

SERFF Tracking Number: KEMP-125593619 State: Arkansas
Filing Company: Trinity Universal Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: FAAR070508F
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Personal Auto
Project Name/Number: 2008 Filing Jacket and Dec Page /FAAR070508F

Filing at a Glance

Company: Trinity Universal Insurance Company

Product Name: Personal Auto

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto
(PPA)

Filing Type: Form

SERFF Tr Num: KEMP-125593619 State: Arkansas

SERFF Status: Closed

Co Tr Num: FAAR070508F

Co Status:

Author: Maria Pardi

Date Submitted: 04/03/2008

State Tr Num: EFT \$50

State Status: Fees verified and
received

Reviewer(s): Alexa Grissom, Betty
Montesi, Brittany Yielding

Disposition Date: 04/08/2008

Disposition Status: Approved

Effective Date Requested (New): 07/05/2008

Effective Date Requested (Renewal): 07/05/2008

Effective Date (New): 07/05/2008

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: 2008 Filing Jacket and Dec Page

Project Number: FAAR070508F

Reference Organization:

Reference Title:

Filing Status Changed: 04/08/2008

State Status Changed: 04/08/2008

Corresponding Filing Tracking Number:

Filing Description:

2008 Jacket & Dec Page Filing

Status of Filing in Domicile: Not Filed

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Company and Contact

Filing Contact Information

Maria Pardi, Forms Specialist

5210 Belfort Rd

mpardi@ekemper.com

(904) 245-5761 [Phone]

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Jacksonville, FL 32256 (904) 245-5601[FAX]

Filing Company Information

Trinity Universal Insurance Company CoCode: 19887 State of Domicile: Texas
5210 Belfort Rd. Suite 120 Group Code: 215 Company Type:
Jacksonville, FL 32256 Group Name: State ID Number:
(904) 245-5600 ext. [Phone] FEIN Number: 75-0620550

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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50 per filing
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Trinity Universal Insurance Company	\$50.00	04/03/2008	19258866

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Alexa Grissom	04/08/2008	04/08/2008

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Disposition

Disposition Date: 04/08/2008

Effective Date (New): 07/05/2008

Effective Date (Renewal):

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	Cover Letter	Approved	Yes
Form	Policy Jacket - TUIC	Approved	Yes
Form	Declaration Page	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Policy Jacket - TUIC	AK 5373	02 08	Endorsement/Amendment/Conditions		0.00	Ak53730208.cover.pdf
Approved	Declaration Page	AK 5034	08 00	Declaration News/Schedule			Arkansas Auto Dec.pdf

Personal Auto Policy

The company providing the insurance afforded by this policy is designated on the Declarations Page.

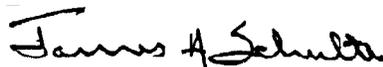
PLEASE READ YOUR POLICY CAREFULLY.

This policy is a legal contract between you and us.

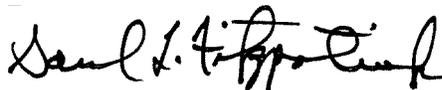
TRINITY UNIVERSAL INSURANCE COMPANY

A stock insurance company, herein called the Company
Home Office: 10000 North Central Expressway
Dallas, Texas 75231
(904) 245-5600

IN WITNESS THEREOF, the Trinity Universal Insurance Company has caused this policy to be signed by its President and Secretary.



President



Secretary



Insurance Provided By
TRINITY UNIVERSAL
INSURANCE COMPANY
 12926 Gran Bay Parkway West- Jacksonville, FL 32258

Named Insured and Mailing Address	Policy Number	Policy Period
0600225 SP **SNGLP T2 3 4352 72113-680408		Effective: 04-12-2008 Expiration: 10-12-2008 12:01 a.m. standard time.
MAUMELLE, AR 72113-6804	Producer Code	
	Agent/Customer ID 4679	

POLICY DECLARATIONS - AUTOMOBILE POLICY

SUMMARY OF COVERED VEHICLE(S) AND PREMIUM(S)					Term Premium
No.	Year	Make	Model	Vehicle Identification No	
1	2004	PONTIAC	GRAND AM		\$ 529.00
TOTAL POLICY PREMIUM					\$ 529.00

PAYMENT EXPECTED FROM **INSURED**

COVERAGE APPLIES ONLY IF A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE. DETAILS CONCERNING SPECIFIC COVERAGES AND PREMIUMS FOR YOUR AUTO(S) CAN BE FOUND ON THE FOLLOWING PAGES.

