

SERFF Tracking Number: TRVD-125520459 State: Arkansas  
 First Filing Company: The Charter Oak Fire Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: 2008-03-0007  
 TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners  
 Liability  
 Product Name: Commercial Multi Peril - Master Pac Amendatory Provisions Green Building and Business Personal Property Coverage  
 Enhancements - Form Filing  
 Project Name/Number: Commercial Multi Peril - Master Pac Amendatory Provisions Green Building and Business Personal Property Coverage  
 Enhancements - Form Filing/2008-03-0007

## Filing at a Glance

Companies: The Charter Oak Fire Insurance Company, The Phoenix Insurance Company, The Travelers Indemnity Company, The Travelers Indemnity Company of America, The Travelers Indemnity Company Of Connecticut, Travelers Property Casualty Company of America, Travelers Casualty Insurance Company of America

Product Name: Commercial Multi Peril - Master SERFF Tr Num: TRVD-125520459 State: Arkansas

Pac Amendatory Provisions – Green Building  
 and Business Personal Property Coverage  
 Enhancements - Form Filing

TOI: 05.0 Commercial Multi-Peril - Liability & Non-Liability SERFF Status: Closed State Tr Num: EFT \$50

Sub-TOI: 05.0002 Businessowners Co Tr Num: 2008-03-0007 State Status: Fees verified and received

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

Authors: Margaret Salsbury, Tia Slivinsky Disposition Date: 03/11/2008

Date Submitted: 03/05/2008 Disposition Status: Approved

Effective Date Requested (New): 10/01/2008 Effective Date (New): 10/01/2008

Effective Date Requested (Renewal): 10/01/2008 Effective Date (Renewal): 10/01/2008

State Filing Description:

## General Information

Project Name: Commercial Multi Peril - Master Pac Amendatory Provisions – Green Building and Business Personal Property Coverage Status of Filing in Domicile: Authorized

Enhancements - Form Filing

Project Number: 2008-03-0007

Domicile Status Comments: N/A

Reference Organization: N/A

Reference Number: N/A

Reference Title: N/A

Advisory Org. Circular: N/A



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**Filing Description:**

In compliance with the insurance laws and regulations in your state, our companies respectfully submit one new mandatory endorsement MP T3 56 02 08 to be used with our Master Pac program.

There is no rate impact associated with this form. For a detailed explanation of our form please refer to the enclosed forms transmittal supplement.

Your approval of this filing will be appreciated. Should you have any questions regarding this submission, please feel free to contact me at your convenience.

**Company and Contact**

**Filing Contact Information**

Margaret Salsbury, Senior Regulatory Analyst MSALSBUR@travelers.com  
 One Tower Square (860) 277-6470 [Phone]  
 Hartford, CT 06183 (860) 954-0580[FAX]

**Filing Company Information**

The Charter Oak Fire Insurance Company	CoCode: 25615	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 06-0291290	

The Phoenix Insurance Company	CoCode: 25623	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 06-0303275	

The Travelers Indemnity Company	CoCode: 25658	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 06-0566050	

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The Travelers Indemnity Company of America	CoCode: 25666	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 01683	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 58-6020487	

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The Travelers Indemnity Company Of Connecticut	CoCode: 25682	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 06-0336212	

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Travelers Property Casualty Company of America	CoCode: 25674	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 36-2719165	

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Travelers Casualty Insurance Company of America	CoCode: 19046	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-6470 ext. [Phone]	FEIN Number: 06-0876835	

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: Flat Fee  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Charter Oak Fire Insurance Company	\$50.00	03/05/2008	18339278
The Phoenix Insurance Company	\$0.00	03/05/2008	
The Travelers Indemnity Company	\$0.00	03/05/2008	
The Travelers Indemnity Company of America	\$0.00	03/05/2008	
The Travelers Indemnity Company Of Connecticut	\$0.00	03/05/2008	
Travelers Property Casualty Company of America	\$0.00	03/05/2008	
Travelers Casualty Insurance Company of America	\$0.00	03/05/2008	



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## Disposition

Disposition Date: 03/11/2008  
Effective Date (New): 10/01/2008  
Effective Date (Renewal): 10/01/2008  
Status: Approved  
Comment:

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

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	Amendatory Provisions - Green Building and Personal Property Coverage Enhancements	Approved	Yes

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## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Amendatory Provisions - Green Building and Personal Property Coverage Enhancements	MP T3 56 02 08	02-2008	Endorsement/Amendment/Conditions	New	0.00	TRANSMITTAL - MP T3 56 02 08.pdf FORM - MP T3 56 02 08.pdf

**DEPARTMENT OF INSURANCE**  
**PROPERTY-CASUALTY FORMS TRANSMITTAL SUPPLEMENT**  
**SHEET FOR MULTIPLE FORM FILING**

<b><u>FORM TITLE</u></b>	<b><u>NEW FORM</u></b>	<b><u>REPLACED FORM</u></b>	<b><u>TYPE OF FORM</u></b>	<b><u>DESCRIPTION OF FORM</u></b>
AMENDATORY PROVISIONS-GREEN BUILDING AND BUSINESS PERSONAL PROPERTY COVERAGE ENHANCEMENTS	MP T3 56 02 08	New	E-MP-M	<p>B - This new mandatory form modifies the Businessowners Property Coverage Special Form MP T1 02. This endorsement has been created to broaden coverage in four areas as follows:</p> <ol style="list-style-type: none"> <li>1. <b>Green Building Alternative – Increased Cost</b> coverage is added. This covers additional costs incurred to repair or replace covered buildings damaged by a Covered Cause of Loss using green products or materials and green methods or processes of construction, disposal or recycling. This is additional insurance subject to the lesser of: 1) 5% times the amount we would otherwise pay for the loss of or damage to the building before application of any applicable deductible; or 2) \$25,000 per occurrence limit, regardless of the number of buildings involved.</li> <li>2. <b>Green Building Reengineering and Recertification Expense</b> coverage is added. This covers specified additional expenses incurred to re-attain a pre-loss level of green building certification from a recognized green building authority when the pre-loss level of green building certification is lost due to direct physical loss of or damage to a covered building by a Covered Cause of Loss. It's subject to an additional per occurrence limit of \$25,000 for all buildings, regardless of the number of buildings involved and per building limit equal to 5% of the sum of: 1) The amount paid for covered direct damage loss to the building (including any amount paid under the Green Building Alternatives – Increased Cost Additional Coverage); plus 2) The deductible amount applied.</li> </ol>

**DEPARTMENT OF INSURANCE**  
**PROPERTY-CASUALTY FORMS TRANSMITTAL SUPPLEMENT**  
**SHEET FOR MULTIPLE FORM FILING**

<b><u>FORM TITLE</u></b>	<b><u>NEW FORM</u></b>	<b><u>REPLACED FORM</u></b>	<b><u>TYPE OF FORM</u></b>	<b><u>DESCRIPTION OF FORM</u></b>
AMENDATORY PROVISIONS-GREEN BUILDING AND BUSINESS PERSONAL PROPERTY COVERAGE ENHANCEMENTS	MP T3 56 02 08	New	E-MP-M	<p>3. <b>Green Business Personal Property Alternatives – Increased Cost</b> coverage is added. This covers additional costs incurred to replace business personal property damaged by a Covered Cause of Loss using green products, materials or processes. Additionally, this covers additional costs incurred to repair or replace improvements and betterments damaged by a Covered Cause of Loss using green products, materials or processes. This Coverage Extension is included in, and does not increase, the Business Personal Property Limit of Insurance and is subject to the lesser of: 1) 5% times the amount we would otherwise pay for the loss of or damage to the business personal property before application of any applicable deductible; or 2) \$25,000 per occurrence limit, regardless of the number of premises involved.</p> <p>4. <b>Building and Business Personal Property Alternatives – Increased Period of Restoration</b> coverage is added. This coverage increases the period of restoration, up to a maximum of 30 additional days, to reflect an increased period required to repair or replace damaged buildings or business personal property using “green” products, materials or processes. This Coverage Extension is included in, and does not increase, the amount of coverage available based on the applicable Business Income and Extra Expense provision shown in the Declarations.</p>

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **AMENDATORY PROVISIONS – GREEN BUILDING AND BUSINESS PERSONAL PROPERTY COVERAGE ENHANCEMENTS**

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS PROPERTY COVERAGE SPECIAL FORM

### **A. DEFINITIONS**

As used in this endorsement:

1. **"Green"** means products, materials, methods and processes that conserve natural resources, reduce energy or water consumption, avoid toxic or other polluting emissions or otherwise minimize the environmental impact.
2. **"Green Authority"** means a recognized authority on green building or green products, materials or processes.

### **B. The BUSINESSOWNERS PROPERTY COVERAGE SPECIAL FORM is changed as follows:**

1. The following **Additional Coverages** are added:

#### **a. Green Building Alternatives – Increased Cost**

- (1) If direct physical loss or damage by a Covered Cause of Loss occurs to a building that is covered property, we will pay for:

(a) The reasonable additional cost you incur to repair or replace the lost or damaged portions of the building using products or materials that:

- (i) Are "green" alternatives to the products or materials of the lost or damaged property, in accordance with the documented standards of a "Green Authority"; and
- (ii) Are otherwise of comparable quality and function to the damaged property;

and

(b) The reasonable additional cost you incur to employ "green" methods or processes of construction, disposal or recycling in the course of the repair and replacement of the lost or damaged building, in accordance with the documented standards of a "Green Authority".

(2) The insurance provided under this Additional Coverage applies only if replacement cost valuation applies to the lost or damaged building and then only if the building is actually repaired or replaced as soon as reasonably possible after the loss or damage.

(3) The insurance provided under this Additional Coverage does not apply to any building that has been "vacant" for more than 60 consecutive days before the loss or damage occurs.

(4) The most we will pay for the additional cost incurred with respect to each building in any one occurrence under this Additional Coverage is determined by:

(a) Multiplying 5%; times

(b) The amount we would otherwise pay for the direct physical loss of or damage to the building, prior to application of any applicable deductible.

(5) However, the most we will pay for the additional cost incurred in any one occurrence, regardless of the number of buildings involved, is \$25,000.

**b. Green Building Reengineering and Recertification Expense**

(1) If, as a result of direct physical loss or damage by a Covered Cause of Loss to a building that is Covered Property, the pre-loss level of "green" building certification by a "Green Authority" on the building is lost, we will pay for the following reasonable additional expenses you incur to re-attain the pre-loss level of "green" building certification from that "Green Authority":

(a) The reasonable additional expense you incur to hire a qualified engineer or other professional required by the "Green Authority" to be involved in:

(i) Designing, overseeing or documenting the repair or replacement of the lost or damaged building; or

(ii) Testing and recalibrating the systems and mechanicals of the lost or damaged building to verify that the systems and mechanicals are performing in accordance with the design of such systems and mechanicals or the specifications of the manufacturer;

and

(b) The reasonable registration and recertification fees charged by the "Green Authority".

(2) This Additional Coverage applies to the additional expenses described above that you incur to achieve the pre-loss level of "green" building certification in accordance with the standards of the "Green Authority" that exist at the time of repair or replacement, even if the standards have changed since the original certification was achieved.

(3) The insurance provided under this Additional Coverage does not apply to any building that has been "vacant" for more than 60 consecutive days before the loss or damage occurs.

(4) The most we will pay in any one occurrence under this Additional Coverage for:

(a) All expenses incurred with respect to each building is 5% of the sum of:

(i) The amount we pay for the direct physical loss of or damage to the building, including any amount paid under the Green Building Alternatives – Increased Cost Additional Coverage; and

(ii) The deductible amount applied to the loss payment for direct physical loss or damage to the building;

(b) All expenses incurred, regardless of the number of buildings involved, is \$25,000.

2. The following **Coverage Extensions** are added:

**a. Green Building and Business Personal Property Alternatives – Increased Period of Restoration**

(1) If:

(a) Direct physical loss or damage by a Covered Cause of Loss occurs to a building at the described premises or Business Personal Property at the described premises to which the Green Business Personal Property Alternatives – Increased Cost Coverage Extension applies; and

(b) The Declarations show that you have coverage for Business Income and Extra Expense;

you may extend that insurance to include the amount of actual loss of Business Income you sustain and reasonable and necessary Extra Expense you incur during the increase in the "period of restoration" that is reasonably necessary to:

(i) Repair or replace the lost or damaged portions of the building or Business Personal Property (as described in Green Business Personal

Property Alternatives – Increased Cost Coverage Extension) using products or materials that:

- a) Are "green" alternatives to the products or materials of the lost or damaged property, in accordance with the documented standards of a "Green Authority"; and
- b) Are otherwise of comparable quality and function to the damaged property;

and

- (ii) Employ "green" methods or processes of construction, disposal or recycling in the course of the repair and replacement of the lost or damaged building or Business Personal Property (as described in Green Business Personal Property Alternatives – Increased Cost Coverage Extension), in accordance with the documented standards of a "Green Authority";

subject to a maximum of 30 additional days from the date the "period of restoration" would otherwise have ended.

- (2) This Coverage Extension is included in, and does not increase, the amount of coverage available based on the applicable Business Income and Extra Expense provision shown in the Declarations.

**b. Green Business Personal Property Alternatives – Increased Cost**

(1) If:

- (a) The Declarations show that you have coverage for Business Personal Property; and
- (b) Direct physical loss or damage by a Covered Cause of Loss occurs to covered Business Personal Property at the described premises; and

- (c) Such loss or damage requires replacement of such property, or with respect to improvements and betterments, requires repair or replacement;

you may extend that insurance to apply to the reasonable additional cost you incur to replace the lost or damaged Business Personal Property, or with respect to improvements and betterments, to repair or replace the lost or damaged portions of such improvements and betterments, using products or materials that:

- (i) Are "green" alternatives to the products or materials of the lost or damaged property, in accordance with the documented standards of a "Green Authority"; and
- (ii) Are otherwise of comparable quality and function to the damaged property.

- (2) With respect to improvements and betterments you may also extend that insurance to apply to the reasonable additional cost you incur to employ "green" methods or processes of construction, disposal or recycling in the course of the repair and replacement of the lost or damaged building, in accordance with the documented standards of a "Green Authority".

- (3) The insurance provided under this Coverage Extension applies only if replacement cost valuation applies to the lost or damaged property and then only if the property is actually repaired or replaced as soon as reasonably possible after the loss or damage.

- (4) This Coverage Extension does not apply to "stock" or property of others that is in your care, custody or control.

- (5) The insurance provided under this Coverage Extension does not apply to Business Personal Property at any building that has been "vacant" for more than 60 consecutive days before the loss or damage occurs.

## BUSINESSOWNERS

- (6) The most we will pay in any one occurrence under this Coverage Extension for the increased cost incurred with respect to the damaged property to which this Coverage Extension applies is determined by:
- (a) Multiplying 5%; times
  - (b) The amount we would otherwise pay for the direct physical loss of or damage to the business personal property, prior to application of any applicable deductible.
- (7) However, the most we will pay for the additional cost incurred in any one occurrence, regardless of the number of described premises involved, is \$25,000.
3. The following provision is added to the Loss Payment Loss Condition in Section **E.4.** :
- Except as specifically provided under the:
- a. Green Building Alternatives – Increased Cost Additional Coverage; and
  - b. Green Building Reengineering and Recertification Expense Additional Coverage; and
  - c. Green Business Personal Property Alternatives – Increased Cost Coverage Extension;
- the cost to repair, rebuild or replace does not include any increased cost incurred to re-
- attain a pre-loss level of "green" building certification from a "Green Authority".
4. This endorsement does not apply to property covered under the Newly Acquired or Constructed Property Additional Coverage.
5. With respect to the Additional Coverages and Coverage Extensions of this endorsement we will not pay for any Business Income or Extra Expense loss caused by or resulting from obtaining "green" building certification from a "Green Authority". However, this does not apply to any increase in the "period of restoration" required to re-attain a pre-loss level of "green" building certification from a "Green Authority" as otherwise covered under the Green Building and Business Personal Property Alternatives – Increased Period of Restoration Coverage Extension.
6. Under the **DEFINITIONS** in **Section G.** the following is added to the definition of "period of restoration":
- "Period of restoration" does not include any increased period required to re-attain a pre-loss level of "green" building certification from a "Green Authority". But this does not apply to any increase in the "period of restoration" otherwise covered under the Green Building and Business Personal Property Alternatives – Increased Period of Restoration Coverage Extension.

