

SERFF Tracking Number: REGU-125586764 State: Arkansas
Filing Company: Axis Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AXIS-TRIA-AR-EX-08
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0020 Commercial Umbrella & Excess
Product Name: AXIS Excess Liability TRIA Policyholder Disclosure Notice
Project Name/Number: /

Filing at a Glance

Company: Axis Insurance Company
Product Name: AXIS Excess Liability TRIA Policyholder Disclosure Notice
TOI: 17.0 Other Liability - Claims Made/Occurrence
Sub-TOI: 17.0020 Commercial Umbrella & Excess
Filing Type: Form

SERFF Tr Num: REGU-125586764 State: Arkansas
SERFF Status: Closed State Tr Num: EFT \$50
Co Tr Num: AXIS-TRIA-AR-EX-08 State Status: Fees verified and received
Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
Author: Jason Graciolett Disposition Date: 04/16/2008
Date Submitted: 03/31/2008 Disposition Status: Approved
Effective Date Requested (New): 03/31/2008 Effective Date (New):
Effective Date Requested (Renewal): 03/31/2008 Effective Date (Renewal):
State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed
Project Number: Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 04/16/2008
State Status Changed: 04/16/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
AXIS Insurance Company is submitting the attached endorsement and associated notices for use with their Commercial Excess Liability Program. The endorsement and notices are in compliance with the TRIA Reauthorization Act of 2007.

This filing is being made for informational purposes only.

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Enclosed are the following:

- Expedited TRIA Transmittal
- Filing Authorization
- XLE-5009-12-07 – Independent Endorsement
- NOT PURCH DISCL – Policyholder Disclosure Notice
- OFR DISCL - Policyholder Disclosure Notice
- PURCH DISCL - Policyholder Disclosure Notice

We ask that this filing be approved for all policies effective on March 31, 2008.

Company and Contact

Filing Contact Information

(This filing was made by a third party - insuranceregulatoryconsultantsllc)
 Jason Graciolett, Analyst jasongraciolett@ircllc.com
 50 Broad Street (212) 571-3989 [Phone]
 New York, NY 10004

Filing Company Information

Axis Insurance Company	CoCode: 37273	State of Domicile: Illinois
50 Broad Street	Group Code: 3416	Company Type:
Suite 501		
New York, NY 10004	Group Name:	State ID Number:
(212) 571-3989 ext. [Phone]	FEIN Number: 39-1338397	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
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Axis Insurance Company \$50.00 03/31/2008 19149438

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	04/16/2008	04/16/2008

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Disposition

Disposition Date: 04/16/2008

Effective Date (New):

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	Filing Authorization	Approved	Yes
Supporting Document	Expedited TRIA Transmittal	Approved	Yes
Form	WAR OR TERRORISM EXCLUSION WITH EXCEPTION FOR CERTIFIED ACTS OF TERRORISM; CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM	Approved	Yes
Form	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE – NOT PURCHASED	Approved	Yes
Form	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE	Approved	Yes
Form	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE	Approved	Yes

SERFF Tracking Number: REGU-125586764

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	WAR OR TERRORISM EXCLUSION WITH EXCEPTION FOR CERTIFIED ACTS OF TERRORISM; CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM	XLE-5009-12-07 12-07	12-07	Endorseme New nt/Amendm ent/Condi ons		0.00	XLE-5009 12-07 War or Terrorism Exclusion with Exception for Certified Acts of Terrorism Excess Exclusion 12-07.pdf
Approved	POLICYHOLDER NOT DISCLOSURE PURCH NOTICE OF DISCL TERRORISM INSURANCE COVERAGE – NOT PURCHASED	PURCH DISCL	12-07	Disclosure/ New Notice		0.00	NOTPURCH DISCL - Policyholder Disclosure Notice - Terrorism Coverage Not Purchased _2_.pdf
Approved	POLICYHOLDER OFR DISCLOSURE DISCL NOTICE OF TERRORISM INSURANCE COVERAGE	DISCL	12-07	Disclosure/ New Notice		0.00	OFR DISCL - Policyholder Disclosure Notice _Offer_.pdf
Approved	POLICYHOLDER PURCH DISCLOSURE DISCL NOTICE OF TERRORISM	PURCH DISCL	12-07	Disclosure/ New Notice		0.00	PURCH DISCL - Policyholder Disclosure

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INSURANCE
COVERAGE

Notice
Purchase.
pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAR OR TERRORISM EXCLUSION WITH EXCEPTION FOR
CERTIFIED ACTS OF TERRORISM;
CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM**

I. Exclusion 3. of this policy is deleted in its entirety and replaced by the following:

This insurance does not apply to:

3. A. Any liability or damages arising, directly or indirectly, out of:

- (1) War, including undeclared or civil war;
- (2) Warlike action by a military force, including action in hindering or defending against an actual or expected attack, by any government, sovereign or other authority using military personnel or other agents;
- (3) Insurrection, rebellion, revolution, usurped power, or action taken by governmental authority in hindering or defending against any of these; or
- (4) "Terrorism", including any action taken in hindering or defending against an actual or expected incident of "terrorism";

regardless of any other cause or event that contributes concurrently or in any sequence to any injury or damage.

B. Provision 3. A. (4) of this exclusion does not apply to the extent that "underlying insurance" is applicable for injury and damage arising out of a "certified act of terrorism". Any coverage provided under this insurance will follow the provisions, exclusions, and limitations of the applicable "underlying insurance" unless otherwise directed by more specific provisions, terms or conditions of this insurance. Such applicable "underlying insurance" must be scheduled in Schedule A. of this policy for this exception to apply.

