

<i>SERFF Tracking Number:</i>	<i>NAVG-125529734</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Navigators Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>SLPL-R-308-AR</i>		
<i>TOI:</i>	<i>17.1 Other Liability - Claims Made Only</i>	<i>Sub-TOI:</i>	<i>17.1019 Professional Errors & Omissions Liability</i>
<i>Product Name:</i>	<i>Small Lawyers Professional Liability</i>		
<i>Project Name/Number:</i>	<i>Small Lawyers Professional Liability Program/SLPL-R-308-AR</i>		

Filing at a Glance

Company: Navigators Insurance Company	SERFF Tr Num: NAVG-125529734	State: Arkansas
Product Name: Small Lawyers Professional Liability		
TOI: 17.1 Other Liability - Claims Made Only	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 17.1019 Professional Errors & Omissions Liability	Co Tr Num: SLPL-R-308-AR	State Status: Fees verified and received
Filing Type: Rate/Rule	Co Status:	Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
	Author: Sean Hayes	Disposition Date: 03/19/2008
	Date Submitted: 03/19/2008	Disposition Status: Filed
Effective Date Requested (New): On Approval		Effective Date (New):
Effective Date Requested (Renewal): On Approval		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: Small Lawyers Professional Liability Program	Status of Filing in Domicile: Pending
Project Number: SLPL-R-308-AR	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 03/19/2008	
State Status Changed: 03/19/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
This is a rule filing for our Small lawyer's Professional Liability program being submitted for your review and approval.	

Company and Contact

Filing Contact Information

SERFF Tracking Number: NAVG-125529734 State: Arkansas
Filing Company: Navigators Insurance Company State Tracking Number: EFT \$25
Company Tracking Number: SLPL-R-308-AR
TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability
Product Name: Small Lawyers Professional Liability
Project Name/Number: Small Lawyers Professional Liability Program/SLPL-R-308-AR

Sean Hayes, Compliance Analyst shayes@navg.com
1375 E. Woodfield Rd. (847) 285-9042 [Phone]
Schaumburg, IL 60173 (847) 230-1934[FAX]

Filing Company Information

Navigators Insurance Company CoCode: 42307 State of Domicile: New York
1375 E. Woodfield Rd. Group Code: 510 Company Type: P&C
Schaumburg, IL 60173 Group Name: Navigators Group, State ID Number:
Inc.
(847) 285-9006 ext. [Phone] FEIN Number: 13-3138390

SERFF Tracking Number: NAVG-125529734 State: Arkansas
Filing Company: Navigators Insurance Company State Tracking Number: EFT \$25
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Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No
Fee Explanation: Rules Filing
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Navigators Insurance Company	\$25.00	03/19/2008	18778888

SERFF Tracking Number: NAVG-125529734 State: Arkansas
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TOI: 17.1 Other Liability - Claims Made Only Sub-TOI: 17.1019 Professional Errors & Omissions Liability
Product Name: Small Lawyers Professional Liability
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	03/19/2008	03/19/2008

SERFF Tracking Number: NAVG-125529734 *State:* Arkansas
Filing Company: Navigators Insurance Company *State Tracking Number:* EFT \$25
Company Tracking Number: SLPL-R-308-AR
TOI: 17.1 Other Liability - Claims Made Only *Sub-TOI:* 17.1019 Professional Errors & Omissions
Liability
Product Name: Small Lawyers Professional Liability
Project Name/Number: Small Lawyers Professional Liability Program/SLPL-R-308-AR

Disposition

Disposition Date: 03/19/2008

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *NAVG-125529734* *State:* *Arkansas*
Filing Company: *Navigators Insurance Company* *State Tracking Number:* *EFT \$25*
Company Tracking Number: *SLPL-R-308-AR*
TOI: *17.1 Other Liability - Claims Made Only* *Sub-TOI:* *17.1019 Professional Errors & Omissions*
Liability

Product Name: *Small Lawyers Professional Liability*
Project Name/Number: *Small Lawyers Professional Liability Program/SLPL-R-308-AR*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: NAVG-125529734 *State:* Arkansas
Filing Company: Navigators Insurance Company *State Tracking Number:* EFT \$25
Company Tracking Number: SLPL-R-308-AR
TOI: 17.1 Other Liability - Claims Made Only *Sub-TOI:* 17.1019 Professional Errors & Omissions Liability

Product Name: Small Lawyers Professional Liability
Project Name/Number: Small Lawyers Professional Liability Program/SLPL-R-308-AR

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Rate Guidelines 0308		Replacement	Rate Guidelines Arkansas.pdf

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

<i>Mandatory Characteristics</i>	<i>Preferred Characteristics</i>
<p>1. <i>Firm Size</i> Firms consisting of 1-10 attorneys are eligible.</p>	<p>1. <i>Client Communication</i> Use of engagement letters on all new clients, fee agreements and declination letters otherwise apply appropriate surcharge.</p>
<p>2. <i>Support Staff</i> An eligible firm must have at least one (1) support staff member. Notwithstanding, a sole proprietor that can show his/her backup attorney can act as support is eligible.</p>	<p>2. <i>Fee Disputes</i> Minimal history of suing for fees (no more than 5 times in two years).</p>
<p>3. <i>Back-up Attorney</i> A sole proprietor must have a back-up attorney that is familiar with the insured's practice.</p>	<p>3. <i>Conflict Avoidance</i> A formal conflict avoidance system must be in place. Complexity of the firm will dictate the sophistication of the system.</p>
<p>4. <i>Docket Control</i> An eligible risk must have a docket system that is maintained by 2 separate people.</p>	<p>4. <i>Client Billings</i> No one client exceeding 30% of a firm's gross income for 3 consecutive years.</p>
<p>5. <i>Claims History</i> A firm must have a claims history consisting of no more than 2 potential claims and combined total claim payments less than \$75,000 within the last 5 years to qualify.</p>	<p>5. <i>Specialization in Areas of Practice</i> Lawyers who specialize in an area of practice tend to present less risk.</p>
<p>6. <i>Disciplinary Action</i> An eligible firm must have acceptable disciplinary action history.</p>	<p>6. <i>Advertising</i> Acceptable advertising practices consisting of ethical statements and truth in advertising must be exhibited.</p>
<p>7. <i>Letterhead Sharing</i> No letterhead sharing.</p>	<p>7. <i>Experience</i> 2 years experience in private practice a minimum.</p>
	<p>8. <i>Continuing Legal Education</i> Continuing legal education regular attendance.</p>

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Base Rates

Metro \$980

Non-Metro \$770

Prior Acts Factors

<u>Number of Years Experience</u>	<u>Factor</u>
0	1.00
1	1.15
2	1.30
3	1.45
4	1.60
5	1.75
6	1.90
7	2.00

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Limits of Liability

Limit	Standard Increase Limit Factor	
\$100,000/\$300,000	1.07	
\$250,000/\$500,000	1.22	
\$500,000/\$500,000	1.30	
\$500,000/\$1,000,000	1.40	
\$1,000,000/\$1,000,000	1.55	
\$1,000,000/\$3,000,000	1.77	
\$2,000,000/\$2,000,000	1.85	
\$2,000,000/\$4,000,000	2.00	

Deductibles

Deductible	Each Claim Deductible Factor
\$1,000	.10
\$2,500	.15
\$5,000	.20
\$7,500	.25
\$10,000	.30
*\$15,000	.35
*\$25,000	.40

Minimum Deductible Per Limit

LIMIT	MINIMUM DEDUCTIBLE
\$100,000/\$300,000	\$1,000
\$250,000/\$500,000	\$1,000
\$500,000/\$500,000	\$2,500
\$500,000/\$1,000,000	\$2,500
\$1,000,000/\$1,000,000	\$5,000
\$1,000,000/\$3,000,000	\$5,000
\$2,000,000/\$2,000,000	\$5,000
\$2,000,000/\$4,000,000	\$5,000

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Areas of Practice

<u>Category I</u>		100%	10% Credit
Administrative	Family Law – excluding Divorce	97-99%	9% Credit
Bankruptcy	Immigration	95-96%	8% Credit
Commercial and Corporate	Labor Management Representation	93-94%	7% Credit
General Litigation - Defense	Mediation/Arbitration	91-92%	6% Credit
Corporate Formation/Alteration	Personal or Bodily Injury – Defense	89-90%	5% Credit
Criminal	Taxation – Individual	87-88%	4% Credit
ERISA or Employee Benefits	Workers Compensation – Defense	85-86%	3% Credit
	Other Defense Work	83-84%	2% Credit
		80-82%	1% Credit
<u>Category II</u>			
Admiralty/Maritime	Labor Union	1% to 20%	1% to 5% Debit
Banking or Financial	Representation/Employee Relations		
Institutions Services – other than loan documentation	Personal or Bodily Injury – Plaintiff	21% to 40%	6% to 10% Debit
Civil Rights - Plaintiff	Real Estate - Commercial		
Collections	Real Estate – Residential	41% to 60%	11% to 15% Debit
Commercial & Corporate	Real Estate – Title		
General Litigation – Plaintiff	Taxation – Commercial	61% to 80%	16% to 20% Debit
Environmental	Wills/Estate/Probate/Trust		
Family Law – Divorce	Workers Compensation – Plaintiff	81% to 100%	21% to 25% Debit
	Other Plaintiff Work		
<u>Category III (1% to 5% Exposure allowed)</u>			
Banking or Financial		1%	5% Debit
Institutions Services – loan documentation, Bonds, Commercial Paper		2%	10% Debit
Mergers/Acquisitions		3%	15% Debit
		4%	20% Debit
		5%	25% Debit
		6% or More	Decline
<u>Category IV</u>			
Other: description provided by the applicant on the application or by addendum			

The Area of Practice total with the higher risk exposure between Categories II and III will determine the applicable debit. Notwithstanding, if 80% or more in Category I, then area of practice specialty credit will apply. *The % of credit or debit applied is directly related to the % of practice

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Defense Area of Practice Credit

1% to 25%	1% to 10% Credit directly	* The % of credit given is related to the % of defense work
26% to 50%	11% to 20% Credit	
51% to 75%	21% to 30% Credit	
76% to 100%	31% to 40% Credit	

Excluded Practice Classes (No % allowed)

- Securities
- Copyright/Patent/Trademark
- Oil/Gas/Mining
- Real Estate Development/Syndication
- Investment Counseling/ Money Management
- Entertainment, Sports or Celebrity

Staff Size Credit:

<u>Size</u>	<u>Factor</u>
1	0
2	.05
3	.10
4	.15
5	.20
6-10	.25

- ❖ Of Counsel Rating: Calculated on the amount of work per week for the Named Insured. For example, in the event Of Counsel devotes 20 hours or more per week working on behalf of the Named Insured then a premium should be charged. In cases when several Of Counsel attorneys work on behalf of the Named Insured then add the time worked by all of the Of Counsel attorneys and charge the appropriate premium, e.g. if all hours add to full time for 1 attorney then charge for 1 attorney.
- ❖ Attorneys Joining the Firm Mid-Policy Term: No additional premium will be assessed mid policy term.
- ❖ Attorneys Leaving the Firm Mid-Policy Term: No premium will be returned mid policy term.

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Underwriting Debits and Credits:

<i>Docket Control</i>	10% Credit to 10% Debit
❖ 3 independent docket control systems maintained by at least 2 individuals. Computerized. Tickler system and perpetual calendar or pocket diary/day timer and/or dual calendar.	10% Credit
❖ 2 independent docket control systems maintained by at least 2 individuals. One system computerized.	5% Credit
❖ 2 independent docket control systems maintained by at least 2 individuals. Neither system computerized. Tickler system, perpetual calendar, dual calendar or pocket diary/day timer.	0% Credit/Debit
❖ 2 independent docket control system maintained by at least 2 people. Neither system computerized. Manual tickler system, perpetual calendar dual calendar or pocket diary/day timer.	5% Debit
❖ 1 docket control system maintained by at least 2 people. Not computerized. Tickler system, perpetual calendar dual calendar or pocket diary/day timer.	10% Debit

<i>Conflict of Interest</i>	10% Credit to 10% Debit
❖ Computer and at least 1 other backup system	10% Credit
❖ Computer	5% Credit
❖ Multiple Index File	0% Credit/Debit
❖ Single Index File	5% Debit
❖ Oral/Memory. No formal conflict avoidance system.	10% Debit

<i>Communication</i>	10% Credit to 10% Debit
❖ Engagement letters, written fee agreements and declination letter used for all new matters to the firm.	10% Credit
❖ Engagement letters, written fee agreements letter used for all new matters to the firm.	5% Credit
❖ Firm uses only 2 of the following but not on all matters: engagement letters, written fee agreements, declination letters	0% Credit/Debit
❖ Firm uses only one letter	5% Debit
❖ Firm does not use engagement letters, written fee agreements or declination letters	0 to 10% Debit

Maximum Underwriting Net Debit/Credit 30%

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Claims and Firm Management Debit and Credit:

<i>Claims</i>	10% Credit to 10% Debit
❖ No claims activity in past 5 years	10% Credit
❖ 1 circumstance in past 5 years. No payment.	5% Credit
❖ 2 circumstances in past 5 years. No payment.	0% Credit/Debit
❖ 2 circumstances in past 5 years. Low payment.	5% Debit
❖ 2 circumstances within past 5 years and/or payment of \$75,000	10% Debit

<i>Firm Management</i>	20% Credit to 20% Debit
❖ Support Staff Ratio Is: 1 Clerk/Paralegal To 2 Attorneys Or 1 Secretary To 1 Attorney	2% Credit
❖ Regular CLE	2% Credit
❖ Stability Of Professional Staff: All Have Been With The Firm For More Than 3 Years	2% Credit
❖ Officer To Associate Ratio Is At Least 1:1	2% Credit
❖ Continues Insurance History	2% Credit
❖ No Outside Interests	2% Credit
❖ Billings Within 90 Days Of Services Rendered	2% Credit
❖ Less Than 5 Suits For Fees In Past 2 Years	2% Credit
❖ Advertising – Services And Officers Represented Consistent With Those On Application	2% Credit
❖ Frequent Docket Cross-Checking: Daily To Weekly	2% Credit
❖ Support Staff Ratio Is Less Than: 1 Clerk/Paralegal To 2 Attorneys Or 1 Secretary To 1 Attorney	2% Debit
❖ No CLE	2% Debit
❖ Stability Of Professional Staff: Majority Have Been With The Firm For Less Than 3 Years	2% Debit
❖ Officer To Associate Ratio Is Less Than 1:1	2% Debit
❖ Gaps In Insurance History	2% Debit
❖ Outside Interests	2% Debit
❖ Billings Over 90 Days Of Services Rendered	2% Debit
❖ More Than 5 Suits For Fees In Past 2 Years	2% Debit
❖ Advertising – Services And Officers Represented Inconsistent With Those On Application	2% Debit
❖ Docket Cross-Checking: Bi-Weekly To Monthly	2% Debit

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

Optional Coverages

Defendants Reimbursement Premium	\$30.00 Per Attorney (all must be covered)
Title Insurance Agency Surcharge Supplement 5 Required	\$150.00 Per Title Agent Insured/Year
Excess Non-Profit Directors & Officers Supplement 3 Required	\$150.00 Per Attorney Insured/Year

Claims Expenses in Addition to the Limits of Liability Coverage

Add 10% surcharge to the annual premium for Defense Costs outside the limits of liability.

First Dollar Defense Coverage

Add 10% surcharge to the annual premium for First Dollar Defense coverage.

Endorsements

War Military Action and Terrorism Exclusion NAV 055 (1102)

- ❖ Policyholder electing to exclude coverage for acts errors or omissions due to loss caused by acts of War Military Action and Terrorism. Policyholder will receive 5% credit if exclusion elected by indicating in Policyholder Disclosure Notice of Terrorism Insurance Coverage.

In order to consider mid-term changes the following must be submitted:

- ❖ A letter from a principle of the Named Insured outlining the underlying reasons for the change(s).
- ❖ A claims update letter signed and dated by a principle of the firm.

Limits of Liability LPL NAV 031 (0302)

- ❖ Revised mid policy term will be calculated on a prorated basis considering the Premium Calculation Formula, premium is due or returned within 30 days, exhibited by change endorsement to the policy.

Deductible LPL NAV 026 (0302)

- ❖ Revised mid policy term will be calculated on a prorated basis considering the Premium Calculation Formula, premium is due or returned within 30 days, exhibited by change endorsement to the policy.

Optional Coverages

- ❖ Revised mid policy term will be calculated on a prorated basis considering the Premium Calculation Formula, premium is due or returned within 30 days, exhibited by change endorsement to the policy
- ❖ Title Agency LPL NAV 042 (0302)
- ❖ Defendants Reimbursement LPL NAV 027 (0302)
- ❖ Directors and Officers LPL NAV 029 (0302)

Cancellations LPL NAV 036 (0302)

NAVIGATORS INSURANCE COMPANY RATE GUIDELINES- ARKANSAS

- ❖ Policy cancelled by the insured on a short rate basis
- ❖ Policy cancelled by the company on a prorated basis
- ❖ If the policy is financed then cancellation is on a prorated basis

Endorsements (continued)

Extended Reporting Period LPL NAV 030 (0302)

Company or Insured Cancellation

- ❖ 12 Months @ 100% of the Policy's last revised annual premium
- ❖ 24 Months @ 150% of the Policy's last revised annual premium
- ❖ 36 Months @ 200% of the Policy's last revised annual premium
- ❖ 60 Months @ 275% of the Policy's last revised annual premium

Non-Practicing Extended Reporting Period LPL NAV 033 (0302)

Company or Insured Cancellation

- ❖ 12 Months @ 100% of the Policy's last revised annual premium per lawyer
- ❖ 24 Months @ 150% of the Policy's last revised annual premium per lawyer
- ❖ 36 Months @ 200% of the Policy's last revised annual premium per lawyer
- ❖ 60 Months @ 275% of the Policy's last revised annual premium per lawyer

Policy Extension LPL NAV 037 (0302)

- ❖ Policies usually may not be extended for more than 60 days and will only be extended in unusual circumstances. An update letter may be required. Premium will be calculated on a prorated basis considering the Rate Calculation Formula.

Declarations Page and Endorsement Corrections LPL NAV 035 (0302)

- ❖ In the event a typographical error needs to be corrected on the declarations for which we have no specific endorsement, such as policy number, forms listed, entity type, then Amendatory Endorsement XLAW NAV 035 (0302) is used. This endorsement shall also be used to correct fields on endorsements involving policy number, sequence number and effective date.

Mid-Term Insured Merger or Acquisitions

- ❖ In the event an insured firm has merged with or acquired another firm, an application for the new entity may be required to determine the acceptability of the new exposures, including predecessor and claims history. A name change endorsement may be used if the risk has changed only slightly. A cancel/rewrite may be preferred in a case in which the risk has materially changed. If the firm is a sole proprietor and adds an attorney mid-term cancel/rewrite is not necessary. If, however, the sole proprietor changes the name of the entity due to adding a partner, merging with or acquiring another firm an application for the new entity may be required to determine the acceptability of the new exposures. A cancel/rewrite may be in order.

Mid-Term Submission

- ❖ Generally, requests for quotations mid-term are to be declined. Only unusual circumstances will be considered, such as those in which a carrier has become insolvent, has been downgraded or is leaving a market.

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Product Name: Small Lawyers Professional Liability
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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Filed 03/19/2008

Comments:

Attachment:

AR Cert Form Rules.pdf

Bypassed -Name: NAIC Loss Cost Filing Document
for OTHER than Workers' Comp **Review Status:** Filed 03/19/2008

Bypass Reason: Not Applicable

Comments:

Bypassed -Name: NAIC loss cost data entry document **Review Status:** Filed 03/19/2008

Bypass Reason: Not Applicable

Comments:

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

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	
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4a.	Rate Change by Company (As Proposed)
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

4b.	Rate Change by Company (As Accepted) For State Use Only
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5.	Overall Rate Information (Complete for Multiple Company Filings only)
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		COMPANY USE	STATE USE
5a	Overall percentage rate indication (when applicable)		
5b	Overall percentage rate impact for this filing		
5c	Effect of Rate Filing – Written premium change for this program		
5d	Effect of Rate Filing – Number of policyholders affected		

6.	Overall percentage of last rate revision	
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7.	Effective Date of last rate revision	
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	
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9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	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	