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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document- Property & Casualty **Review Status:** Approved 03/11/2008

**Comments:**

**Attachments:**

Transmittal.pdf

NAIC - Form Filing Schedule.pdf

**Property & Casualty Transmittal Document**

<b>1. Reserved for Insurance Dept. Use Only</b>		<b>2. Insurance Department Use only</b>			
		a. Date the filing is received:			
		b. Analyst:			
		c. Disposition:			
		d. Date of disposition of the filing:			
		e. Effective date of filing:			
		New Business			
		Renewal Business			
		f. State Filing #:			
		g. SERFF Filing #:			
		h. Subject Codes			
<b>3. Group Name</b>					<b>Group NAIC #</b>
The Travelers Companies, Inc.					3548
<b>4. Company Name(s)</b>					
	<b>Domicile</b>	<b>NAIC #</b>	<b>FEIN #</b>	<b>State #</b>	
The Travelers Indemnity Company	CT	25658	06-0566050		
The Charter Oak Fire Insurance Company	CT	25615	06-0291290		
The Travelers Indemnity Company of Connecticut	CT	25682	06-0336212		
The Travelers Indemnity Company of America	CT	25666	58-6020487		
The Phoenix Insurance Company	CT	25623	06-0303275		
Travelers Property Casualty Company of America	CT	25674	36-2719165		
Travelers Casualty Insurance Company of America	CT	19046	06-0876835		
<b>5. Company Tracking Number</b>		<b>2008-03-0007</b>			
<b>Contact Info of Filer(s) or Corporate Officer(s)</b> [include toll-free number]					
<b>6. Name and address</b>	<b>Title</b>	<b>Telephone #s</b>	<b>FAX #</b>	<b>e-mail</b>	
Margaret M. Salsbury Travelers One Tower Square Hartford, CT 06183	Senior Regulatory Analyst	(860) 277-6470	(860) 954-0580	MSALSBUR@Travelers.com	
<b>7. Signature of authorized filer</b>		<i>Margaret M. Salsbury</i>			
<b>8. Please print name of authorized filer</b>		Margaret M. Salsbury			
<b>Filing information</b> (see General Instructions for descriptions of these fields)					
<b>9. Type of Insurance (TOI)</b>		Commercial Multi Peril			
<b>10. Sub-Type of Insurance (Sub-TOI)</b>		Master Pac			
<b>11. State Specific Product code(s)</b> (if applicable)[See State Specific Requirements]					
<b>12. Company Program Title</b> (Marketing title)					
<b>13. Filing Type</b>		<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)			
<b>14. Effective Date(s) Requested</b>		New: 10/01/2008		Renewal: 10/01/2008	
<b>15. Reference Filing?</b>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>16. Reference Organization</b> (if applicable)		N/A			
<b>17. Reference Organization # &amp; Title</b>		N/A			
<b>18. Company's Date of Filing</b>		03/05/2008			
<b>19. Status of filing in domicile</b>		<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			

## Property & Casualty Transmittal Document—

<b>20. This filing transmittal is part of Company Tracking #</b>	2008-03-0007
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<b>21. Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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In compliance with the insurance laws and regulations in your state, our companies respectfully submit one new mandatory endorsement MP T3 56 02 08 to be used with our Master Pac program.

There is no rate impact associated with this form. For a detailed explanation of our form please refer to the enclosed forms transmittal supplement.

Your approval of this filing will be appreciated. Should you have any questions regarding this submission, please feel free to contact me at your convenience.

<b>22. Filing Fees</b> (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 #:** N/A - EFT  
**Amount:** \$50.00

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

**\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

## 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.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>2008-03-0007</b>			
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> (Company tracking number of rate/rule filing, if applicable)	<b>N/A</b>			
<b>3.</b>	<b>Form Name /Description/Synopsis</b>	<b>Form # Include edition date</b>	<b>Replacement or Withdrawn?</b>	<b>If replacement, give form # it replaces</b>	<b>Previous state filing number, if required by state</b>
01	Amendatory Provisions – Green Building and Business Personal Property Coverage Enhancements	MP T3 56 02 08	<input checked="" 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		