

SERFF Tracking Number: AXLM-125507508 State: Arkansas
Filing Company: AXA Insurance Company State Tracking Number: #11990 \$50
Company Tracking Number: AV-2008-1
TOI: 22.0 Aircraft Sub-TOI: 22.0000 Aircraft
Product Name: Aircraft
Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Filing at a Glance

Company: AXA Insurance Company

Product Name: Aircraft

TOI: 22.0 Aircraft

Sub-TOI: 22.0000 Aircraft

Filing Type: Form

Effective Date Requested (New): On Approval

Effective Date Requested (Renewal): On Approval

SERFF Tr Num: AXLM-125507508 State: Arkansas

SERFF Status: Closed

Co Tr Num: AV-2008-1

Co Status:

Author: Linda Gross

Date Submitted: 02/25/2008

State Tr Num: #11990 \$50

State Status: Fees verified and received

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

Disposition Date: 03/03/2008

Disposition Status: Approved

Effective Date (New): 03/03/2008

Effective Date (Renewal):

03/03/2008

State Filing Description:

General Information

Project Name: Revised Terrorism Exclusions

Project Number: AV-2008-1

Reference Organization:

Reference Title:

Filing Status Changed: 03/03/2008

State Status Changed: 03/03/2008

Corresponding Filing Tracking Number:

Filing Description:

AXA Insurance Company recently filed to introduce terrorism exclusions for our Aircraft program. That filing (SERFF tracking number AXLM-125293778) was approved effective October 15, 2007.

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

We are revising those exclusions to comply with the Terrorism Risk Insurance Reauthorization Act of 2007.

1. Terrorism Exclusion AIC 574A (2/08). This form is used with our Aircraft Insurance Policy AIC 200 and Corporate

SERFF Tracking Number: AXLM-125507508 State: Arkansas
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Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Aircraft Insurance Policy AIC 300.

2. Terrorism Exclusion AIC 574B (2/08). This form is used with our Aircraft General Liability Insurance Policy AIC 400.

Company and Contact

Filing Contact Information

Linda Gross, Assistant Vice President
17 State Street
New York, NY 10004

Linda.Gross@AXA-Liabilitiesmanagers.com
(212) 658-8743 [Phone]
(212) 658-8780[FAX]

Filing Company Information

AXA Insurance Company
17 State Street
New York, NY 10004
(212) 658-8743 ext. [Phone]

CoCode: 33022
Group Code:
Group Name:
FEIN Number: 13-3594502

State of Domicile: New York
Company Type:
State ID Number: 1633

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: Flat fee for forms filing
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
11990	\$50.00	02/20/2008

SERFF Tracking Number: AXLM-125507508 State: Arkansas
Filing Company: AXA Insurance Company State Tracking Number: #11990 \$50
Company Tracking Number: AV-2008-1
TOI: 22.0 Aircraft Sub-TOI: 22.0000 Aircraft
Product Name: Aircraft
Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Correspondence Summary

Dispositions

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

SERFF Tracking Number: AXLM-125507508 *State:* Arkansas
Filing Company: AXA Insurance Company *State Tracking Number:* #11990 \$50
Company Tracking Number: AV-2008-1
TOI: 22.0 Aircraft *Sub-TOI:* 22.0000 Aircraft
Product Name: Aircraft
Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Disposition

Disposition Date: 03/03/2008

Effective Date (New): 03/03/2008

Effective Date (Renewal): 03/03/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AXLM-125507508 State: Arkansas
 Filing Company: AXA Insurance Company State Tracking Number: #11990 \$50
 Company Tracking Number: AV-2008-1
 TOI: 22.0 Aircraft Sub-TOI: 22.0000 Aircraft
 Product Name: Aircraft
 Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes
Form	Terrorism Exclusion	Approved	Yes
Form	Terrorism Exclusion	Approved	Yes

