Filing at a Glance

Company: Florists' Mutual Insurance Company

Product Name: Business Package Policy	SERFF Tr Num: FLWR-125579209	State: Arkansas
TOI: 05.1 Commercial Multi-Peril - Non-Liability Portion Only	SERFF Status: Closed	State Tr Num: EFT $50
Sub-TOI: 05.1003 Commercial Package	Co Tr Num: 08-TRIA-BPP	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Authors: Kevin Kloever, Liza Tucker, Rob Roennigke	Disposition Date: 04/03/2008
	Date Submitted: 03/27/2008	Disposition Status: Approved
Effective Date Requested (New): 12/26/2007		Effective Date (New): 12/26/2007
Effective Date Requested (Renewal): 12/26/2007		Effective Date (Renewal): 12/26/2007

State Filing Description:

General Information

Project Name: TRIA Update	Status of Filing in Domicile: Authorized
Project Number: 08-TRIA-BPP	Domicile Status Comments: Authorized in our state of domicile, Illinois.
Reference Organization: N/A	Reference Number: N/A
Reference Title: N/A	Advisory Org. Circular: N/A
Filing Status Changed: 04/03/2008	
State Status Changed: 04/03/2008	Deemer Date:
Corresponding Filing Tracking Number:	

Filing Description:

In response to the Terrorism Risk Insurance Program Reauthorization Act of 2007, we are filing form P 09 52 03 08 - Cap On Losses From Certified Acts Of Terrorism. Form P 09 52 03 08 mirrors the language on ISO form IL 09 52 01 08.

Company and Contact

Filing Contact Information

Kevin Kloever, Compliance Specialist
#1 Horticultural Lane
Edwardsville, IL 62025

kkloever@hortica-insurance.com
(618) 655-1824 [Phone]
(618) 655-2519[FAX]

Filing Company Information

Florists' Mutual Insurance Company	CoCode: 13978	State of Domicile: Illinois
#1 Horticultural Lane	Group Code: 349	Company Type: Parent
PO Box 428		
Edwardsville, IL 62025	Group Name:	State ID Number:
(800) 851-7740 ext. [Phone]	FEIN Number: 37-0277830	

Filing Fees

Fee Required?	Yes
Fee Amount:	$50.00
Retaliatory?	No
Fee Explanation:	forms filings: $50 for each filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Florists' Mutual Insurance Company	$50.00	03/27/2008	19014021

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	04/03/2008	04/03/2008

Disposition

Disposition Date: 04/03/2008

Effective Date (New): 12/26/2007

Effective Date (Renewal): 12/26/2007

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	*FLWR-125579209*	*State:*	*Arkansas*
Filing Company:	*Florists' Mutual Insurance Company*	*State Tracking Number:*	*EFT $50*
Company Tracking Number:	*08-TRIA-BPP*		
TOI:	*05.1 Commercial Multi-Peril - Non-Liability Portion Only*	*Sub-TOI:*	*05.1003 Commercial Package*
Product Name:	*Business Package Policy*		
Project Name/Number:	*TRIA Update/08-TRIA-BPP*		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Explanatory Memorandum	Approved	Yes
Supporting Document	Expedited Filing Transmittal Document	Approved	Yes
Form	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM	Approved	Yes

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM	P 09 52	03 08	Endorsement/Amendment/Conditions	New		0.00	P 09 52 03 08.pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

This endorsement modifies commercial property insurance provided under the Business Package Policy.

A. Cap On Certified Terrorism Losses

"Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State and the Attorney General of the United States, to be an act of terrorism pursuant to the federal Terrorism Risk Insurance Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:

1. The act resulted in insured losses in excess of $5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
2. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed $100 billion in a Program Year (January 1 through December 31) and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds $100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

B. Application Of Exclusions

The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for any loss which would otherwise be excluded under this Coverage Part or Policy, such as losses excluded by the Nuclear Hazard Exclusion or the War And Military Action Exclusion.

Florists' Mutual Insurance Company - Edwardsville, Illinois
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Rate Information

Rate data does NOT apply to filing.

Supporting Document Schedules

Review Status:

Bypassed -Name: Uniform Transmittal Document-Property & Casualty — Approved — 04/03/2008

Bypass Reason: Expedited Terrorism Filing

Comments:

Review Status:

Satisfied -Name: Explanatory Memorandum — Approved — 04/03/2008

Comments:

Attachment:

Explanatory Memorandum.pdf

Review Status:

Satisfied -Name: Expedited Filing Transmittal Document — Approved — 04/03/2008

Comments:

Attachment:

TRIAExpeditedFilingForm.pdf

Explanatory Memorandum
Florists' Mutual Insurance Company

In response to the Terrorism Risk Insurance Program Reauthorization Act of 2007, we are filing form P 09 52 03 08 - Cap On Losses From Certified Acts Of Terrorism. Form P 09 52 03 08 mirrors the language on ISO form IL 09 52 01 08, but has been modified to apply only to the commercial property portion of our Business Package Policy. Subsequently, we are withdrawing our previously filed form BP-TERR-1 01-03.

We propose an effective date of 12-26-2007 or the earliest date you will accept. There is no rate impact associated with this change.

Adopted

Ed. 12/19/07

EXPEDITED FILING TRANSMITTAL DOCUMENT
FOR TERRORISM RISK INSURANCE FORMS AND PRICING

This page applies to the following state(s): AR

Indicate Type of Filing
☒ Filing Related to *Certified Losses*
☐ Filing Related to *Non-Certified Losses*
☐ Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
Florists' Mutual Insurance Company	IL	349-13978	37-0277830

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Kevin Kloever #1 Horticultural Lane PO Box 428 Edwardsville, IL 62025	800 851-7740	800 233-3642	kkloever@hortica-insurance.com

Filing information

Line of Insurance (see attachment)	05.1 Commercial Multi-Peril - Non-Liability Portion Only
Company Program Title (Marketing title) (if applicable)	Business Package Policy
Filing Type ** see note below	Form (Endorsement)
This application is used with:	BP-I 03-00
Effective Date Requested	12-26-2007
Filing date	3/27/08
Company Tracking Number	08-TRIA-BPP
Date filing approved in domiciliary state, if applicable	Approved by Illinois on 03-15-2008

	Component/Form Name /Description/Synopsis	Form # or Rate Page Include edition date	Replacement Or withdrawn?	If replacement, give form # or rate page(s) it replaces	Previous State Filing Number, if required by state
01	Cap On Losses From Certified Acts Of Terrorism	P 09 52 03 08	☐ Replacement ☐ Withdrawn ☒ Neither		
02	Limited Coverage for Acts of Terrorism (Other than Certified Acts of Terrorism); Cap on Losses from Certified Acts of Terrorism	BP-TERR-1	☐ Replacement ☒ Withdrawn ☐ Neither		

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

☒ Is in compliance with the terms of the Terrorism Risk Insurance Act, as amended, and the laws of this state; and
☒ Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.

Signature	Kevin Kloever Print Name:	Compliance Specialist Title:

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