

SERFF Tracking Number: AMAX-125660317 State: Arkansas
Filing Company: American Association of Insurance Services State Tracking Number: EFT \$100
Company Tracking Number: AAIS-2008-25AP
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners
Liability
Product Name: Artisans
Project Name/Number: CW AP TCPA CAN-SPAM Exclusion Endt - AAIS-2008-25AP /AAIS-2008-25AP

Filing at a Glance

Company: American Association of Insurance Services

Product Name: Artisans SERFF Tr Num: AMAX-125660317 State: Arkansas
TOI: 05.0 Commercial Multi-Peril - Liability & Non-Liability SERFF Status: Closed State Tr Num: EFT \$100

Sub-TOI: 05.0002 Businessowners Co Tr Num: AAIS-2008-25AP State Status: Fees verified and received

Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Author: SPI AAIS Disposition Date: 05/29/2008
Date Submitted: 05/21/2008 Disposition Status: Filed

Effective Date Requested (New): 11/01/2008 Effective Date (New): 11/01/2008
Effective Date Requested (Renewal): Effective Date (Renewal):

State Filing Description:

General Information

Project Name: CW AP TCPA CAN-SPAM Exclusion Endt - AAIS-2008-25AP Status of Filing in Domicile: Pending

Project Number: AAIS-2008-25AP

Reference Organization:

Reference Title:

Filing Status Changed: 05/29/2008

State Status Changed: 05/29/2008

Corresponding Filing Tracking Number:

Filing Description:

Re: AAIS-2008-25AP

Artisans Program

Revised Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003,
and Other Information Distribution Violations Exclusion

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

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Filing Fees

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Association of Insurance Services	\$100.00	05/21/2008	20434218

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Llyweyia Rawlins	05/29/2008	05/29/2008

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	AR - FORM FILING ABSTRACT F-1	Filed	Yes
Supporting Document	AP 0235 02 08 Filing Memo	Filed	Yes
Supporting Document	AP 0235 02 08 to AP 0235 10 05	Filed	Yes
Supporting Document	Forms Company Action Exhibit	Filed	Yes
Form	Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003, and Other Information Distribution Violations Exclusion	Filed	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Filed	Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003, and Other Information Distribution Violations Exclusion	AP 0235	02 08	Endorsement/Amendment/Conditions	Replaced Form #:50.12 AP 0235 10 05 Previous Filing #: AR-PC-05-015737		AP 0235.PDF

TELEPHONE CONSUMER PROTECTION ACT OF 1991, CAN-SPAM ACT OF 2003, AND OTHER INFORMATION DISTRIBUTION VIOLATIONS EXCLUSION

The Commercial Liability Coverage is amended as follows:

EXCLUSIONS

The following exclusion is added under Exclusions That Apply To Bodily Injury, Property Damage, Personal Injury, And/Or Advertising injury:

"We" do not pay for "bodily injury", "property damage", "personal injury", or "advertising injury" arising directly or indirectly out of violations of or alleged violations of:

- a. the Telephone Consumer Protection Act of 1991 (TCPA), including any amendments thereto, and any similar federal, state, or local laws, ordinances, statutes, or regulations;
- b. the CAN-SPAM Act of 2003, including any amendments thereto, and any similar federal, state, or local laws, ordinances, statutes, or regulations; or
- c. any federal, state, or local law, regulation, statute or ordinance, other than the TCPA or the CAN-SPAM Act of 2003, that limits or prohibits the communicating, transmitting, sending or distribution of material or information.

SERFF Tracking Number: AMAX-125660317 State: Arkansas
Filing Company: American Association of Insurance Services State Tracking Number: EFT \$100
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Liability
Product Name: Artisans
Project Name/Number: CW AP TCPA CAN-SPAM Exclusion Endt - AAIS-2008-25AP /AAIS-2008-25AP

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Filed 05/29/2008

Comments:

Attachments:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF
AR - NAIC FORM FILING SCHEDULE.PDF

Satisfied -Name: AR - FORM FILING ABSTRACT F-
1 **Review Status:** Filed 05/29/2008

Comments:

Attachment:

AR - FORM FILING ABSTRACT F-1.PDF

Satisfied -Name: AP 0235 02 08 Filing Memo **Review Status:** Filed 05/29/2008

Comments:

Attachment:
AP 0235 02 08 Filing Memo.PDF

Satisfied -Name: AP 0235 02 08 to AP 0235 10 05 **Review Status:** Filed 05/29/2008

Comments:

Attachment:
AP 0235 02 08 to AP 0235 10 05.PDF

Satisfied -Name: Forms Company Action Exhibit **Review Status:** Filed 05/29/2008

Comments:

Attachment:

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #			
	0000			
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
American Association of Insurance Services	DE	31400	36-2021360	

5. Company Tracking Number	AAIS-2008-25AP
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Norma Jean Knight 1745 South Naperville Road Wheaton IL 60187-8132	Filings/Compliance Specialist	800-564-2247 Ext. 243	630-681-8356	normak@aaisonline.com
7.	Signature of authorized filer				
8.	Please print name of authorized filer		Norma Jean Knight		

Filing Information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	05.0 Commercial Multi-Peril - Liability & Non-Liability
10.	Sub-Type of Insurance (Sub-TOI)	05.0002 Businessowners
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Artisans Program
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 11/01/2008 Renewal: N/A
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	We are the rating organization
17.	Reference Organization # & Title	
18.	Company's Date of Filing	May 21, 2008
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	AAIS-2008-25AP
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Re: AAIS-2008-25AP
 Artisans Program
 Revised Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003,
 and Other Information Distribution Violations Exclusion

On behalf of our affiliated companies, the American Association of Insurance Services (AAIS) is filing changes to the above captioned program. Our filing consists of a revised endorsement.

The Filing Memorandum provides detailed descriptions of the changes and additions being proposed at this time. Side-by-side comparisons of the current-to-revised countrywide endorsements are included. Copies of all materials are enclosed.

We propose that the filing become effective November 1, 2008. Companies will be advised to take the filing action outlined in the attached company action exhibit.

Please be advised that, upon approval, the materials that are the subject of this filing may also be provided to affiliated companies in an electronic format. We will be happy to furnish you the same materials electronically, upon request. Due to differences in printer configurations or other hardware or software differences, the appearance of the materials that are the subject of this filing may be altered slightly when produced by another system. Such alterations will be cosmetic only and will not affect the content of the filed materials.

22.	Filing Fees (Filer must provide check # and fee amount if applicable.) [If a state requires you to show how you calculated your filing fees, place that calculation below]				
<table style="width: 100%; border: none;"> <tr> <td style="width: 15%;">Check #:</td> <td>EFT</td> </tr> <tr> <td>Amount:</td> <td>\$100.00</td> </tr> </table> <p style="text-align: center; margin-top: 20px;">Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>		Check #:	EFT	Amount:	\$100.00
Check #:	EFT				
Amount:	\$100.00				

***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

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 #	AAIS-2008-25AP
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2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A
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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	Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003, and Other Information Distribution Violations Exclusion	AP 0235 02 08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	AP 0235 10 05	AR-PC-05-015737
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		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
11			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

ARKANSAS INSURANCE DEPARTMENT

FORM FILING ABSTRACT

ALL QUESTIONS MUST BE ANSWERED

Companies filing for a group may use a consolidated abstract if all forms are identical.

1. Date Filed May 21, 2008

2. Company Name(s) American Association of Insurance Services

Group Name _____ NAIC No. 31400 Group No. 0000

3. (a) Annual Statement Line of Business Number (Page 14) 05.0 Commercial Multi-Peril - Liability & Non-Liability

(b) Class of Business 05.0002 Businessowners

© Coverages Affected Artisans

4. (a) Name of Advisory Organization, if any We are the rating organization

(b) Affiliations with Advisory Organization: Member () Subscriber ()