C. If aggregate insured losses attributable to "certified acts of terrorism" exceed \$100 billion in a Program Year (January 1 through December 31) and we have met our insurer deductible under the federal Terrorism Risk Insurance Act of 2002, as amended, we shall not be liable for the payment of any portion of the amount of such losses that exceed \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

D. "Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State and the Attorney General of the United States, to be an act of terrorism pursuant to the federal Terrorism Risk Insurance Act of 2002, as amended. The federal Terrorism Risk Insurance Act of 2002 sets forth the following criteria for a "certified act of terrorism":

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

- (1) The act resulted in aggregate losses in excess of \$5 million; and
- (2) The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM
INSURANCE COVERAGE – NOT PURCHASED**

This Notice is issued in accordance with the terms and conditions of the Terrorism Risk Insurance Act, as amended (the "Act").

You are hereby notified that coverage for "insured losses" directly resulting from an "act of terrorism" as defined in the Act, as explained in the Policyholder Disclosure notice, (1) was made available to you; and (2) you declined or failed to confirm the purchase of such coverage. Therefore, this insurance does not provide coverage for losses directly resulting from any "act of terrorism" as defined by the Act except to the extent, if any, otherwise provided by this Policy.

**NOTICE TO BROKER
MANDATORY POLICYHOLDER DISCLOSURE
RE: TERRORISM INSURANCE COVERAGE**

We are required by the Terrorism Risk Insurance Act, as amended (the "Act"), to provide policyholders with certain clear and conspicuous disclosures. This notice must be provided at the time of offer, purchase and renewal of the policy.

We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our insured.

**POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM
INSURANCE COVERAGE**

You are hereby notified that under the Terrorism Risk Insurance Act, as amended (the "Act"), 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.

If, as a part of your policy, you also elect to purchase this terrorism coverage from us, you will be charged an additional premium of \$[insert premium amount].

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 ABOVE 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.

NOTICE TO BROKER

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RE: TERRORISM INSURANCE COVERAGE**

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We have provided you with a notice that meets the Act's requirements. You are instructed to deliver a copy of this notice to our prospective insured.

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**POLICYHOLDER DISCLOSURE
NOTICE OF TERRORISM
INSURANCE COVERAGE**

Coverage for acts of terrorism is included in your policy. You are hereby notified that an "act of terrorism", as defined in Section 102(1) of the Terrorism Risk Insurance Act, as amended (the "Act"), 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. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. 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 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 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 portion of your annual premium that is attributable to coverage for acts of terrorism is _____ and does not include any charges for the portion of losses covered by the United States government under the Act.

NOTICE TO BROKER

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TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0020 Commercial Umbrella & Excess
Product Name: AXIS Excess Liability TRIA Policyholder Disclosure Notice
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Review Status:
Satisfied -Name: Filing Authorization **Approved** 04/16/2008
Comments:
Attachment:
Authorization Letter _IRC_Excess Liab- AIC 032108 TRIA Disclosure Notice.pdf

Review Status:
Satisfied -Name: Expedited TRIA Transmittal **Approved** 04/16/2008
Comments:
Attachment:
AR - EXP TRIA 12-2007.pdf



March 21, 2008

LETTER OF FILING AUTHORIZATION

I, Duane Manns CPCU, AU, am a duly authorized Filing and Regulatory Manager of AXIS Insurance Company. This letter authorizes Insurance Regulatory Consultants, LLC (IRC) to file on behalf of AXIS Insurance Company Terrorism Disclosure Notices for informational purposes and our revised War and Terrorism Exclusion to our Excess liability program. This authorization extends to all correspondence and inquiries in connection with this Excess Liability filing. Please direct all correspondence regarding this program to:

Insurance Regulatory Consultants, LLC (IRC)
50 Broad Street, Suite 501
New York, NY 10004

AXIS Insurance Company

Duane Manns CPCU, AU

Name

Filing and Regulatory Manager

Title

A handwritten signature in cursive script that reads "Duane Manns". The signature is written in black ink and is positioned above a horizontal line.

Signature

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

This page applies to the following state(s) ARKANSAS

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 #
AXIS Insurance Company	Illinois	3416-37273	39-1338397

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail
Jason Graciolett - Analyst, IRC LLC 50 Broad St., Suite 501 New York, NY 10004	(212) 571-3989	(212) 571-2502	jasongraciolett@ircllc.com

Filing information

Line of Insurance (see attachment)	17.0 - Comm. Other Liability / 17.0020 - Comm. Umbrella & Excess
Company Program Title (Marketing title) (if applicable)	
Filing Type ** see note below	TRIA Disclosure Notice
This application is used with:	
Effective Date Requested	3/31/2008
Filing date	3/31/2008
Company Tracking Number	AXIS-TRIA-AR-EX-08
Date filing approved in domiciliary state, if applicable	Pending - All states filed simultaneously.

	Component/Form Name /Description/Synopsis	Form # or Rate Page Include edition date	Replacement Or withdrawn?	If replacement, give form # or rate page(s) it replaces	Previous State Filing Number, if required by state
01	WAR OR TERRORISM EXCLUSION WITH EXCEPTION FOR CERTIFIED ACTS OF TERRORISM; CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM	XLE-5009-12-07	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
02	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE - NOT PURCHASED	NOT PURCH DISCL	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
03	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE	OFR DISCL	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		
04	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE	PURCH DISCL	<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Neither		

- The appropriate filing fees, if required.
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

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

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



Signature

Jason Graciolett

Print Name:

Analyst - IRC, LLC

Title: