input 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		

PC FFS-1



THIS ENDORSEMENT CHANGES THE POLICY - PLEASE READ IT CAREFULLY

**EXTRA CONTRACTUAL DAMAGES:
PUNITIVE OR EXEMPLARY DAMAGE EXCLUSION ENDORSMENT**

This endorsement modifies insurance provided under the following:

COMMERCIAL AUTO

When this endorsement is attached to your policy, you have no coverage for any extra contractual damages, which may also be characterized as punitive or exemplary damages. These damages may be stated as, but not limited to, fines, penalties or multiplication of compensatory awards. It does not matter what the award is called. If the damages are not compensatory, they will be considered to be punitive or exemplary, and we will not pay them.

In the event a "suit" is brought against you claiming both compensatory as well as punitive damages, and is otherwise covered by the policy and/or not excluded by other terms, exclusions, or conditions of the policy, we will provide a defense without liability of such punitive or exemplary damages.

"Punitive damages" means those damages imposed to punish a wrongdoer and to deter others from similar conduct.



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In the event a "suit" is brought against you claiming both compensatory as well as punitive damages, and is otherwise covered by the policy and/or not excluded by other terms, exclusions, or conditions of the policy, we will defend you provide a defense without liability of such punitive or exemplary damages. However, we will not pay any costs, interest or damages awarded as punitive or exemplary.

"Punitive damages" means those damages imposed to punish a wrongdoer and to deter others from similar conduct.

For Reference Only