

SERFF Tracking Number: CHUB-125341846 State: Arkansas
First Filing Company: Federal Insurance Company, ... State Tracking Number: #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Filing at a Glance

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

Product Name: Masterpiece

SERFF Tr Num: CHUB-125341846 State: Arkansas

TOI: 35.0 Interline Filings

SERFF Status: Closed

State Tr Num: #365516 \$100

Sub-TOI: 35.0001 Personal Interline Filings

Co Tr Num: 07-6218-RR

State Status: Fees verified and received

Filing Type: Rule

Co Status:

Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding

Author: Laura Massa

Disposition Date: 03/12/2008

Date Submitted: 11/05/2007

Disposition Status: Filed

Effective Date Requested (New): 12/07/2007

Effective Date (New):

Effective Date Requested (Renewal): 12/07/2007

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Reduce Installment Fees

Status of Filing in Domicile:

Project Number: 07-6218-RR

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 03/12/2008

State Status Changed: 11/15/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

This letter and its attachments serve to submit a new billing installment fee option to the Masterpiece program in Arkansas.

This filing will offer insured's the option to pay their bills by Electronic Fund Transfer (EFT). Insureds who opt for this payment method will receive a reduction in their monthly installment fee from \$10.00 to \$3.00.

Please refer to the attached actuarial filing memorandum for further detail regarding the changes submitted under this

<i>SERFF Tracking Number:</i>	<i>CHUB-125341846</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Federal Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>#365516 \$100</i>
<i>Company Tracking Number:</i>	<i>07-6218-RR</i>		
<i>TOI:</i>	<i>35.0 Interline Filings</i>	<i>Sub-TOI:</i>	<i>35.0001 Personal Interline Filings</i>
<i>Product Name:</i>	<i>Masterpiece</i>		
<i>Project Name/Number:</i>	<i>Reduce Installment Fees/07-6218-RR</i>		

filing. We have also attached the Personal Insurance Statement, indicating the installment fee amount, for your review.

This filing will become effective as of December 7, 2007. Please contact the undersigned should you require further information.

Company and Contact

Filing Contact Information

Fran Muldoon, Manager - CPI State Filings fmuldoon@chubb.com

Dept.

202 Hall's Mill Rd. (908) 572-2875 [Phone]

Whitehouse Station, NJ 08889-9977 (908) 572-4034[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

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

Whitehouse Station, NJ 08889-1650 Group Name: State ID Number:

(908) 572-4726 ext. [Phone] FEIN Number: 13-1963495

Filing Fees

SERFF Tracking Number: CHUB-125341846 State: Arkansas
First Filing Company: Federal Insurance Company, ... State Tracking Number: #365516 \$100
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Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No
Fee Explanation: RATE/RULE FILINGS \$100.00

Filing fee will be sent via US Postal Service

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Federal Insurance Company	\$0.00	11/05/2007	
Pacific Indemnity Company	\$0.00	11/05/2007	
Vigilant Insurance Company	\$0.00	11/05/2007	

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 Product Name: Masterpiece
 Project Name/Number: Reduce Installment Fees/07-6218-RR

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	03/12/2008	03/12/2008
Filed	Becky Harrington	11/30/2007	11/30/2007

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	Becky Harrington	11/09/2007	11/09/2007	Laura Massa	11/28/2007	11/28/2007
Pending Industry Response	Becky Harrington	11/07/2007	11/07/2007	Laura Massa	11/09/2007	11/09/2007

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Final Printed Pages	Supporting Document	Laura Massa	03/10/2008	03/10/2008

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Manual pages	Note To Filer	Becky Harrington	03/07/2008	03/07/2008
Final Prints	Note To Reviewer	Laura Massa	03/07/2008	03/07/2008

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Final pages Note To Filer Becky Harrington 03/07/2008 03/07/2008
Final Printed Pages Note To Reviewer Laura Massa 03/05/2008 03/05/2008

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Disposition

Disposition Date: 03/12/2008

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment: Disposition to re-close after attachment of manual pages.

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

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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 Product Name: Masterpiece
 Project Name/Number: Reduce Installment Fees/07-6218-RR

Item Type	Item Name	Item Status	Public Access
Supporting Document	Filing Memorandum	Filed	Yes
Supporting Document	Final Printed Pages	Filed	Yes
Rate	Personal Insurance Statement	Filed	Yes
Rate	Personal Insurance Statment	Filed	Yes
Rate	General Rules	Filed	Yes
Rate	General Rules Insert	Filed	Yes

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Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Disposition

Disposition Date: 11/30/2007

Effective Date (New): 12/07/2007

Effective Date (Renewal): 12/07/2007

Status: Filed

Comment: The requirements of Arkansas Code Annotated §23- 67-211(a)(1) are waived allowing for the requested effective date.

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

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Filing Memorandum	Filed	Yes
Supporting Document	Final Printed Pages	Filed	Yes
Rate	Personal Insurance Statement	Filed	Yes
Rate	Personal Insurance Statment	Filed	Yes
Rate	General Rules	Filed	Yes
Rate	General Rules Insert	Filed	Yes

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 11/09/2007

Submitted Date 11/09/2007

Respond By Date

Dear Fran Muldoon,

This will acknowledge receipt of the captioned filing.

You must have a rule in your manual.

Please feel free to contact me if you have questions.

Sincerely,

Becky Harrington

Response Letter

Response Letter Status Submitted to State

Response Letter Date 11/28/2007

Submitted Date 11/28/2007

Dear Becky Harrington,

Comments:

Response 1

Comments: This is in response to your objection letter dated 11/9/07.

As requested, we have added a Payment Options section in our rule manual showing the installment fee.

Sincerely,

Laura Massa
State Filings Analyst
(908) 572-2877

SERFF Tracking Number: CHUB-125341846 State: Arkansas
First Filing Company: Federal Insurance Company, ... State Tracking Number: #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
General Rules	Page 1.1 - 1.2	Replacement	
General Rules Insert	Insert #1	New	

Sincerely,
Laura Massa

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 11/07/2007

Submitted Date 11/07/2007

Respond By Date

Dear Fran Muldoon,

This will acknowledge receipt of the captioned filing.

Objection 1

No Objections

Comment: Provide the manual page containing the installment fee rule.

Please feel free to contact me if you have questions.

In accordance with Regulation 23, Section 7.A., this filing may not be implemented until 20 days after the requested amendment(s) and/or information is received.

Sincerely,

Becky Harrington

Response Letter

Response Letter Status Submitted to State

Response Letter Date 11/09/2007

Submitted Date 11/09/2007

Dear Becky Harrington,

Comments:

Response 1

Comments: Ms. Harrington:

We provide the detailed installment information on the bill the insured receives.

Please advise if this is acceptable rather than us having to revise our rate and rule manual.

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Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Sincerely,

Laura Massa
State Filings Department
(908) 572-2877

Related Objection 1

Comment:

Provide the manual page containing the installment fee rule.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
Personal Insurance Statment		New	

Sincerely,
Laura Massa

SERFF Tracking Number: CHUB-125341846 State: Arkansas
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Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Amendment Letter

Amendment Date:

Submitted Date: 03/10/2008

Comments:

Attached you will find the pages in final printed form that were revised as a result of this filing
These pages carry an effective date of December 7, 2008.

General Rules - Pages 1,1 - 1..2

Your acknowledgement of the receipt of these finals will be appreciated for the completion of our files

Sincerely,

Laura Massa
State Filings Analyst
(908) 572-2877

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Final Printed Pages

Comment: Please see attached final printed pages.
031008 Ark Gen Rules.PDF

SERFF Tracking Number: CHUB-125341846 *State:* Arkansas
First Filing Company: Federal Insurance Company, ... *State Tracking Number:* #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Note To Filer

Created By:

Becky Harrington on 03/07/2008 11:50 AM

Subject:

Manual pages

Comments:

I'm afraid the attachment might be too big for us to receive. I'll re-open the filing.

SERFF Tracking Number: CHUB-125341846 *State:* Arkansas
First Filing Company: Federal Insurance Company, ... *State Tracking Number:* #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Note To Reviewer

Created By:

Laura Massa on 03/07/2008 11:17 AM

Subject:

Final Prints

Comments:

Becky,

Unfortunately, SERFF is not set-up to allow attachments to be sent to "Note to Reviewer". I can send them to you in an email attachment if would be okay.

Thank's.

Laura Massa
State Filings Analyst
(908) 572-2877

SERFF Tracking Number: CHUB-125341846 *State:* Arkansas
First Filing Company: Federal Insurance Company, ... *State Tracking Number:* #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Note To Filer

Created By:

Becky Harrington on 03/07/2008 10:26 AM

Subject:

Final pages

Comments:

Can you add them by attachment in a Note to Reviewer?

SERFF Tracking Number: CHUB-125341846 *State:* Arkansas
First Filing Company: Federal Insurance Company, ... *State Tracking Number:* #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Note To Reviewer

Created By:

Laura Massa on 03/05/2008 03:51 PM

Subject:

Final Printed Pages

Comments:

We would like to attach the final printed pages through the SERFF system for this approved filing.. These pages carry an effective date of December 7, 2007. It's not possible on our end to re-open a filing once it's closed.

We respectfully request the Department to re-open the above-referenced SERRF filings so that we may submit the final printed pages. I appreciate it.

Sincerely,

Laura Massa
State Filings Analyst
(908) 572-2877

SERFF Tracking Number: CHUB-125341846 *State:* Arkansas
First Filing Company: Federal Insurance Company, ... *State Tracking Number:* #365516 \$100
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TOI: 35.0 Interline Filings *Sub-TOI:* 35.0001 Personal Interline Filings
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Project Name/Number: Reduce Installment Fees/07-6218-RR

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: CHUB-125341846 State: Arkansas
 First Filing Company: Federal Insurance Company, ... State Tracking Number: #365516 \$100
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 TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
 Product Name: Masterpiece
 Project Name/Number: Reduce Installment Fees/07-6218-RR

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Personal Insurance Statement	Pages 1, 2	New	103007 ARK Stmt.PDF
Filed	Personal Insurance Statment		New	103007 ARK Stmt.PDF
Filed	General Rules	Page 1.1 - 1.2	Replacement	112807 AR Gen Rules.PDF
Filed	General Rules Insert	Insert #1	New	112807 AR Insert.PDF

PERSONAL INSURANCE STATEMENT

Chubb Logo

PAGE 1

Writing Company:
Federal Insurance Company

JONATHAN J. AND JENNIFER K. MANNING
3000 DOGWOOD TRAIL
Arkansas, AR 12345-1234

Statement Date: 10//10/07
Policy Term: 10/28/07 - 10/28/08

Policy Number: 12345678-99
Account Number: 1234 5678 9012 001P

Insured: JONATHAN J. MANNING

Coverage: House, Valuable Articles, Vehicle, Excess

Location: 3000 DOGWOOD TRAIL
Arkansas, AR 12345-1234

See back for additional locations 

IMPORTANT MESSAGES

Personal Excess Liability. Please refer to the enclosed insert for valuable information about personal excess liability coverage.

STATEMENT SUMMARY

Balance from Last Statement - 07/10/03	\$3,333.33
Payment(s) since Last Statement	-1,111.11
Installment Fee	3.00

Total Amount Due	\$2,232.22
Minimum Amount Due	\$1,121.11
Payment Due Date	08/28/07

See back for your payment options 

For Coverage Questions Please Call:

John Doe Reliable Insurance Agents
1234 Main St.
Anytown, USA
1-999-999-9999

For Claims Reporting and Information Please Call:

1-800-CLAIMS-0 (252-4670)

copyright form no rev dte

Billing/Payment Options & Information:

Visit www.chubb.com/personal to access your account, pay online and review payment history.

Customer Care Team, 1-800-682-4822 (Service Reps available M-F, 8am-6pm ET; Automated Service available 24/7.

Please have your policy number ready, and note that payment by credit card is not available.

Chubb Lc

This Is Not a Bill
Your Policy has been setup for Electronic Funds Withdrawal.
Please Keep for your records.

PAYMENT PLAN OPTIONS - CHOOSE YOUR PLAN

Plan Type	Amount You Pay	Additional Information
One Payment	\$3,333.33	No more bills unless you have additional premium activity.
Monthly*	\$251.51	We'll bill you monthly as shown in the Monthly Payment Schedule below. These amounts do not include the installment fee.
Customized*	Any amount between \$3,333.33 and \$251.51	If you combine multiple installments (see schedule below), make your check out for the total of these amounts. Your next bill depends on how many installments you combine.

*For these options we charge a \$3.00 fee for each installment after your first payment.

MONTHLY PAYMENT SCHEDULE

Due Date	Amount Due	Due Date	Amount Due	Due Date	Amount Due
11/28/07	\$251.51	03/28/08	\$251.51	07/28/08	\$251.51
12/28/07	\$251.51	04/28/08	\$251.51	08/28/08	\$251.51
01/28/08	\$251.51	05/28/08	\$251.51	09/28/08	\$251.51
02/28/08	\$251.51	06/28/08	\$251.51		

Our Payment Policy. Paying your premium means that you accept all policy provisions., payment plan(s) and billing conditions. You will not receive a return premium check unless your account balance is fully paid. If you are entitled to a return premium and would like a check instead of applying the money towards your unpaid account balance and future payment installments, or if you have any questions, please contact **THE CHUBB CUSTOMER CARE TEAM AT 1-800-682-4822**. Please have your Policy Number ready.

LOCATIONS INSURED AS OF STATEMENT DATE

1234567 NORTHWEST HEARTFORDSHIRE AVE WEST PLEASANTVILLE, CA 12345-1234	123 STUART AVE LOS ANGELES, CA 12345-1234	689 SHUNPIKE ROAD GREEN VILLAGE, NJ 078935
1234567 NORTHWEST HEARTFORDSHIRE AVE WEST PLEASANTVILLE, CA 12345-1234	123 STUART AVE LOS ANGELES, CA 12345-1234	689 SHUNPIKE ROAD GREEN VILLAGE, NJ 078935
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1234567 NORTHWEST HEARTFORDSHIRE AVE WEST PLEASANTVILLE, CA 12345-1234	123 STUART AVE LOS ANGELES, CA 12345-1234	689 SHUNPIKE ROAD GREEN VILLAGE, NJ 078935

For additional locations on this policy, see your policy paper.

**To access other convenient personalized services,
visit our website at www.chubb.com/personal.**

PERSONAL INSURANCE STATEMENT

Chubb Logo

PAGE 1

Writing Company:
Federal Insurance Company

JONATHAN J. AND JENNIFER K. MANNING
3000 DOGWOOD TRAIL
Arkansas, AR 12345-1234

Statement Date: 10//10/07
Policy Term: 10/28/07 - 10/28/08

Policy Number: 12345678-99
Account Number: 1234 5678 9012 001P

Insured: JONATHAN J. MANNING

Coverage: House, Valuable Articles, Vehicle, Excess

Location: 3000 DOGWOOD TRAIL
Arkansas, AR 12345-1234

See back for additional locations 

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Payment Due Date	08/28/07

See back for your payment options 

For Coverage Questions Please Call:

John Doe Reliable Insurance Agents
1234 Main St.
Anytown, USA
1-999-999-9999

For Claims Reporting and Information Please Call:

1-800-CLAIMS-0 (252-4670)

copyright form no rev dte

Billing/Payment Options & Information:

Visit www.chubb.com/personal to access your account, pay online and review payment history.

Customer Care Team, 1-800-682-4822 (Service Reps available M-F, 8am-6pm ET; Automated Service available 24/7.

Please have your policy number ready, and note that payment by credit card is not available.

Chubb Lc

This Is Not a Bill
Your Policy has been setup for Electronic Funds Withdrawal.
Please Keep for your records.

PAYMENT PLAN OPTIONS - CHOOSE YOUR PLAN

Plan Type	Amount You Pay	Additional Information
One Payment	\$3,333.33	No more bills unless you have additional premium activity.
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*For these options we charge a \$3.00 fee for each installment after your first payment.

MONTHLY PAYMENT SCHEDULE

Due Date	Amount Due	Due Date	Amount Due	Due Date	Amount Due
11/28/07	\$251.51	03/28/08	\$251.51	07/28/08	\$251.51
12/28/07	\$251.51	04/28/08	\$251.51	08/28/08	\$251.51
01/28/08	\$251.51	05/28/08	\$251.51	09/28/08	\$251.51
02/28/08	\$251.51	06/28/08	\$251.51		

Our Payment Policy. Paying your premium means that you accept all policy provisions., payment plan(s) and billing conditions. You will not receive a return premium check unless your account balance is fully paid. If you are entitled to a return premium and would like a check instead of applying the money towards your unpaid account balance and future payment installments, or if you have any questions, please contact **THE CHUBB CUSTOMER CARE TEAM AT 1-800-682-4822**. Please have your Policy Number ready.

LOCATIONS INSURED AS OF STATEMENT DATE

1234567 NORTHWEST HEARTFORDSHIRE AVE WEST PLEASANTVILLE, CA 12345-1234	123 STUART AVE LOS ANGELES, CA 12345-1234	689 SHUNPIKE ROAD GREEN VILLAGE, NJ 078935
1234567 NORTHWEST HEARTFORDSHIRE AVE WEST PLEASANTVILLE, CA 12345-1234	123 STUART AVE LOS ANGELES, CA 12345-1234	689 SHUNPIKE ROAD GREEN VILLAGE, NJ 078935
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For additional locations on this policy, see your policy paper.

**To access other convenient personalized services,
visit our website at www.chubb.com/personal.**

Policy types

Individual policies. Any of these coverages may be written as an individual policy:

- house (with or without contents);
- condominium;
- cooperative;
- renters;
- valuable articles;
- vehicle;
- family protection;
- liability;
- excess liability.

Package policies. Any two or more of these coverages may be written as a package policy. Workers' Compensation coverage may be requested on the Masterpiece Worksheet, but a separate policy will be issued.

Policy period

A policy will be written for a period of one year and may be extended for successive policy periods.

To establish common anniversary dates, any coverage added to a policy may be written for a period of less than one year on a pro rata basis.

Rate changes

When there is a change in rates, the new rates will apply as follows:

New lines. New policies issued **and** effective on or after the effective date of the change will be rated using the new rates.

Renewals. Renewals issued **and** effective on or after the effective date of the change will be rated using the new rates.

Coverage changes. The same rates used for the current term of the policy will apply to all changes in coverage, including the addition of a coverage to a policy.

Minimum premium

The minimum annual premium for an individual or package policy is \$50.

Pro rata rule

Any policy change generating premium with an effective date other than the annual inception date will be calculated on a pro rata basis using the following procedures:

- For Excess Liability, calculate the annual premium for each exposure;
- For Home and Contents calculate the annual premium for each home;
- For Family Protection, calculate the total annual premium;
- For Valuable Articles, calculate the total annual premium;
- For Vehicles and Other Vehicles, calculate the annual premium for each vehicle; and
- Apply the pro rata factor to this annualized premium to determine your pro rata premium.

Waiver of premium

When a policy is changed after the effective date, any additional or return premium of \$5 or less will be waived.

Whole dollar premium rule

All premiums are rounded to the nearest whole dollar. A premium of fifty cents (\$0.50) or more is rounded to the next whole dollar.

Reference Copy

General Rules



Cancellations or coverage changes

All additional and return premiums will be computed on a pro rata basis.

All individual coverages in a package policy are rated independently and can be individually cancelled, nonrenewed, or modified by either the insured or the company, subject to state cancellation and nonrenewal provisions.

For cancellations during the policy term, the minimum pro rata earned premium is \$50.

Special rates and conditions

For a risk with unusual circumstances, unusual loss history, or other special factors, special rates or conditions may be issued. These special rates and conditions may be requested by either the insured or the company, and must conform to individual state requirements.

Special rates may be issued for all risks equal to or exceeding these amounts of coverage:

Home or contents:	\$1,000,000 any single house or contents
Valuable articles:	\$ 250,000
	\$ 50,000 any single item
Jewelry:	\$ 100,000
	\$ 50,000 any single item
Vehicles:	\$ 100,000 any single vehicle or more than 5 vehicles

Reference Copy

Insert #1

General Rules

Payment options

Three payment options are available and are printed on the Personal Insurance Statement. A service charge of \$10.00 is included only on each subsequent installment payment. For Electronic Fund Transfer (EFT) a \$3.00 service charge is included only on each subsequent installment payment.

Payment option	Initial payment	Subsequent payment(s)	Service charge	EFT service charge
Full	100%	N/A	N/A	N/A
Monthly	17%	11 equal	\$ 10.00	\$ 3.00
Customized	17%	equal	\$ 10.00	\$ 3.00

The following is the payment schedule for each of the above payment options.

Full pay	New Line - <u>payment due 18 days after policy issues</u>
	Renewal - <u>payment due on inception date</u>
Monthly	New Line - <u>1st payment due 18 days after policy issues,</u> <u>subsequent payments due every month thereafter</u>
-	Renewal - <u>1st payment due at inception,</u> <u>subsequent payments due every month thereafter</u>
Customized	New Line - <u>1st payment due 18 days after policy issues,</u> <u>subsequent payments due every month</u> <u>thereafter unless payment(s) are made in advance**</u>
	Renewal - <u>1st payment due at inception,</u> <u>subsequent payments due every month</u> <u>thereafter unless payment(s) are made in advance**</u>

For all payment options: If a new line is issued more than 18 days before the inception date the 1st payment is not due until inception.

** No additional bills are issued until the next unpaid installment due date, unless the insured makes additional changes to the policy that result in additional premium.

SERFF Tracking Number: CHUB-125341846 State: Arkansas
First Filing Company: Federal Insurance Company, ... State Tracking Number: #365516 \$100
Company Tracking Number: 07-6218-RR
TOI: 35.0 Interline Filings Sub-TOI: 35.0001 Personal Interline Filings
Product Name: Masterpiece
Project Name/Number: Reduce Installment Fees/07-6218-RR

Supporting Document Schedules

Satisfied -Name: Filing Memorandum **Review Status:** Filed 11/30/2007
Comments:
Please see attached filing memorandum
Attachment:
Arkansas EFT Filing Document.pdf

Satisfied -Name: Final Printed Pages **Review Status:** Filed 03/12/2008
Comments:
Please see attached final printed pages.
Attachment:
031008 Ark Gen Rules.PDF

Filing Memorandum
Arkansas Department of Insurance
Installment Fees for Direct Bill and Electronic Fund Transfer

We are filing to maintain our current installment fee for direct bill and to propose a reduced fee for electronic fund transfer. The justification for these two fees is attached. Exhibit 1 shows the derivation of these two installment fees. Exhibit 2 shows the current distribution of installment plan in Arkansas. The following explains the processing cost and installment plan.

Processing Cost

The Arkansas processing cost was based on the total charge to the Arkansas branches from Personal Lines Service Branch (PLSB) and Premium Accounting (PASC) as of twelve months ending December 2006. The expense amount is on a fully loaded, incurred basis and is the result of the allocations developed by our monthly cost accounting system that feeds our Management Information System, financial, and statutory reporting. The ultimate number utilized is a summation of the individual allocation results from the cost centers that make up PLSB and PASC, each of which has their own allocation methodology.

Installment Plan

We offer a monthly installment plan to our policyholders. It is up to the policyholder to decide how they want to pay their premium. The following describes how installment fees are being assessed.

Installment Fee Processing:

How Fee is determined – Fee amount is applied based upon the risk state and coverage type(s) represented on each policy.

How Bill Payer is Charged

- Installment fees are not assessed on new Premium, Renewal, Newlines, first time billed endorsements
- Installment fees are charged on all subsequent policy term bills following the “new premium” transaction for as long as the customer decides to pay in installments on that term.
- All customers are offered monthly billing. If the customer elects to pay in full, no installment fee will be assessed. If the customer pays in 2 installments 1 service fee would be assessed.
- Installment fees are not charged on Pending cancellation notices, earned premium bills, installment fees are only charged at the time of standard invoicing.
- How is a payment plan elected – A payment plan is chosen by the customer via their payment amount. The customer can chose to pay any amount between the minimum and total amount due inclusively. If the customer elects to pay ½ of their premium at the time of the first invoice, a second invoice would not generate for roughly 6 months.

Exhibit 2

Distribution of Installment Plans

Arkansas

As of 12/2006

	(1)		(2)=(3)/(1)	(3)
	<u># of</u>	<u>% of</u>	<u>Average</u>	<u>Total</u>
	<u>Policies</u>	<u>Policies</u>	<u>Installment</u>	<u>Installments</u>
			<u>Number</u>	
No installments	1,023	66.1%	0	0
11 installments	80	5.2%	11	880
10 installments	37	2.4%	10	370
9 installments	26	1.7%	9	234
8 installments	19	1.2%	8	152
7 installments	23	1.5%	7	161
6 installments	13	0.8%	6	78
5 installments	20	1.3%	5	100
4 installments	34	2.2%	4	136
3 installments	52	3.4%	3	156
2 installments	62	4.0%	2	124
1 installment	159	10.3%	1	159
Total number of Arkansas policies	1,548	100.0%	1.6	2,550

Policy types

Individual policies. Any of these coverages may be written as an individual policy:

- house (with or without contents);
- condominium;
- cooperative;
- renters;
- valuable articles;
- vehicle;
- family protection;
- liability;
- excess liability.

Package policies. Any two or more of these coverages may be written as a package policy. Workers' Compensation coverage may be requested on the Masterpiece Worksheet, but a separate policy will be issued.

Policy period

A policy will be written for a period of one year and may be extended for successive policy periods.

To establish common anniversary dates, any coverage added to a policy may be written for a period of less than one year on a pro rata basis.

Rate changes

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