SERFF Tracking Number: AXLM-125507508 State: Arkansas
 Filing Company: AXA Insurance Company State Tracking Number: #11990 \$50
 Company Tracking Number: AV-2008-1
 TOI: 22.0 Aircraft Sub-TOI: 22.0000 Aircraft
 Product Name: Aircraft
 Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Terrorism Exclusion	AIC 574A	2/08	Endorsement/Amendment/Conditions	Replaced Form #:0.00 AIC 574A (8/07) Previous Filing #: AXLM-		AIC 574A 2-08 TERRORISM M EXCLUSION.pdf
Approved	Terrorism Exclusion	AIC 574B	2/08	Endorsement/Amendment/Conditions	Replaced Form #:0.00 AIC 574B (8/07) Previous Filing #: AXLM-		AIC 574B 2-08 TERRORISM M EXCLUSION.pdf

TERRORISM EXCLUSION

(Terrorism Risk Insurance Act of 2002)

This policy is amended as follows:

This policy does not cover claims caused by any losses, damages, or injuries arising directly or indirectly as a result of a "Certified Act of Terrorism" defined by Section 102. Definitions of the Terrorism Risk Insurance Act of 2002 and any revisions or amendments.

Solely with respect to this endorsement and to ensure compliance with the Terrorism Risk Insurance Act of 2002, an "Act of Terrorism" shall mean:

- (1) Certified Act of Terrorism:
- (A) Certification - The term "Certified Act of Terrorism" means any act that is certified by the Secretary of the Treasury of the United States, in concurrence with the Secretary of State and the Attorney General of the United States:
 - (i) to be an act of terrorism;
 - (ii) to be a violent act or an act that is dangerous to:
 - (I) human life;
 - (II) Property; or
 - (III) infrastructure;
 - (iii) to have resulted in damage within the United States or outside of the United States in the case of:
 - (I) an air carrier or commercial vessel defined as one principally based in the United States, on which United States income tax is paid, and whose insurance coverage is subject to regulation in the United States;
 - (II) the premises of a United States mission; and
 - (iv) to have been committed by an individual(s) 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.
 - (B) Limitation - No act shall be certified by the Secretary as an act of terrorism if:
 - (i) the act is committed as part of the course of war declared by the Congress, except that this clause shall not apply with respect to any coverage for workers' compensation; or
 - (ii) property and casualty insurance losses resulting from the act, in the aggregate, do not exceed \$100,000,000,
 - (C) Determinations Final - Any certification of, or determination not to certify, an act of terrorism under this paragraph shall be final, and shall not be subject to judicial review.
 - (D) Non delegation - The Secretary may not delegate or designate to any other officer, employee, or person, any determination under this paragraph of whether, during the effective period of the Program, an act of terrorism has occurred.

THE PROVISIONS OF THIS ENDORSEMENT SHALL APPLY SOLELY TO THE TERRORISM RISK INSURANCE ACT OF 2002 AND SHALL IN NO WAY CONFLICT WITH THOSE OF AIC 803A AND AMENDMENTS THERETO.

All other provisions of this policy remain the same.

This endorsement becomes effective _____ to be attached to and hereby made a part of:

Policy No. _____

Issued to _____

AXA Insurance Company

Endorsement No. _____

Date of Issue _____

By _____

(Authorized Representative)

AIC 574A (2/08)

TERRORISM EXCLUSION

(Terrorism Risk Insurance Act of 2002)

This policy is amended as follows:

This policy does not cover claims caused by any losses, damages, or injuries arising directly or indirectly as a result of a "Certified Act of Terrorism" defined by Section 102. Definitions of the Terrorism Risk Insurance Act of 2002 and any revisions or amendments.

Solely with respect to this endorsement and to ensure compliance with the Terrorism Risk Insurance Act of 2002, an "Act of Terrorism" shall mean:

(1) Certified Act of Terrorism:

- (A) Certification - The term "Certified Act of Terrorism" means any act that is certified by the Secretary of the Treasury of the United States, in concurrence with the Secretary of State and the Attorney General of the United States:
 - (i) to be an act of terrorism;
 - (ii) to be a violent act or an act that is dangerous to:
 - (I) human life;
 - (II) Property; or
 - (III) infrastructure;
 - (iii) to have resulted in damage within the United States or outside of the United States in the case of:
 - (I) an air carrier or commercial vessel defined as one principally based in the United States, on which United States income tax is paid, and whose insurance coverage is subject to regulation in the United States;
 - (II) the premises of a United States mission; and
 - (iv) to have been committed by an individual(s), 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.
- (B) Limitation - No act shall be certified by the Secretary as an act of terrorism if:
 - (i) the act is committed as part of the course of war declared by the Congress, except that this clause shall not apply with respect to any coverage for workers' compensation; or
 - (ii) property and casualty insurance losses resulting from the act, in the aggregate, do not exceed \$100,000,000,
- (C) Determinations Final - Any certification of, or determination not to certify, an act of terrorism under this paragraph shall be final, and shall not be subject to judicial review.
- (D) Non delegation - The Secretary may not delegate or designate to any other officer, employee, or person, any determination under this paragraph of whether, during the effective period of the Program, an act of terrorism has occurred.

THE PROVISIONS OF THIS ENDORSEMENT SHALL APPLY SOLELY TO THE TERRORISM RISK INSURANCE ACT OF 2002.
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All other provisions of this policy remain the same.

This endorsement becomes effective _____ to be attached to and hereby made a part of:

Policy No. _____

Issued to _____

AXA Insurance Company

Endorsement No. _____

Date of Issue _____

By _____

(Authorized Representative)

AIC 574B (2/08)

<i>SERFF Tracking Number:</i>	<i>AXLM-125507508</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>AXA Insurance Company</i>	<i>State Tracking Number:</i>	<i>#11990 \$50</i>
<i>Company Tracking Number:</i>	<i>AV-2008-1</i>		
<i>TOI:</i>	<i>22.0 Aircraft</i>	<i>Sub-TOI:</i>	<i>22.0000 Aircraft</i>
<i>Product Name:</i>	<i>Aircraft</i>		
<i>Project Name/Number:</i>	<i>Revised Terrorism Exclusions/AV-2008-1</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: AXLM-125507508 State: Arkansas
Filing Company: AXA Insurance Company State Tracking Number: #11990 \$50
Company Tracking Number: AV-2008-1
TOI: 22.0 Aircraft Sub-TOI: 22.0000 Aircraft
Product Name: Aircraft
Project Name/Number: Revised Terrorism Exclusions/AV-2008-1

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 03/03/2008

Comments:

Attachment:

Arkansas NAIC Transmittal.pdf

Satisfied -Name: Cover Letter **Review Status:** Approved 03/03/2008

Comments:

Attachment:

Arkansas.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	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: <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #

5. Company Tracking Number	
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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

7. Signature of authorized filer	
8. Please print name of authorized filer	

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

9. Type of Insurance (TOI)	
10. Sub-Type of Insurance (Sub-TOI)	
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 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: <input style="width: 100px;" type="text"/> Renewal: <input style="width: 100px;" type="text"/>
15. Reference Filing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	
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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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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 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 #	
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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			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
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



February 25, 2008

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

RE: Aircraft
Revision of Terrorism Exclusions
AXA Insurance Company

Dear Ms. Bowman:

AXA Insurance Company recently filed to introduce terrorism exclusions for our Aircraft program. That filing (SERFF tracking number AXLM-125293778) was approved effective October 15, 2007.

We are revising those exclusions to comply with the Terrorism Risk Insurance Reauthorization Act of 2007.

1. Terrorism Exclusion AIC 574A (2/08). This form is used with our Aircraft Insurance Policy AIC 200 and Corporate Aircraft Insurance Policy AIC 300.
2. Terrorism Exclusion AIC 574B (2/08). This form is used with our Aircraft General Liability Insurance Policy AIC 400.

We would like to begin using these revised exclusions effective as of the date of approval.

In support of our filing, the following items are attached:

- Our check for \$50
- NAIC Filing Transmittal
- A final print of our revised terrorism exclusions

Very truly yours,

Linda Gross
Assistant Vice President
Tel: (212) 658-8743
FAX: (212) 658-8780
Linda.Gross@AXA-Liabilitiesmanagers.com