

SERFF Tracking Number: LMUG-125579039 State: Arkansas
First Filing Company: Liberty Insurance Corporation, ... State Tracking Number: EFT \$50
Company Tracking Number: LMSF-CW-004-08
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Various lines of business
Project Name/Number: Terrorism Policyholder Disclosure Notices in accordance with the Terrorism Prgm Reauthorization Act of 2007/LMSF-CW-004-08

Filing at a Glance

Companies: Liberty Insurance Corporation, Liberty Mutual Fire Insurance Company, Liberty Mutual Insurance Company, LM Insurance Corporation, The First Liberty Insurance Corporation

Product Name: Various lines of business SERFF Tr Num: LMUG-125579039 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: LMSF-CW-004-08 State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Author: Marie Exon Disposition Date: 04/02/2008
Date Submitted: 03/26/2008 Disposition Status: Approved
Effective Date Requested (New): Effective Date (New): 04/02/2008
Effective Date Requested (Renewal): Effective Date (Renewal): 04/02/2008

State Filing Description:

General Information

Project Name: Terrorism Policyholder Disclosure Notices in accordance Status of Filing in Domicile: Pending with the Terrorism Prgm Reauthorization Act of 2007

Project Number: LMSF-CW-004-08

Domicile Status Comments: Being submitted at this time.

Reference Organization: n/a

Reference Number: n/a

Reference Title: n/a

Advisory Org. Circular: n/a

Filing Status Changed: 04/02/2008

State Status Changed: 04/02/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

TRIA 2007

POLICYHOLDER DISCLOSURE NOTICES

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RE: COMMERCIAL GENERAL LIABILITY

COMMERCIAL UMBRELLA

COMMERCIAL FIRE AND ALLIED LINES

BOILER AND MACHINERY (EQUIPMENT BREAKDOWN)

COMMERCIAL INLAND MARINE

COMMERCIAL MULTIPERIL – BUSINESSOWNERS – PACKAGE POLICIES

Project # LMSF-CW-004-08

Liberty Mutual Insurance Company NAIC-0111-23043

Liberty Mutual Fire Insurance Company NAIC-0111-23035

LM Insurance Corporation NAIC-0111-33600

The First Liberty Insurance Corporation NAIC-0111-33588

Liberty Insurance Corporation NAIC-0111-42404

INFORMATIONAL PURPOSES ONLY

The captioned companies submit the enclosed Policyholder Disclosure Notice–Description of TRIA forms as follows: GPO 4887 1207, GPO 4885 12 07 and EN 9052 12 07 to comply with the Terrorism Risk Insurance Program Reauthorization act of 2007 (TRIPRA).

In addition, the following offer/premium disclosure forms are provided to accommodate line of business, distribution channels and system differences: 2008 Form WC Offer Form Dollar Amt with DTEC, 2008 TRIA PAL Offer Form D All Lines, 2008 TRIA PAL Offer Form D Primary Prop/Liab, 2008 TRIA Offer Form D Umbrella, EH TRIA Offer, 2008 TRIA Offer Form D BSG Primary Prop/Liab, 2008 TRIA Offer Form D Global Property Only and 2008 TRIA Offer Form D Casualty Only.

Please refer to enclosed forms list for complete description of these forms.

If you should have any questions or concerns please feel free to contact me.

This filing is submitted for informational purposes only. Your acknowledgement is appreciated.

Sincerely,

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State Filings Analyst/Ratemaking-Actuarial

Liberty Mutual Group
 PO BOX 8070
 Wausau WI 54402-8070
 (877) 792-8728 Ext. 3203

Company and Contact

Filing Contact Information

Marie Exon, State Filing Analyst Marie.Exon@Wausau.com
 P.O. Box 8070 (877) 792-8728 [Phone]
 Wausau, WI 54402-8070 (715) 842-6828[FAX]

Filing Company Information

Liberty Insurance Corporation	CoCode: 42404	State of Domicile: Illinois
PO BOX 8070	Group Code: 111	Company Type:
Wausau, WI 54402-8070	Group Name:	State ID Number:
(877) 792-8728 ext. [Phone]	FEIN Number: 03-0316876	

Liberty Mutual Fire Insurance Company	CoCode: 23035	State of Domicile: Wisconsin
PO Box 8070	Group Code: 111	Company Type:
Wausau, WI 54402-8070	Group Name:	State ID Number:
(877) 792-8728 ext. [Phone]	FEIN Number: 04-1924000	

Liberty Mutual Insurance Company	CoCode: 23043	State of Domicile: Massachusetts
PO Box 8070	Group Code: 111	Company Type:
Wausau, WI 54402-8070	Group Name:	State ID Number:
(877) 792-8728 ext. [Phone]	FEIN Number: 04-1543470	

LM Insurance Corporation	CoCode: 33600	State of Domicile: Iowa
PO Box 8070	Group Code: 111	Company Type:
Wausau, WI 54402-8070	Group Name:	State ID Number:

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(877) 792-8728 ext. [Phone]

FEIN Number: 04-3058504

The First Liberty Insurance Corporation

CoCode: 33588

State of Domicile: Iowa

PO Box 8070

Group Code: 111

Company Type:

Wausau, WI 54402-8070

Group Name:

State ID Number:

(877) 792-8728 ext. [Phone]

FEIN Number: 04-3058503

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Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty Insurance Corporation	\$0.00	03/26/2008	
Liberty Mutual Fire Insurance Company	\$0.00	03/26/2008	
Liberty Mutual Insurance Company	\$50.00	03/26/2008	18978629
LM Insurance Corporation	\$0.00	03/26/2008	
The First Liberty Insurance Corporation	\$0.00	03/26/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	04/02/2008	04/02/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Forms List	Supporting Document	Marie Exon	03/26/2008	03/26/2008

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Disposition

Disposition Date: 04/02/2008
Effective Date (New): 04/02/2008
Effective Date (Renewal): 04/02/2008
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	Forms List	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - TERRORISM RISK INSURANCE ACT	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - TERRORISM RISK INSURANCE ACT	Approved	Yes
Form	POLICYHOLDER DISCLOSURE- TERRORISM INSURANCE PREMIUM NOTICE	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	Approved	Yes
Form	POLICYHOLDER DISCLOSURE AND PREMIUM NOTICE TERRORISM RISK INSURANCE ACT	Approved	Yes
Form	DISCLOSURE - TERRORISM RISK INSURANCE ACT	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	Approved	Yes
Form	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE	Approved	Yes

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TERRORISM NSURANCE FOR POLICY
PERIOD

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Amendment Letter

Amendment Date:

Submitted Date: 03/26/2008

Comments:

I neglected to attach my forms list.

Thanks

Marie

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Forms List

Comment:

PAL Forms List for TRIA Filing _2_.pdf

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	POLICYHOLDER DISCLOSURE - TERRORISM RISK INSURANCE ACT	GPO 4885	12 07	Disclosure/ New Notice		0.00	GPO 4885 1207 - TRIA Plcyhldr Disclosure _2_.pdf
Approved	POLICYHOLDER DISCLOSURE - TERRORISM RISK INSURANCE ACT	GPO 4887	12 07	Disclosure/ New Notice		0.00	GPO 4887 1207 - TRIA Policyholder Disclosure.pdf
Approved	POLICYHOLDER DISCLOSURE- TERRORISM INSURANCE PREMIUM NOTICE			Disclosure/ New Notice		0.00	2008 TRIA WC Offer Form Dollar Amnt with DTEC doc.pdf
Approved	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD			Disclosure/ New Notice		0.00	2008 TRIA PAL Offer Form D All Lines.pdf
Approved	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM			Disclosure/ New Notice		0.00	2008 TRIA Offer Form D PRIMARY PROP and LIAB.doc.pdf

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Approval	Description	Amount	Document
Approved	INSURANCE FOR POLICY PERIOD POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	0.00	Disclosure/ New Notice TRIA--- 2008 TRIA Offer Form D Umbrella Doc.pdf
Approved	POLICYHOLDER DISCLOSURE AND PREMIUM NOTICE TERRORISM RISK INSURANCE ACT	0.00	Disclosure/ New Notice 2008 EH TRIA Offer doc.pdf
Approved	DISCLOSURE - EN9052 12-07 TERRORISM RISK INSURANCE ACT	0.00	Disclosure/ New Notice EN 9052 Disclosure Enclosure.pdf
Approved	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	0.00	Disclosure/ New Notice 2008 TRIA Offer Form D BSG Primary Prop Liab _2_.pdf
Approved	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO	0.00	Disclosure/ New Notice 2008 TRIA Offer Form D Global Property

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PURCHASE Only _2_.pdf
 TERRORISM
 INSURANCE
 FOR POLICY
 PERIOD

Approved	POLICYHOLDER DISCLOSURE - NOTICE OF OFFER TO PURCHASE TERRORISM NSURANCE FOR POLICY PERIOD	Disclosure/ New Notice	0.00	2008 TRIA Offer Form D Casualty Only doc _2_.pdf
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POLICYHOLDER DISCLOSURE
TERRORISM RISK INSURANCE ACT

THIS ENDORSEMENT IS MADE PART OF YOUR POLICY PURSUANT TO THE TERRORISM RISK INSURANCE ACT.

In accordance with the Terrorism Risk Insurance Act, including all amendments, ("TRIA" or the "Act"), we are required to provide you with a notice of the portion of your premium attributable to coverage for "certified acts of terrorism," the federal share of payment of losses from such acts, and the limitation or "cap" on our liability under the Act.

Disclosure of Premium

The premium charge for coverage for losses resulting from "certified acts of terrorism" is \$0. However, this coverage is subject to all other policy terms and conditions. This means that if you did not purchase coverage for "certified acts of terrorism" on any underlying policy to which this policy is excess, this policy will not apply to losses arising from such acts.

Federal Participation In Payment Of Terrorism Losses

If an individual insurer's losses exceed a deductible amount specified in the Act, the federal government will reimburse the insurer for 85% of losses paid in excess of the deductible, provided that aggregate industry losses from a "certified act of terrorism" exceed \$100 million.

Cap On Insurer Participation In Payment Of Terrorism Losses

If aggregate insured losses attributable to "certified acts of terrorism" exceed \$100 billion in a calendar year and we have met our deductible under the Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion. Nor shall Treasury make any payment for any portion of the amount of such losses that exceeds \$100 billion. 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.

This endorsement is executed by the

Premium \$

Effective Date

Expiration Date

For attachment to Policy No.

Audit Basis

Issued To


SECRETARY


PRESIDENT

Countersigned by

Authorized Representative

Issued

Sales Office and No.

End. Serial No.

POLICYHOLDER DISCLOSURE
TERRORISM RISK INSURANCE ACT

THIS ENDORSEMENT IS MADE PART OF YOUR POLICY PURSUANT TO THE TERRORISM RISK INSURANCE ACT.

In accordance with the Terrorism Risk Insurance Act, including all amendments, ("TRIA" or the "Act"), we are required to provide you with a notice of the portion of your premium attributable to coverage for "certified acts of terrorism," the federal share of payment of losses from such acts, and the limitation or "cap" on our liability under the Act.

Disclosure of Premium

The Company has made available coverage for "certified acts of terrorism" as defined in the Act. If purchased, the portion of your premium attributable to coverage for "certified acts of terrorism" is shown in the Declarations, Declarations Extension Schedule or elsewhere by endorsement in your policy.

Federal Participation In Payment Of Terrorism Losses

If an individual insurer's losses exceed a deductible amount specified in the Act, the federal government will reimburse the insurer for 85% of losses paid in excess of the deductible, provided that aggregate industry losses from a "certified act of terrorism" exceed \$100 million.

Cap On Insurer Participation In Payment Of Terrorism Losses

If aggregate insured losses attributable to "certified acts of terrorism" exceed \$100 billion in a calendar year and we have met our deductible under the Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion. Nor shall Treasury make any payment for any portion of the amount of such losses that exceeds \$100 billion. 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.

This endorsement is executed by the

Premium \$

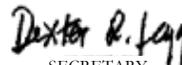
Effective Date

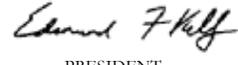
Expiration Date

For attachment to Policy No.

Audit Basis

Issued To


SECRETARY


PRESIDENT

Countersigned by

Authorized Representative

Issued

Sales Office and No.

End. Serial No.

[DATE]

[Policyholder Name and Address]

[Policy Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE -TERRORISM INSURANCE PREMIUM NOTICE

This notice contains important information about the Terrorism Risk Insurance Act and its effect on your policy. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”), establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a “certified act of terrorism” AND that is otherwise covered under your policy.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –
 - (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
 - (II) the premises of a United States mission; and
- (iv) 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.

MANDATORY PREMIUM DISCLOSURE STATEMENT

Your policy does not contain an exclusion for losses resulting from “certified acts of terrorism.” Coverage for such losses is still subject to, and may be limited by, all other terms, conditions and exclusions in your policy.

The premium charge for this coverage for the policy period is **/\$ /**

The percentage (by state) of the premium for Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents that is attributable to Domestic Terrorism is:

15%	AR, OR, TN, UT
20%	NJ, NV, SC
27.5%	DE
30%	AL, AZ, CT, CO, GA, IA, ID, IN, KS, KY, LA, ME, MS, MT, NC, NE, NH, OK, RI, SD, VT, WI, WV
39.76 %	PA
55%	DC, IL, MD, NY
N/A	AK, CA, FL, HI, OH, MA, MI, MN, MO, ND, NM, TX, VA, WA, WY

YOU NEED NOT DO ANYTHING FURTHER AT THIS TIME.

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy.

If you have any questions regarding this notice please contact your sales representative or agent.

[DATE]

[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –

- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
- (II) the premises of a United States mission; and

(iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism.” The premium for optional terrorism coverage is in addition to any mandatory premium shown on the attached Terrorism Coverage Election Form. Coverage for losses from “certified acts of terrorism” is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

The premium charge for this coverage for the policy period is:

Commercial General Liability	\$xxx.xx
Railroad Protective Liability*	1% of policy’s manual premium
Owners & Contractors Protective Liability*	1% of policy’s manual premium
Product Withdrawal Liability & Expense	1% of policy’s manual premium
Electronic Data Liability	1% of policy’s manual premium
Pollution Liability	1% of policy’s manual premium
Liquor Liability	1% of policy’s manual premium
New York Special Highway Protective Liability*	1% of policy’s manual premium

(*With respect to this line of business, TRIA offer applies to all policies that you purchase in connection with a designated operation or project, regardless of when such purchase occurs and regardless of whether you are the named insured).

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

TERRORISM COVERAGE ELECTION FORM

[Policyholder Name]

[Policyholder Name]

[Policy Number / Quote Number]

Effective:[mm/dd/yy]

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for /\$ /.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

MANDATORY PREMIUM DISCLOSURE STATEMENT

Fire insurance is mandatory in some states. The premium charge for fire losses that result from “certified acts of terrorism” and occur in states that require this coverage is \$ and is included in the total premium amount shown above. This mandatory premium will be charged whether you accept or reject terrorism coverage. ***[Drafting Note: Insert mandatory premium component for policy period or “Not Applicable” if certified act exclusion applicable to all exposures and no other statutorily mandated coverage is provided].***

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

[DATE]

[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –

- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
 - (II) the premises of a United States mission; and
- (iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism.” The premium for optional terrorism coverage is in addition to any mandatory premium shown on the attached Terrorism Coverage Election Form. Coverage for losses from “certified acts of terrorism” is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

The premium charge for this coverage for the policy period is **/\$ _____/**.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

TERRORISM COVERAGE ELECTION FORM

[Policyholder Name]

[Policyholder Name]

[Policy Number / Quote Number]

Effective:[mm/dd/yy]

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for /\$ /.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

MANDATORY PREMIUM DISCLOSURE STATEMENT

Fire insurance is mandatory in some states. The premium charge for fire losses that result from “certified acts of terrorism” and occur in states that require this coverage is \$ and is included in the total premium amount shown above. This mandatory premium will be charged whether you accept or reject terrorism coverage. ***[Drafting Note: Insert mandatory premium component for policy period or “Not Applicable” if certified act exclusion applicable to all exposures and no other statutorily mandated coverage is provided].***

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

[DATE]

[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –

- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
- (II) the premises of a United States mission; and

(iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism” where it could otherwise be excluded. This offer pertains only to those lines of business covered by TRIA and, more specifically, does not apply to commercial automobile insurance. This offer is also expressly conditioned upon your acceptance of coverage for “certified acts of terrorism” on all underlying insurance policies that are subject to TRIA or, where applicable, the existence of such coverage on all TRIA eligible lines for which you self insure. If you reject TRIA coverage on your primary liability policies, you must also reject it on your Excess, Umbrella or Umbrella Excess policy.

The premium charge for this coverage for the policy period is **/\$ _____/**.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

TERRORISM COVERAGE ELECTION FORM

[Policyholder Name]
[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for /\$ /.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

[DATE]

[Policyholder Name and Address]

[Policy Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE AND PREMIUM NOTICE TERRORISM RISK INSURANCE ACT

This notice contains important information about the Terrorism Risk Insurance Act and its effect on your policy. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”), establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a “certified act of terrorism” AND that is otherwise covered under your policy.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –
- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
 - (II) the premises of a United States mission; and
- (iv) 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.

MANDATORY PREMIUM DISCLOSURE STATEMENT

The premium charge for coverage for losses resulting from “certified acts of terrorism” is \$0. However, this coverage is subject to all other policy terms and conditions. This means that if you did not purchase coverage for “certified acts of terrorism” on any underlying policy to which this policy is excess, this policy will not apply to losses arising from such acts.

YOU NEED NOT DO ANYTHING FURTHER AT THIS TIME.

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy.

If you have any questions regarding this notice please contact your sales representative or agent.

Policy number

DISCLOSURE - TERRORISM RISK INSURANCE ACT

THIS ENCLOSURE IS MADE PART OF YOUR POLICY PURSUANT TO THE TERRORISM RISK INSURANCE ACT.

In accordance with the Terrorism Risk Insurance Act, including all amendments, ("TRIA" or the "Act"), we are required to provide you with a notice of:

1. The portion of your premium attributable to coverage for **certified acts of terrorism**;
2. The federal share of payment of losses from such acts; and
3. The limitation or "cap" on our liability under the Act.

Disclosure of Premium

We have made available coverage for *certified acts of terrorism* as defined in the Act. If purchased, the portion of your premium attributable to coverage for *certified acts of terrorism* is shown in the in the DECLARATIONS or elsewhere by endorsement in your policy.

Federal Participation In Payment Of Terrorism Losses

If an individual insurer's losses exceed a deductible amount specified in the Act, the federal government will reimburse us for eighty-five (85) percent of losses paid in excess of the deductible, provided that aggregate industry losses from a *certified act of terrorism* exceed \$100 million.

Cap On Insurer Participation In Payment Of Terrorism Losses

If aggregate insured losses attributable to *certified acts of terrorism* exceed \$100 billion in a calendar year and we have met our deductible under the Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion. Nor shall Treasury make any payment for any portion of the amount of such losses that exceeds \$100 billion. 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.

[DATE]

[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –

- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
- (II) the premises of a United States mission; and

(iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

Your renewal policy currently contains an exclusion for losses resulting from “certified acts of terrorism.” However, you have the option of purchasing this coverage. Coverage for losses from “certified acts of terrorism” is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

The premium charge for this coverage for the policy period is **/\$ _____/**.

Note: With respect to Excess, Umbrella, or Umbrella Excess Liability policies, this offer of coverage pertains only to those lines of business covered by TRIA and, more specifically, does not apply to commercial automobile insurance. In addition, this offer of TRIA coverage is expressly conditioned upon your acceptance of coverage for “certified acts of terrorism” on all underlying insurance policies that are subject to TRIA. If you reject such coverage on your primary liability policies, you must also reject it on your Excess, Umbrella or Umbrella Excess policy.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

WHAT YOU MUST DO

IF YOU DO NOT WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the attached Terrorism Coverage Election Form, sign it and return it. If you do not purchase this coverage, the terrorism exclusion that is on your policy will remain in full force and effect.

IF YOU WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the attached Terrorism Coverage Election Form and return the signed form by **[mm/dd/yyyy]**. Upon receipt of your election form, your policy will be endorsed to reflect this coverage through your policy period.

IF WE DO NOT RECEIVE YOUR COMPLETED TERRORISM COVERAGE ELECTION FORM BY **[mm/dd/yyyy]**, the terrorism exclusion that is on your policy will remain in full force and effect.

TERRORISM COVERAGE ELECTION FORM

[Policyholder Name]

[Policyholder Name]

[Policy Number / Quote Number]

Effective:[mm/dd/yy]

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for /\$ /.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

MANDATORY PREMIUM DISCLOSURE STATEMENT

Fire insurance is mandatory in some states. The premium charge for fire losses that result from “certified acts of terrorism” and occur in states that require this coverage is \$ and is included in the total premium amount shown above. This mandatory premium will be charged whether you accept or reject terrorism coverage. ***[Drafting Note: Insert mandatory premium component for policy period or “Not Applicable” if certified act exclusion applicable to all exposures and no other statutorily mandated coverage is provided].***

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.



MARCH 24, 2008

«NAME»

POLICY NO.: «POLICY»

Effective: «EFFECTIVE»

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –
 - (I) human life;
 - (II) property; or
 - (III) infrastructure;
- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –



- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
 - (II) the premises of a United States mission; and
- (iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism.”—The premium for optional terrorism coverage is in addition to any mandatory premium shown on the attached Terrorism Coverage Election Form. Coverage for losses from “certified acts of terrorism” is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

The premium charge for this coverage for the policy period is \$.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

IF YOU DO NOT WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the enclosed election form, sign the form and return it. If you do not purchase this coverage, exclusion for losses from “certified acts of terrorism” will be placed on your policy.

IF YOU WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the enclosed election form and return it by MM-DD-YYYY. Coverage for losses from a “certified act of terrorism” will be subject to all of the terms, definitions, exclusions and conditions currently in your policy. PLEASE READ YOUR POLICY CAREFULLY.

IF WE DO NOT RECEIVE YOUR TERRORISM COVERAGE ELECTION FORM BY MM-DD-YYYY, terrorism exclusion will be placed on your policy



TERRORISM COVERAGE ELECTION FORM

«NAME»

POLICY NO.: «POLICY»

Effective: «EFFECTIVE»

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for \$_____.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

MANDATORY PREMIUM DISCLOSURE STATEMENT

Fire insurance is mandatory in some states. The premium charge for fire losses that result from “certified acts of terrorism” and occur in states that require this coverage is \$_____ and is **not** included in the total premium amount shown above. This mandatory premium will be charged whether you accept or reject terrorism coverage. **[Drafting Note: Insert mandatory premium component for policy period or “Not Applicable” if certified act exclusion applicable to all exposures and no other statutorily mandated coverage is provided].**

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

[DATE]

[Policyholder Name]

[Policy Number / Quote Number] Effective:[mm/dd/yy]

POLICYHOLDER DISCLOSURE

NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD

This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.

THE TERRORISM RISK INSURANCE ACT

The Terrorism Risk Insurance Act, including all amendments (“TRIA” or the “Act”) establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer’s losses from a “certified act of terrorism” exceed a specified deductible amount, the government will reimburse the insurer for 85% of losses paid in excess of the deductible, but only if aggregate industry losses from such an act exceed \$100 million. An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

MANDATORY OFFER OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM” AND DISCLOSURE OF PREMIUM

TRIA requires insurers to offer coverage for losses resulting from “certified acts of terrorism” that could otherwise be excluded and to specify the premium for this coverage. You have the option to accept or reject this coverage.

A “certified act of terrorism” means:

[A]ny 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

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –

- (I) human life;
- (II) property; or
- (III) infrastructure;

- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –

- (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
- (II) the premises of a United States mission; and

(iv) 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.

HOW THE ACT AFFECTS YOUR POLICY AND WHAT YOU MUST DO

SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism.” The premium for optional terrorism coverage is in addition to any mandatory premium shown on the attached Terrorism Coverage Election Form. Coverage for losses from “certified acts of terrorism” is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

The premium charge for this coverage for the policy period is **[\$ _____]/**.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

IF YOU DO NOT WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the enclosed election form, sign the form and return it. If you do not purchase this coverage, exclusion for losses from “certified acts of terrorism” will be placed on your policy.

IF YOU WISH TO PURCHASE THIS COVERAGE, please check the appropriate box on the enclosed election form and return it by [MM-DD-YYYY]. Coverage for losses from a “certified act of terrorism” will be subject to all of the terms, definitions, exclusions and conditions currently in your policy. **PLEASE READ YOUR POLICY CAREFULLY.**

IF WE DO NOT RECEIVE YOUR TERRORISM COVERAGE ELECTION FORM BY [MM-DD-YYYY], terrorism exclusion will be placed on your policy

TERRORISM COVERAGE ELECTION FORM

[Policyholder Name]

[Policyholder Name]

[Policy Number / Quote Number] Effective: [mm/dd/yy]

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for **/\$ [redacted] /**.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism.”

POLICYHOLDER ACKNOWLEDGEMENT

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” the premium charge for losses covered by TRIA, and the Company’s limit of liability should losses covered by TRIA exceed \$100 billion.

Policyholder/Applicant Signature

Date

Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

SERFF Tracking Number: LMUG-125579039 *State:* Arkansas
First Filing Company: Liberty Insurance Corporation, ... *State Tracking Number:* EFT \$50
Company Tracking Number: LMSF-CW-004-08
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0002 Commercial Interline Filings
Product Name: Various lines of business
Project Name/Number: Terrorism Policyholder Disclosure Notices in accordance with the Terrorism Prgm Reauthorization Act of 2007/LMSF-CW-004-08

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: LMUG-125579039 State: Arkansas
First Filing Company: Liberty Insurance Corporation, ... State Tracking Number: EFT \$50
Company Tracking Number: LMSF-CW-004-08
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Various lines of business
Project Name/Number: Terrorism Policyholder Disclosure Notices in accordance with the Terrorism Prgm Reauthorization Act of 2007/LMSF-CW-004-08

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 04/02/2008

Comments:

Attachment:

F215 All Lines Expedited Filing Transmittal Terrorism.pdf

Satisfied -Name: Forms List **Review Status:** Approved 04/02/2008

Comments:

Attachment:

PAL Forms List for TRIA Filing _2_.pdf

**EXPEDITED FILING TRANSMITTAL DOCUMENT
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

This page applies to the following state(s) _____

Indicate Type of Filing
<input checked="" type="checkbox"/> Filing Related to <i>Certified Losses</i>
<input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i>
<input type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
Liberty Mutual Insurance Company	MA	23043	04-1543470
Liberty Mutual Fire Insurance Company	WI	23035	04-1924000
LM Insurance Corporation	IA	33600	04-3058504
The First Liberty Insurance Corporation	IA	33588	04-3058503
Liberty Insurance Corporation	IL	42404	03-0316876

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Marie Exon PO Box 8017, Wausau WI 54402-8017	877-792-8728 Ext: 6089	715-842-6828	Marie.exon@wausau.com

Filing information

Line of Insurance (see attachment)	Boiler & Machinery (Equipment Breakdown) Businessowners, Commercial General Liability, Commercial Inland Marine, Commercial Umbrella, Commercial Property
Company Program Title (Marketing title) (if applicable)	
Filing Type ** see note below	Disclosure Notices
This application is used with:	
Effective Date Requested	
Filing date	
Company Tracking Number	LMSF-CW-004-08
Date filing approved in domiciliary state, if applicable	Being filed at this time

	<u>Component/Form Name /Description/Synopsis</u>	<u>Form # or Rate Page Include edition date</u>	<u>Replacement Or withdrawn?</u>	<u>If replacement, give form # or rate page(s) it replaces</u>	<u>Previous State Filing Number, if required by state</u>
01	Policyholder Disclosure Terrorism Risk Insurance Act	GPO 4887 12 07	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
02	Policyholder Disclosure Terrorism Risk Insurance Act	GPO 4885 12 07	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
03	Policyholder Disclosure-Terrorism Insurance Premium Notice	2008 Form WC Offer Form Dollar Amnt with DTEC	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
04	Policyholder Disclosure Notice Of Offer To Purchase Terrorism Insurance For Policy Period	2008 TRIA PAL Offer Form D All Lines	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
05	Policyholder Disclosure Notice Of Offer To Purchase Terrorism Insurance For Policy Period	2008 TRIA PAL Offer Form D Primary Prop and Liab	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
06	Policyholder Disclosure Notice Of Offer To Purchase Terrorism Insurance For Policy Period	TRIA---2008 Offer Form D Umbrella	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		

07	Policyholder Disclosure And Premium Notice Terrorism Risk Insurance Act	2008 EH TRIA Offer	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
08	Disclosure – Terrorism Risk Insurance Act	EN 9052 Disclosure Enclosure	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
09		2008 TRIA Offer Form D – BSG Primary Prop/Liab	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
10		2008 TRIA Offer Form D – Global Property Only	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
11		2008 TRIA Offer Form D Casualty Only	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		

To be complete, a form 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.

Marie Exon

Marie Exon

State Filings Analyst

Signature

Print Name:

Title:

PAL Forms List for Commercial Markets 2008 TRIA Offer and Disclosure Filing (Liberty Brand)

Lines of Business	Form File Name	Form Title	Form Number	Edition Date
Motor Truck Cargo (KO) & Warehouse Legal Liability (KW) - Applies only to Liberty proprietary forms (KO and KW). Inland Marine (except DOP & Builders' Risk)	2008 Form WC Offer Form Dollar Amnt with DTEC doc	POLICYHOLDER DISCLOSURE -TERRORISM INSURANCE PREMIUM NOTICE	N/A	N/A
GL, Liquor Liability, OCP, RRP, Pollution Liability, Products/Completed Operations, & Underground Storage Tank, Electronic Data Liability & Products Withdrawal Liability, NY Special Protective & Highway Liability	2008 TRIA PAL Offer Form D All Lines	POLICYHOLDER DISCLOSURE NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	N/A	N/A
ISO Property, RM Select Property, Equipment Breakdown, DOP & Builder's Risk	2008 TRIA PAL Offer Form D Primary Prop and Liab doc	POLICYHOLDER DISCLOSURE NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD	N/A	N/A
Umbrella	TRIA---2008 Offer Form D Umbrella Doc	POLICYHOLDER DISCLOSURE NOTICE OF OFFER TO	N/A	N/A

		PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD		
Excess Indemnity - GL	2008 EH TRIA Offer doc	POLICYHOLDER DISCLOSURE AND PREMIUM NOTICE TERRORISM RISK INSURANCE ACT	N/A	N/A
GL, Liquor Liability, OCP, RRP, Pollution Liability, Products/Completed Operations, & Underground Storage Tank, Electronic Data Liability & Products Withdrawal Liability, NY Special Protective & Highway Liability, ISO Property, Equipment Breakdown, DOP & Builder's Risk, Motor Truck Cargo (KO) & Warehouse Legal Liability (KW) - Applies only to Liberty proprietary forms (KO and KW). Inland Marine (except DOP & Builders' Risk), Umbrella	GPO 4887 1207 – TRIA Policyholder Disclosure	POLICYHOLDER DISCLOSURE TERRORISM RISK INSURANCE ACT (LM)	GPO 4887	12 07
Property	EN 9052 Disclosure Enclosure	DISCLOSURE - TERRORISM RISK INSURANCE ACT (LMP)	EN 9052	12 07
Excess Indemnity - GL	TRIA Policyholder	POLICYHOLDER	GPO 4885	12 07

3/25/2008

	Disclosure (Excess GL)	DISCLOSURE TERRORISM RISK INSURANCE ACT (Excess GL)		
Property and Liability	2008 TRIA Offer Form D BSG Primary Prop/Liab		N/A	N/A
Property	2008 TRIA Offer Form D Global Property Only		N/A	N/A
Casualty lines	2008 TRIA Offer Form D Casualty Only		N/A	N/A

3/25/2008