Insured Name : _____

Policy Number _____

VEHICLE 1 INFORMATION						
Year	Make	Model	Vehicle Identification No.	Sym	Class Code	Territory
2004	PONTIAC	GRAND AM S		J	446810010	001
			Limit of Liability	Term Premium	Operator 1 Information	
A. Liability						
Bodily Injury - Each Person			\$ 25,000			
Bodily Injury - Each Accident			\$ 50,000	\$ 159.50		
Property Damage						
Each Accident			\$ 25,000	\$ 100.00		
B. Medical Payment						
Each Person						
C. Uninsured Motorists						
Bodily Injury - Each Person			\$ 25,000			
Bodily Injury - Each Accident			\$ 50,000	\$ 18.50		
Property Damage						
Each Accident			\$ 25,000			
D. Damage To Your Auto						
Actual Cash Value (ACV) minus deductible shown						
Collision Loss			\$ 1,000	\$ 187.50		
Comprehensive Loss			\$ 1,000	\$ 63.50		
Towing and Labor Cost						
Per Disablement						
Total Premium for Vehicle						
Endorsements Listed Below						
TOTAL VEHICLE PREMIUM				\$	529.00	

CREDITS APPLIED TO THE VEHICLE ABOVE	
Passive Restraints	Anti-Lock Brakes

LOSS PAYEE(S)	Effective	Expires
1 CITI FINANCIAL PO BOX 183036	CITI FINANCIAL AUTO COLOMBUS, OH 43218	04-2012

VEHICLE ENDORSEMENT(S)			
Number	Edition Date	Description	Veh No Term Premium
AK5373	01-06	POLICY INFORMATION	
PP0001	06-98	PERSONAL AUTO POLICY	
PP0495	10-07	UNINSURED MOTORISTS COVERAGE - AR	
PP1301	12-99	COV FOR DAMAGE TO YOUR AUTO EXCLUSION	
AU948	10-07	AMENDMENT OF POLICY PROVISIONS - AR	
PP0434	10-07	UNDERINSURED MOTORISTS COVERAGE-AR	
PP0326	06-94	LIABILITY COVERAGE EXCLUSION ENDORSEMENT	
PP0305	08-86	LOSS PAYABLE CLAUSE	
AU910	06-05	ELECTRONIC EQUIPMENT COVERAGE	
PP1385	06-03	ARKANSAS NOTICE	

VEHICLE ATTACHMENT(S)		
Number	Edition Date	Description
AK1838	03-89	FAIR CREDIT REPORTING ACT
AK3845	03-07	UNINSURED MOTORISTS COVERAGE OFFER
AK3979	09-06	CONSUMER INFORMATION RIGHTS & CONTACT
AK5443	09-06	ID CARDS
AK4569	11-07	KEMPER GLASS SERVICE
AK5167	01-06	PRIVACY STATEMENT
ILN016	09-03	FRAUD STATEMENT
AK5427	09-06	ARSON REPORTING IMMUNITY ACT NOTICE

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Rate Information

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 04/08/2008

Comments:

Attachment:

AR Filing Transmittal AUTO.pdf

Satisfied -Name: Cover Letter **Review Status:** Approved 04/08/2008

Comments:

Attachment:

Letter Auto.pdf

18. Company's Date of Filing	04-03-08
19. Status of filing in domicile	<input checked="" 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 #	FAAR070508F
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21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]
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Dear Commissioner;

The above captioned company is an associate of Unitrin and is filing the following forms for your review and approval:

- Personal Automobile policy jacket AK 5373 (02 08) for Trinity Universal Insurance.
- Declarations Page AK 5034 (08 00) for Trinity Universal Insurance Company. The Home Office address has been changed

The proposed effective for the change is July 5, 2008 for new and renewal business. If you have any questions, please feel free to contact me at 904-245-5761 or email me at mpardi@eKemper.com.

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: \$50.00 - being submitted via EFT

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.)**

Kemper

A UNITRIN BUSINESS

5210 Belfort Rd, Suite 120
Jacksonville, FL 32256

April 3, 2008

Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201

Re: Form Filing for Personal Automobile
Trinity Universal Insurance Company (215-1988)
Company Filing Number FAAR070508F

Dear Commissioner;

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Sincerely,



Maria Pardi
Kemper, A Unitrin Business
Forms Analyst