

SERFF Tracking Number: GCCW-125556615 State: Arkansas
First Filing Company: General Casualty Company of Wisconsin, ... State Tracking Number: EFT \$50
Company Tracking Number: 040108 10668R
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Terrorism Disclosure Notice
Project Name/Number: Terrorism Disclosure Notice - Interline /040108 10668R

Filing at a Glance

Companies: General Casualty Company of Wisconsin, Regent Insurance Company

Product Name: Terrorism Disclosure Notice SERFF Tr Num: GCCW-125556615 State: Arkansas
TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: EFT \$50
Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: 040108 10668R State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Author: Sharon Reeve Disposition Date: 04/03/2008
Date Submitted: 03/27/2008 Disposition Status: Approved
Effective Date Requested (New): 04/01/2008 Effective Date (New): 04/01/2008
Effective Date Requested (Renewal): 04/01/2008 Effective Date (Renewal): 04/01/2008

State Filing Description:

General Information

Project Name: Terrorism Disclosure Notice - Interline Status of Filing in Domicile: Authorized
Project Number: 040108 10668R Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 04/03/2008
State Status Changed: 04/03/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
Re: General Casualty Company of Wisconsin
FEIN# 39-0301590, NAIC# 24414
Regent Insurance Company
FEIN# 39-6062860, NAIC# 24449
Terrorism Disclosure Notice 2008
Commercial General Liability Policy or Coverage Part

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Commercial Inland Marine Policy or Coverage Part
Commercial Property Policy or Coverage Part
Commercial Umbrella Policy or Coverage Part
Company Filing # 040108 10668R

Dear Director of Insurance:

Attached is our revised Terrorism Disclosure Notice which reflects the changes made to the TRIA bill, in the extension of 2008. This is filed for informational purposes only. No other revisions are being made to our approach to this coverage.

Please advise if you require any additional information.

Sincerely,

Sharon Reeve
Rate Development Technician
Home Office Commercial – Standard Lines
Telephone: (608) 825-5970
E-mail: sharon.reeve@generalcasualty.com

Company and Contact

Filing Contact Information

Sharon Reeve, Rate Development Technician sharon.reeve@generalcasualty.com
One General Drive (608) 825-5970 [Phone]
Sun Prairie, WI 53596 (608) 825-5100[FAX]

Filing Company Information

General Casualty Company of Wisconsin CoCode: 24414 State of Domicile: Wisconsin
One General Drive Group Code: 796 Company Type: Property &

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Casualty

Sun Prairie, WI 53596
(608) 837-4440 ext. [Phone]

Group Name:
FEIN Number: 39-0301590

State ID Number:

Regent Insurance Company
One General Drive

CoCode: 24449
Group Code: 796

State of Domicile: Wisconsin
Company Type: Property &
Casualty

Sun Prairie, WI 53596
(608) 837-4440 ext. [Phone]

Group Name:
FEIN Number: 39-6062860

State ID Number:

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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
General Casualty Company of Wisconsin	\$50.00	03/27/2008	19024632
Regent Insurance Company	\$0.00	03/27/2008	

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Correspondence Summary

Dispositions

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

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Disposition

Disposition Date: 04/03/2008
Effective Date (New): 04/01/2008
Effective Date (Renewal): 04/01/2008
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
Supporting Document	Expedited Filing Transmittal	Approved	Yes
Form	Policyholder Disclosure Notice of Terrorism Insurance Coverage Changes	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Policyholder Disclosure Notice of Terrorism Insurance Coverage Changes	IL 7009	0108	Disclosure/ Replaced Notice	Replaced Form #: il 7009 0206 Previous Filing #:		IL7009 01 0821.pdf

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE CHANGES

Coverage for acts of terrorism as defined in the Terrorism Risk Insurance Act (the "Act") is included in your policy. Under the Act, as amended in 2007, the definition of "act of terrorism" has changed. As defined in Section 102(1) of the Act, the term "act of terrorism" means any 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; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been 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

Coverage provided by the policy for losses resulting from certified acts of terrorism may be partially reimbursed by the United States government under a formula established by the Act, as amended. However, your policy contains other exclusions which might affect your coverage, such as exclusions for nuclear, radiological and chemical events. Under the formula, the United States government generally reimburses 85% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss that may be covered by the federal government under the Act.

The Act, as amended, also contains a \$100 billion cap that limits United States government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The premium that is attributable to coverage for acts of terrorism is calculated as a percentage of the premium under each Coverage Part of your policy.

COVERAGE PART OR POLICY	PREMIUM CHARGE ATTRIBUTABLE TO TERRORISM
Commercial General Liability Policy or Coverage Part	1.0%
Commercial Inland Marine Policy or Coverage Part	1.5%
Commercial Marketplace Policy	1.0%
Commercial Property Policy or Coverage Part	1.5%
Commercial Umbrella Policy or Coverage Part	1.0%
Contractors Policy	1.0%

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Rate Information

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Supporting Document Schedules

Bypassed -Name: Uniform Transmittal Document-
Property & Casualty
Bypass Reason: NA
Comments:

Review Status:
Approved 04/03/2008

Satisfied -Name: Expedited Filing Transmittal
Comments:
Attachment:
Expedited Filing.pdf

Review Status:
Approved 04/03/2008

**EXPEDITED FILING — COMMERCIAL LINES
TERRORIST EXCLUSIONS APPLICATION**

This page applies to the following state(s) Arkansas

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
General Casualty Company of Wisconsin	WI	24414	39-0301590
Regent Insurance Company	WI	24449	39-6062860

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Sharon Reeve 1 General Dr Sun Prairie, WI 53590	608-825-5970	608-825-5100	sharon.reeve@general casualty.com

Filing information

Line of Insurance (see attachment)	Commercial General Liability, Commercial Inland Marine, Commercial Property, Commercial Umbrella,
Company Program Title (Marketing title) (if applicable)	
Filing Type ** see note below	Interline Forms Filing
This application is used with:	Commercial Property and Casualty
Effective Date Requested	04/01/2008
Filing date	03/27/2008
Company Tracking Number	040108 10668R
Date filing approved in domiciliary state	03/27/2008

	<u>Component/Form Name</u> <u>/Description/Synopsis</u>	<u>Form #)</u> <u>Include edition date</u>	<u>Replacement</u> <u>Or withdrawn?</u>	<u>If replacement,</u> <u>give form #</u> <u>it replaces</u>	<u>Previous State</u> <u>Filing Number,</u> <u>if required</u> <u>by state</u>
01	Policyholder Disclosure Notice of Terrorism Insurance Coverage Changes	IL 7009 0108	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	IL 7009 0206	
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a form filing must include the following:

- A completed Form Filing Transmittal Document for each insurer.
- One copy of each endorsement.
- 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:

- Using endorsements that provide coverage that is at least as broad as described in the bulletin.

Signature

Sharon Reeve
Print Name:

Rate Development Technician
Title: