

SERFF Tracking Number: PERR-125585680 State: Arkansas
Filing Company: DaimlerChrysler Insurance Company State Tracking Number: #102319 \$50
Company Tracking Number: DCIC-ML-TER-AR-08-01-F
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings
Product Name: Informational Terrorism Forms
Project Name/Number: DCIC-ML-TER-AR-08-01-F/DCIC-ML-TER-AR-08-01-F

Filing at a Glance

Company: DaimlerChrysler Insurance Company

Product Name: Informational Terrorism Forms SERFF Tr Num: PERR-125585680 State: Arkansas
TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: #102319 \$50
Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: DCIC-ML-TER-AR-08-01-F State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Authors: Faviola Jimenez, Lois Pimentel Disposition Date: 04/10/2008
Date Submitted: 03/31/2008 Disposition Status: Approved
Effective Date Requested (New): 05/01/2008 Effective Date (New): 05/01/2008
Effective Date Requested (Renewal): 05/01/2008 Effective Date (Renewal): 05/01/2008

State Filing Description:

General Information

Project Name: DCIC-ML-TER-AR-08-01-F Status of Filing in Domicile: Pending
Project Number: DCIC-ML-TER-AR-08-01-F Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 04/10/2008
State Status Changed: 04/10/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:

On behalf of DaimlerChrysler Insurance Company ("DCIC"), we are submitting an informational filing. As a result of the Terrorism Risk Insurance Program Reauthorization Act of 2007, several provisions of the Terrorism Risk Insurance Act of 2002 (TRIA) have changed. As a result of these revisions, we are submitting DCIC's policyholder disclosure notices for informational purposes. The enclosed notice is modeled after the NAIC model disclosure notices.

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We respectfully request that this filing be effective on May 1, 2008.

Enclosed is authorization for Perr&Knight to submit this filing on behalf of the Company. All correspondence related to this filing should be directed to Perr&Knight. The Company has prepared the forms contained in this filing. If there are any requests for additional information related to items prepared by the Company, we will forward the request immediately to the Company. We will submit the Company's response to your attention as soon as we receive it.

Please do not hesitate to contact us should you have any questions or concerns.

Company and Contact

Filing Contact Information

(This filing was made by a third party - perrandknightactuaryconsultants)

Lois Pimentel, State Filings Project Coordinator doi@perrknight.com
 Perr&Knight (888) 201-5123 [Phone]
 Pacific Palisades, CA 90272 (310) 230-8529[FAX]

Filing Company Information

DaimlerChrysler Insurance Company CoCode: 10499 State of Domicile: Michigan
 27777 Inkster Road Group Code: Company Type:
 CIMS 405-17-06
 Farmington Hills, MI 48334-5326 Group Name: DaimlerChrysler State ID Number:
 Group
 (248) 427-4155 ext. [Phone] FEIN Number: 38-1775863

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
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DaimlerChrysler Insurance Company \$0.00 03/31/2008

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CHECK NUMBER	CHECK AMOUNT	CHECK DATE
102319	\$50.00	03/28/2008

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	04/10/2008	04/10/2008

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Disposition

Disposition Date: 04/10/2008

Effective Date (New): 05/01/2008

Effective Date (Renewal): 05/01/2008

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	Expedited Terrorism Form, Filing Memorandum, Letter of Authorization	Approved	Yes
Form	OFFER OF TERRORISM COVERAGE AND DISCLOSURE OF PREMIUM NEW AND RENEWAL BUSINESS	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	OFFER OF TERRORISM COVERAGE AND DISCLOSURE OF PREMIUM NEW AND RENEWAL BUSINESS	84-293- 7648	01/08	Disclosure/ Replaced Notice	Replaced Form #:0.00 84-293-7648 09/03 Previous Filing #:		TRIA Disclosure new and renewal.pdf

Named Insured: _____
 Policy Number(s): _____

 Policy Term: _____

DaimlerChrysler Insurance Company
 27777 Inkster Road
 Farmington Hills, MI
 1-800-782-9164

NOTICE

**OFFER OF TERRORISM COVERAGE AND DISCLOSURE OF PREMIUM
 NEW AND RENEWAL BUSINESS**

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, that you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR 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.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS’ LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

Acceptance or Rejection of Terrorism Insurance Coverage

	I hereby elect to purchase terrorism coverage for a prospective premium of \$ _____ .
	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism

If your policy provides commercial property or inland marine insurance in a jurisdiction that has a statutory standard fire policy, the premium shown above includes an amount attributable to the insurance provided pursuant to that statutory standard fire policy, which cannot be rejected. That amount is \$ _____

 Insured’s Authorized Representative

 Date

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 04/10/2008

Comments:

Attachment:

2007 NAIC FFS.pdf

Satisfied -Name: Expedited Terrorism Form, Filing
Memorandum, Letter of
Authorization **Review Status:** Approved 04/10/2008

Comments:

Attachments:

Expedited Terrorism Form.pdf

Informational Filing Memo-all states.pdf

2008 LOA.pdf

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)
(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	DCIC-ML-TER-AR-08-01-F			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A			
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	OFFER OF TERRORISM COVERAGE AND DISCLOSURE OF PREMIUM - NEW AND RENEWAL BUSINESS	84-293-7648 01 08	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

**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 <i>Certified Losses</i>
? Filing Related to <i>Non-Certified Losses</i>
? Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #
DaimlerChrysler Insurance Company	MI	<u>000-10499</u>	<u>38-1775863</u>

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Lois Pimentel Perr&Knight 881 Alma Real Dr Ste 205 Pacific Palisades, CA 90272	888.201.5123, ext 162	310.230.8529	doi@perrknight.com

Filing information

Line of Insurance (see attachment)	Multiple – Commercial Property, Commercial Inland Marine, General Liability, Commercial Umbrella, Commercial Crime
Company Program Title (Marketing title) (if applicable)	Terrorism Disclosure Notice Informational Filing
Filing Type ** see note below	Form (Endorsement)
This application is used with:	All policies
Effective Date Requested	May 1, 2008
Filing date	March 28, 2008
Company Tracking Number	DCIC-ML-TER-AR-08-01-F
Date filing approved in domiciliary state, if applicable	Pending

	<u>Component/Form Name</u> <u>/Description/Synopsis</u>	<u>Form # or Rate Page</u> <u>Include edition date</u>	<u>Replacement</u> <u>Or withdrawn?</u>	<u>If replacement,</u> <u>give form # or rate</u> <u>page(s) it replaces</u>	<u>Previous State</u> <u>Filing Number,</u> <u>if required</u> <u>by state</u>
01	OFFER OF TERRORISM COVERAGE AND DISCLOSURE OF PREMIUM - NEW AND RENEWAL BUSINESS	84-293-7648 01 08	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	84-293-7648 09 03	
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
03			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> 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.**

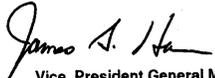
The insurer(s) submitting this filing certifies that it:

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.

James Haan

Vice President General Manager


Vice President General Manager

Signature

Print Name:

Title:

**DAIMLERCHRYSLER INSURANCE COMPANY
INFORMATION FILING
POLICYHOLDER NOTICES FOR
TERRORISM RISK INSURANCE ACT**

FILING MEMORANDUM

On behalf of DaimlerChrysler Insurance Company ("DCIC"), we are submitting an informational filing. As a result of the Terrorism Risk Insurance Program Reauthorization Act of 2007, several provisions of the Terrorism Risk Insurance Act of 2002 (TRIA) have changed. As a result of these revisions, we are submitting DCIC's policyholder disclosure notices for informational purposes. The enclosed notice is modeled after the NAIC model disclosure notices.

At this time DCIC does not have any in force policies in your state for the various lines affected by TRIA. Since there are no current inforce policies, we are submitting for your review the acceptance/rejection notice for new policies.

DCIC is a member of Insurance Services Office ("ISO") and has given ISO authority to file loss costs, rules, other supplementary rating information and policy forms and endorsements on their behalf in those states where allowed. If your state does not allow ISO to file on DCIC's behalf, a separate filing is being made to adopt the ISO forms and rules. DCIC is submitting their policyholder disclosure notice with this filing.

DAIMLERCHRYSLER

DaimlerChrysler
Insurance Company

February 11, 2008

To Whom It May Concern:

Perr & Knight, Inc. is hereby authorized to submit rate, rule, and form filings on behalf of DaimlerChrysler Insurance Company. This authorization includes providing additional information and responding to questions regarding the filings on our behalf as necessary. The authorization is deemed to be in effect until December 31, 2008.

Please direct all correspondence and inquiries related to this filing to Perr & Knight, Inc. at the following address:

State Filings Department
Perr & Knight, Inc.
881 Alma Real Drive, Suite 205
Pacific Palisades, CA 90272

Please contact me at 248-427-4223 if you have any questions regarding this authorization.

Sincerely,



James S. Haan
Vice President & General Manager
DaimlerChrysler Insurance Company

Company

A member of the DaimlerChrysler Services Group

DaimlerChrysler Insurance

27777 Inkster Road
Farmington Hills, MI 48334-5326
www.dcxins.com