

SERFF Tracking Number: FFDC-125503665 State: Arkansas
Filing Company: American Automobile Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: NARGL0108-F
TOI: 05.2 Commercial Multi-Peril - Liability Portion Sub-TOI: 05.2000 CMP Sub-TOI Combinations
Only
Product Name: Pest Control Operators
Project Name/Number: Pest Control Operators/NARGL0108

Filing at a Glance

Company: American Automobile Insurance Company

Product Name: Pest Control Operators SERFF Tr Num: FFDC-125503665 State: Arkansas
TOI: 05.2 Commercial Multi-Peril - Liability SERFF Status: Closed State Tr Num: EFT \$50
Portion Only

Sub-TOI: 05.2000 CMP Sub-TOI Combinations Co Tr Num: NARGL0108-F State Status: Fees verified and received

Filing Type: Form Co Status: Pending Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding

Authors: Gina Bondanza, Hilary Cheda
Disposition Date: 03/06/2008

Date Submitted: 02/27/2008 Disposition Status: Approved

Effective Date Requested (New): 03/01/2008 Effective Date (New): 03/01/2008

Effective Date Requested (Renewal): 03/01/2008 Effective Date (Renewal): 03/01/2008

State Filing Description:

General Information

Project Name: Pest Control Operators

Project Number: NARGL0108

Reference Organization:

Reference Title:

Filing Status Changed: 03/06/2008

State Status Changed: 03/06/2008

Corresponding Filing Tracking Number:

Filing Description:

Dear Sir or Madam:

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Enclosed for your review are revisions to the previously approved proprietary Form and Rule filings. Included with this submission are revised proprietary endorsements Pest Inspection Property Damage Liability Coverage 143154 02 08

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and Pest Control Operators Schedule of Additional Coverages 141282 02 08 as well as the corresponding rules CG-PCO-1 02 08 for use with our Commercial General Liability policies filed in American Automobile Insurance Company.

This is a form and rule filing only, and there is no overall premium or rate impact associated with this filing.

Enclosed in support of this filing are the following documents:

- Pest Inspection Property Damage Liability Coverage 143154 02 08
- Pest Control Operators Schedule of Additional Coverages 141282 02 08
- Commercial Lines Manual CG-PCO- 1 02 08
- Actuarial and Explanatory Memoranda
- State Specific Checklists/Certifications

We look forward to the Department's acknowledgement of this filing to become effective April 1, 2008.

Company and Contact

Filing Contact Information

Hilary Cheda, hcheda@ffic.com
 777 San Marin Drive (415) 899-6968 [Phone]
 Novato, CA 94998 (866) 290-0671[FAX]

Filing Company Information

American Automobile Insurance Company	CoCode: 21849	State of Domicile: Missouri
777 San Marin Drive	Group Code: 761	Company Type:
Novato, CA 94998	Group Name:	State ID Number:
(415) 899-2817 ext. [Phone]	FEIN Number: 22-1608585	

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? Yes

SERFF Tracking Number: FFDC-125503665 *State:* Arkansas
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Fee Explanation: IL = \$50
Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Automobile Insurance Company	\$50.00	02/27/2008	18198451

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	03/06/2008	03/06/2008

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Documents to be included	Note To Reviewer	Gina Bondanza	02/27/2008	02/27/2008

SERFF Tracking Number: FFDC-125503665 *State:* Arkansas
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Disposition

Disposition Date: 03/06/2008

Effective Date (New): 03/01/2008

Effective Date (Renewal): 03/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Form Filing Transmittal	Approved	Yes
Form	Pest Inspection Property Damage Liability Coverage	Approved	Yes
Form	Pest Control Operators Schedule of Additional Coverages	Approved	Yes

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Only
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Project Name/Number: Pest Control Operators/NARGL0108

Note To Reviewer

Created By:

Gina Bondanza on 02/27/2008 03:07 PM

Subject:

Documents to be included

Comments:

Hello,

Please see the additional documents that will go with this filing.

Thank you,

Gina

Pest Inspection Property Damage Liability Coverage –143154 ~~08-04~~ 02 08

Policy Amendment(s) Commercial General Liability

The following amendments apply only with respect to Pest Control Property Damage Liability provided by this endorsement. In consideration of the additional premium, the policy is amended to include the following:

Section I - Coverages

Coverage P. Pest Inspection Property Damage Liability

1. Insuring Agreement

a. We will pay those sums that the insured becomes legally obligated to pay as **property damage** because of a negligent act, error or omission in conducting a **pest inspection** during the policy period. We will have the right and duty to defend any **suit** seeking such damages, including the right to select counsel. We may at our discretion investigate and settle any claim or **suit** that results. But:

(1) The amount we will pay is limited as described in Section III - Limits of Insurance; and

(2) Our right and duty to defend ends when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverage P.

No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under Supplementary Payments.

b. This insurance applies to **property damage** only if :

(1) The **pest inspection** was made by the insured:

(a) within the coverage territory; and

(b) while acting within the scope of their employment and duties in the conduct of **your** pest control contractor business shown in the Declarations

This Form must be attached to Change Endorsement when issued after the policy is written.
One of the **Fireman's Fund Insurance Companies** as named in the policy.

Secretary

President

143154 ~~08-04~~ 02 08

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- (2) The **pest infestation** was not indicated in the insured's **pest inspection** report but should have been discovered through a routine inspection;

2. Exclusions

This insurance does not apply to any claim for:

- a. **Property Damage** for which the insured is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages:

(1) Assumed in a contract or agreement that is an **insured contract**, provided that the **property damage** begins subsequent to the execution of the contract or agreement; or

(2) That the insured would have in the absence of the contract or agreement.

- b. Actual service fees for the insured's inspection or treatment of any property for pests.

- c. **Property damages** to:

(1) Property that you own, rent or occupy;

(2) Premises you sell, give away, or abandon, if the property damage arises out of any part of those premises;

(3) Property loaned to you; or

- d. (1) **Property damage** arising out of the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of pollutants.

(a) At or from the premises, site or location which is or was occupied by, or rented or loaned to any insured.

(b) At or from premises, site or location which is or was at any time used by or for any insured or others for the handling, storage, disposal, processing or treatment of waste;

(c) Which are or were at any time transported, handled, stored, treated, disposed of, or processed as waste by any insured or any person or organization for whom you may be legally responsible; or

(d) At or from any premises, site or location on which any insured or any

contractor or subcontractors working directly or indirectly in any insured's behalf are performing operations:

- (i) if the pollutants are brought on or to the premises, site, location in connection with such operations by such insured, contractor or subcontractor; or
- (ii) if the operations are to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of pollutants,

Subparagraphs (a) and (d)(1) do not apply to **property damage** arising out of heat, smoke or fumes from a hostile fire.

As used in this exclusion, a hostile fire means one which becomes uncontrollable or breaks out from where it is intended to be.

(2) Any loss, cost or expense arising out of any:

- (a) Request, demand, or order that any insured or others test for, monitor, clean-up, remove, contain, treat, detoxify, neutralize, or in any way respond to, or assess the effects of pollutants;
- (b) Claim, or **suit** by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, or neutralizing or in any way responding to, or

Pollutants means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

Supplementary Payments is amended to apply to Coverage P.

Section II. Who is an Insured

1. If you are designated in the Declarations as:

- a. An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
- b. A partnership or joint venture, you are an insured. Your members, partners, and their spouses are also insureds, but only with respect to the conduct of your **pest control contractors** business designated in the Declarations.

- c. An organization other than a partnership or a joint venture, you are an insured. Your **executive officers** and directors are insureds, but only with respect to their duties as your officers and directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.
2. Your **employees** other than your **executive officers** are also insureds, but only for acts within the scope of employment by you.
3. Your legal representatives if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Form.

Section III - Limits of Insurance and Deductible Amount

1. The Limits of Insurance shown in the Schedule for this Coverage Form and rules below fix the most we will pay regardless of the number of:
 - a. Insureds;
 - b. Acts, errors or omissions causing the damages;
 - c. Claims made or **suits** brought;
 - d. Persons or organizations making claims or bringing **suits**.

2. Pest Inspection Property Damage Aggregate Limit

The **Pest Inspection Property Damage** Aggregate Limit shown in the Schedule for this Coverage Form is the most we will pay for the sum of all **property damage** included in this coverage afforded under this Coverage P.

3. Each Claim Limit

Subject to 2. above, the **Pest Inspection Property Damage** Limit shown in the Schedule for this Coverage Form is the most we will pay for all **property damage** arising out of any one premises where you performed a **pest inspection**.

All claims which arise out of a single act, error or omission or a series of related acts, errors or omissions, whether committed by one or more insureds, with respect to the **pest inspection** of any one premises, will be considered a single claim.

4. The Limits of Liability of this Coverage P. will apply:

- a. Separately from and not cumulatively to, any other coverage afforded under the

Commercial General Liability Coverages, and

- b. To each consecutively annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations for this Coverage Form. If the policy is extended for an additional period of less than 12 months, the additional period will be deemed to be part of the last preceding period for purposes of determining the Limits of Insurance.

5. Deductible Amount

Before we pay any claim under this Coverage Part, we will subtract the Deductible amount stated in the Schedule. The most we will pay is the lesser of:

- a. That part of such damages which exceeds the Deductible Amount; or
- b. The Limit of the Insurance that applies.

If we pay part or all of the Deductible Amount to effect settlement of any claim or **suit**, we will notify the first Named Insured stated in the Declarations of our payment of the Deductible. The first Named Insured shall reimburse us for part of the Deductible Amount that we paid within 30 days of our notification.

The terms of this insurance shall apply irrespective of the application of the Deductible Amount, including those with respect to:

- a. Our right and duty to defend any claim or **suit** seeking damages; and
- b. Your duties in the event of an occurrence, claim or **suit**.

Section IV - Commercial General Liability Conditions

of the Policy will apply except as follows:

The following Condition is added.

10. Records

The first Named Insured shall keep on file at your business office a copy of the completed graph or other documentation of all premises subject to a **pest inspection**. You shall send us copies of such items as requested.

Section V – Definitions of the policy is amended as follows:

1. The definition of **Property damage** is replaced with the following:

Property damage means the cost to repair or replace real property because of **pest** infestation.

2. The following definitions are added:

- a. **Mold** means any type or form of fungus, including mildew, spores, scents or by products produced or released by fungi.
- b. **Pest** means termites, powder pest beetles, old house bores, wood boring beetles, wood boring wasps, carpenter bees or arthropod insects which damage and infest seasoned wood in a structure.
- c. **Pest inspection** means a contracted and graphed or other form of documented inspection completed by you during this policy period to determine if there is an infestation of termites, powder pest beetles, old house bores, wood boring beetles, wood boring wasps, carpenter bees or arthropod insects which damage and infest wood in a structure. A **pest inspection** may include inspection for **mold** as it pertains to reporting conditions conducive to wood decaying fungus only. A **pest inspection does not** include inspection for mold as it pertains to type of or health hazards related to mold. A **pest inspection** does not include any treatment for or the removal of **mold** or bacteria.

All other terms and conditions of the policy apply.

Pest Control Operators Schedule of Additional Coverages - 141282 ~~01-99~~ 02-08

Policy Amendment(s) Commercial General Liability

Insured:

Policy Number:

Producer:

Effective Date:

Declarations

Insurance is provided only for those coverages for which an entry is shown below.

Description of Coverage	Limits of Insurance		Deductible Amount
___ Pest Control Property Damage	\$	Each Claim	\$
	\$	Aggregate	
___ Pesticide or Herbicide Applicator	\$	Each Claim	\$
	\$	Aggregate	
___ Work Site Clean-Up	\$	Each Claim	\$
	\$	Aggregate	
___ Transit Pollution Coverage	<u>\$1,000,000</u>	Each Claim	<u>None</u>
	<u>\$1,000,000</u>	Aggregate	

(If no entry appears above, information required to complete this Endorsement will be shown in the Declarations as applicable to this Endorsement.)

This Form must be attached to Change Endorsement when issued after the policy is written.
 One of the **Fireman's Fund Insurance Companies** as named in the policy.



Secretary



President

**Explanatory Memorandum
Pest Control Operators**
Fireman's Fund Insurance Companies®

Enclosed for your review are revisions to the previously approved forms, 143154 08 04 and 141282 01 99.

Changes to the Pest Control Property Damage Liability Coverage Form, 143154:

- 1) The Pest Control Industry has been changing slightly over the past several years. It now appears that some states are moving to require that Pest Control Operators inspect for and report on mold as it pertains to reporting conditions conducive to wood decaying fungus. As a result, we are broadening our coverage by eliminating the attachment of the Fungi or Bacteria Exclusion, form CG 21 67 12 04, to our GL policy and adding definitions for both **Pest Inspection**, which includes pertinent inspection for mold, and **Mold**.
- 2) The original document, filed in 0804, required that the “insured’s responsibility to pay such **property damage** is determined in a **suit** or a settlement we agreed to.” This revision eliminates this language.
- 3) The updated document adds the right for FFIC to “select council.”

There is no rate change associated with this proposed revision of form 143154.

Changes to the Pest Control Operators Schedule of Additional Coverages, Form 141282:

This form is being modified to reflect limit changes associated with:

- 1) **Transit Pollution Coverage**, form number 141278. Fireman's Fund intends to offer \$1M limits of Transit Pollution Coverage for free on all Pest Control GL policies. Currently, we are charging \$25 / vehicle for \$100K limits. Actuarial analysis indicates negligible transit pollution losses, indicating our ability to offer this coverage for no additional cost. Please refer to the Actuarial Memorandum for further information.
- 2) **Work Site Cleanup**. Work site cleanup is offered as part of the Pesticide or Herbicide Operators Coverage Extension, form 143159. In some cases in the past, we have sublimited worksite cleanup. Fireman's Fund no longer intends to sublimit this coverage, but instead include the coverage at full endorsement limits. As there is no difference in price between a sublimited policy and a non-sublimited policy, **there will be no rate change associated with this proposed modification.**

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 Only
 Product Name: Pest Control Operators
 Project Name/Number: Pest Control Operators/NARGL0108

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Pest Inspection Property Damage Liability Coverage	143154	02 08	Endorsement/Amendment/Conditions	Replaced Form #:0.00 143154 08 04 Previous Filing #: NNMCGGL0104 PK		143154 New.pdf
Approved	Pest Control Operators Schedule of Additional Coverages	141282	02 08	Endorsement/Amendment/Conditions	Replaced Form #:0.00 141282 01 99 Previous Filing #: NNMCGGL0199. 029		141282_schedule_1_9_08.pdf

Pest Inspection Property Damage Liability Coverage 143154 02 08

Policy Amendment(s) Commercial General Liability

The following amendments apply only with respect to Pest Control Property Damage Liability provided by this endorsement. In consideration of the additional premium, the policy is amended to include the following:

Section I - Coverages

Coverage P. Pest Inspection Property Damage Liability

1. Insuring Agreement

a. We will pay those sums that the insured becomes legally obligated to pay as **property damage** because of a negligent act, error or omission in conducting a **pest inspection** during the policy period. We will have the right and duty to defend any **suit** seeking such damages, including the right to select counsel. We may at our discretion investigate and settle any claim or **suit** that results. But:

(1) The amount we will pay is limited as described in Section III - Limits of Insurance; and

(2) Our right and duty to defend ends when we have used up the applicable limit of insurance in the payment of judgments or settlements under Coverage P.

No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under Supplementary Payments.

b. This insurance applies to **property damage** only if :

(1) The **pest inspection** was made by the insured:

(a) within the coverage territory; and

(b) while acting within the scope of their employment and duties in the conduct of **your** pest control contractor business shown in the Declarations

This Form must be attached to Change Endorsement when issued after the policy is written.

One of the **Fireman's Fund Insurance Companies** as named in the policy.



Secretary



President

- (2) The **pest infestation** was not indicated in the insured's **pest inspection** report but should have been discovered through a routine inspection;

2. Exclusions

This insurance does not apply to any claim for:

- a. **Property Damage** for which the insured is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages:

- (1) Assumed in a contract or agreement that is an **insured contract**, provided that the **property damage** begins subsequent to the execution of the contract or agreement; or

- (2) That the insured would have in the absence of the contract or agreement.

- b. Actual service fees for the insured's inspection or treatment of any property for pests.

- c. **Property damages** to:

- (1) Property that you own, rent or occupy;

- (2) Premises you sell, give away, or abandon, if the property damage arises out of any part of those premises;

- (3) Property loaned to you; or

- d. (1) **Property damage** arising out of the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of pollutants.

- (a) At or from the premises, site or location which is or was occupied by, or rented or loaned to any insured.

- (b) At or from premises, site or location which is or was at any time used by or for any insured or others for the handling, storage, disposal, processing or treatment of waste;

- (c) Which are or were at any time transported, handled, stored, treated, disposed of, or processed as waste by any insured or any person or organization for whom you may be legally responsible; or
- (d) At or from any premises, site or location on which any insured or any contractor or subcontractors working directly or indirectly in any insured's behalf are performing operations:
 - (i) if the pollutants are brought on or to the premises, site, location in connection with such operations by such insured, contractor or subcontractor; or
 - (ii) if the operations are to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of pollutants,

Subparagraphs (a) and (d)(1) do not apply to **property damage** arising out of heat, smoke or fumes from a hostile fire.

As used in this exclusion, a hostile fire means one which becomes uncontrollable or breaks out from where it is intended to be.

- (2) Any loss, cost or expense arising out of any:
 - (a) Request, demand, or order that any insured or others test for, monitor, clean-up, remove, contain, treat, detoxify, neutralize, or in any way respond to, or assess the effects of pollutants;
 - (b) Claim, or **suit** by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, or neutralizing or in any way responding to, or

Pollutants means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

Supplementary Payments is amended to apply to Coverage P.

Section II. Who is an Insured

- 1. If you are designated in the Declarations as:

143154 02 08

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- a. An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
 - b. A partnership or joint venture, you are an insured. Your members, partners, and their spouses are also insureds, but only with respect to the conduct of your **pest control contractors business** designated in the Declarations.
 - c. An organization other than a partnership or a joint venture, you are an insured. Your **executive officers** and directors are insureds, but only with respect to their duties as your officers and directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.
2. Your **employees** other than your **executive officers** are also insureds, but only for acts within the scope of employment by you.
 3. Your legal representatives if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Form.

Section III - Limits of Insurance and Deductible Amount

1. The Limits of Insurance shown in the Schedule for this Coverage Form and rules below fix the most we will pay regardless of the number of:
 - a. Insureds;
 - b. Acts, errors or omissions causing the damages;
 - c. Claims made or **suits** brought;
 - d. Persons or organizations making claims or bringing **suits**.
2. **Pest Inspection Property Damage** Aggregate Limit

The **Pest Inspection Property Damage** Aggregate Limit shown in the Schedule for this Coverage Form is the most we will pay for the sum of all **property damage** included in this coverage afforded under this Coverage P.

3. Each Claim Limit

Subject to 2. above, the **Pest Inspection Property Damage** Limit shown in the Schedule for this Coverage Form is the most we will pay for all **property damage** arising out of any one premises where you performed a **pest inspection**.

All claims which arise out of a single act, error or omission or a series of related acts, errors or omissions, whether committed by one or more insureds, with respect to the **pest inspection** of any one premises, will be considered a single claim.

4. The Limits of Liability of this Coverage P. will apply:
 - a. Separately from and not cumulatively to, any other coverage afforded under the Commercial General Liability Coverages, and
 - b. To each consecutively annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations for this Coverage Form. If the policy is extended for an additional period of less than 12 months, the additional period will be deemed to be part of the last preceding period for purposes of determining the Limits of Insurance.

5. Deductible Amount

Before we pay any claim under this Coverage Part, we will subtract the Deductible amount stated in the Schedule for this Coverage Form. The most we will pay is the lesser of:

- a. That part of such damages which exceeds the Deductible Amount; or
- b. The Limit of the Insurance that applies.

If we pay part or all of the Deductible Amount to effect settlement of any claim or **suit**, we will notify the first Named Insured stated in the Declarations of our payment of the Deductible. The first Named Insured shall reimburse us for part of the Deductible Amount that we paid within 30 days of our notification.

The terms of this insurance shall apply irrespective of the application of the Deductible Amount, including those with respect to:

- a. Our right and duty to defend any claim or **suit** seeking damages; and
- b. Your duties in the event of an occurrence, claim or **suit**.

Section IV - Commercial General Liability Conditions
of the Policy will apply except as follows:

The following Condition is added.

10. Records

The first Named Insured shall keep on file at your business office a copy of the completed graph or other documentation of all premises subject to a **pest inspection**. You shall send us copies of such items as requested.

Section V – Definitions of the policy is amended as follows:

1. The definition of **Property damage** is replaced with the following:

Property damage means the cost to repair or replace real property because of **pest** infestation.

2. The following definitions are added:

- a. **Mold** means any type or form of fungus, including mildew, spores, scents or by products produced or released by fungi.
- b. **Pest** means termites, powder pest beetles, old house bores, wood boring beetles, wood boring wasps, carpenter bees or arthropod insects which damage and infest seasoned wood in a structure.
- c. **Pest inspection** means a contracted and graphed or other form of documented inspection completed by you during this policy period to determine if there is an infestation of termites, powder pest beetles, old house bores, wood boring beetles, wood boring wasps, carpenter bees or arthropod insects which damage and infest wood in a structure. A **pest inspection** may include inspection for **mold** as it pertains to reporting conditions conducive to wood decaying fungus only. A **pest inspection does not** include inspection for mold as it pertains to type of or health hazards related to mold. A **pest inspection** does not include any treatment for or the removal of **mold** or bacteria.

All other terms and conditions of the policy apply.

Pest Control Operators Schedule of Additional Coverages - 141282 02 08

Policy Amendment(s) Commercial General Liability

Insured:

Policy Number:

Producer:

Effective Date:

Declarations

Insurance is provided only for those coverages for which an entry is shown below.

Description of Coverage	Limits of Insurance		Deductible Amount
___ Pest Control Property Damage	\$	Each Claim	\$
	\$	Aggregate	
___ Pesticide or Herbicide Applicator	\$	Each Claim	\$
	\$	Aggregate	
___ Transit Pollution Coverage	\$1,000,000	Each Claim	None
	\$1,000,000	Aggregate	

(If no entry appears above, information required to complete this Endorsement will be shown in the Declarations as applicable to this Endorsement.)

This Form must be attached to Change Endorsement when issued after the policy is written.

One of the **Fireman's Fund Insurance Companies** as named in the policy.



Secretary



President

SERFF Tracking Number: FFDC-125503665 *State:* Arkansas
Filing Company: American Automobile Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: NARGL0108-F
TOI: 05.2 Commercial Multi-Peril - Liability Portion *Sub-TOI:* 05.2000 CMP Sub-TOI Combinations
Only
Product Name: Pest Control Operators
Project Name/Number: Pest Control Operators/NARGL0108

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: FFDC-125503665 State: Arkansas
Filing Company: American Automobile Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: NARGL0108-F
TOI: 05.2 Commercial Multi-Peril - Liability Portion Sub-TOI: 05.2000 CMP Sub-TOI Combinations
Only
Product Name: Pest Control Operators
Project Name/Number: Pest Control Operators/NARGL0108

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 03/06/2008

Comments:

Attachment:

NARGL0108 arpctd-1.pdf

Satisfied -Name: Form Filing Transmittal **Review Status:** Approved 03/06/2008

Comments:

Attachment:

Form Filing Transmittal NARGL0108.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 border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></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 #
Fireman's Fund Insurance Company	0761

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
American Automobile Insurance Company	Missouri	21849	22-1608585	

5. Company Tracking Number	NARGL0108
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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
	Hilary Cheda 777 San Marin Drive Novato, CA 94998	Regulatory Analyst	415.899.6968	866.290.0671	hcheda@ffic.com

7. Signature of authorized filer	<i>Hilary Cheda</i>
8. Please print name of authorized filer	Hilary Cheda

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

9.	Type of Insurance (TOI)	5.2
10.	Sub-Type of Insurance (Sub-TOI)	5.2000
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: 03/01/2008 Renewal: 03/01/2008

Property & Casualty Transmittal Document---

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	02/12/2008
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

20.	This filing transmittal is part of Company Tracking #	NARGL0108
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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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Enclosed for your review are revisions to the previously approved proprietary Form and Rule filings. Included with this submission are revised proprietary endorsements Pest Inspection Property Damage Liability Coverage 143154 02 08 and Pest Control Operators Schedule of Additional Coverages 141282 02 08 for use with our Commercial General Liability policies filed in American Automobile Insurance Company.

This is a form filing only, and there is no overall premium or rate impact associated with this filing.

Enclosed in support of this filing are the following documents:

- Pest Inspection Property Damage Liability Coverage 143154 02 08
- Pest Control Operators Schedule of Additional Coverages 141282 02 08
- Actuarial and Explanatory Memoranda
- State Specific Checklists/Certifications

We look forward to the Department's acknowledgement of this filing to become effective March 1, 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 #:	

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.)**

Effective January 1, 2006

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 #	NARGL0108			
2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>	NARGL0108			
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	Pest Inspection Property Damage Liability Coverage	143154 02 08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	143154 08 04	NARCGGL0104PK
02	Pest Control Operators Schedule of Additional Coverages	141281 02 08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	141282 01 99	NARCGGL0199.0199
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		