5. Is this a reference filing? Yes () No () If yes, please provide the following:

(a) Name of Advisory Organization (or Affiliated Company) _____

(b) Date of Filing _____

© Filing Designation Number or Description _____

PROVIDE THE INFORMATION REQUESTED ON PAGE 2 OF THIS FORM

7. Has the form(s) been approved for use in your domiciliary state and/or other states?
Pending/pending

8. Is the form filed in response to or due to legislation? If so, specify legislation.
No

9. Is the form in response to or due to recent court decisions? If so, give citation.
No

THIS INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Norma Jean Knight

Signature

Norma Jean Knight

Title

630-681-8347

Telephone Number

Old Form No.	Proposed Effective Date of New Form	New Form No.	Title of the Form(s); also Indicate Withdrawals: Provide Synopsis of Coverage
AP 0235 10 05	11/01/08	AP 0235 02 08	Telephone Consumer Protection Act of 1991, CAN-SPAM Act of 2003, and Other Information Distribution Violations Exclusion

AMERICAN ASSOCIATION OF INSURANCE SERVICES'
Artisans Program -- Endorsements
Filing Memorandum

Countrywide

AAIS is filing a revised endorsement for use with the current Artisans Program policy form. AAIS is filing this endorsement, which adds a paragraph and includes a title change, to clarify its intent to exclude liability for violations of any federal, state, or local law, regulation, statute or ordinance that limits or prohibits communicating, transmitting, sending or distribution of material or information, and not just the Telephone Consumer Protection Act of 1991 (TCPA) and the Controlling The Assault Of Non-Solicited Pornography And Marketing Act Of 2003 (CAN-SPAM).

A copy of the revised endorsement described below is included with this filing.

**AP 0235 02 08 TELEPHONE CONSUMER PROTECTION ACT OF 1991, CAN-SPAM
ACT OF 2003, AND OTHER INFORMATION DISTRIBUTION VIOLATIONS
EXCLUSION**

Endorsement AP 0235 02 08 replaces endorsement AP 0235 10 05 to clarify AAIS's intent, by adding a paragraph and including a title change, to exclude liability for violations of any federal, state, or local law, regulation, statute or ordinance, other than TCPA or the CAN-SPAM Act of 2003, that limits or prohibits the communicating, transmitting, sending or distribution of material or information.

~~TELEPHONE CONSUMER PROTECTION ACT OF 1991
AND CAN-SPAM ACT OF 2003 EXCLUSION~~
TELEPHONE CONSUMER PROTECTION ACT OF 1991, CAN-SPAM
ACT OF 2003, AND OTHER INFORMATION DISTRIBUTION
VIOLATIONS EXCLUSION

The Commercial Liability Coverage is amended as follows:

EXCLUSIONS

The following ~~exclusions are~~ exclusion is added under Exclusions That Apply To Bodily Injury, Property Damage, Personal Injury, And/Or Advertising injury:

"We" ~~will do~~ not pay for "bodily injury", "property damage", "personal injury", or "advertising injury" arising directly or indirectly out of violations of or alleged violations of:

- ~~4a.~~ the Telephone Consumer Protection Act of 1991 (TCPA), including any amendments thereto, and any similar federal, state, or local laws, ordinances, statutes, or regulations; ~~or~~
- ~~2b.~~ the CAN-SPAM Act of 2003, including any amendments thereto, and any similar federal, state, or local laws, ordinances, statutes, or regulations; or
- c. any federal, state, or local law, regulation, statute or ordinance, other than the TCPA or the CAN-SPAM Act of 2003, that limits or prohibits the communicating, transmitting, sending or distribution of material or information.

AMERICAN ASSOCIATION OF INSURANCE SERVICES

COMPANY ACTION EXHIBIT

ARKANSAS

FORMS

Companies that have granted AAIS filing authority for forms and endorsements for this line of insurance:

- can adopt an AAIS forms and endorsements filing, without modifications, on the effective date designated by AAIS without notifying the Arkansas Insurance Department (ARID).
- can adopt an AAIS forms and endorsements filing on an earlier effective date by notifying the ARID at least 30 days before their chosen effective date.
- can adopt an AAIS forms and endorsements filing on a later effective date by notifying the ARID at least 30 days before the effective date designated by AAIS.
- can modify an AAIS forms and endorsements filing by establishing an effective date and submitting their modifications to the ARID at least 30 days before their chosen effective date.
- can choose not to adopt an AAIS forms and endorsements filing by notifying the ARID on or before the effective date designated by AAIS.

Companies that have not granted AAIS filing authority for forms and endorsements for this line of insurance:

- can adopt an AAIS forms and endorsements filing by establishing an effective date and making a reference filing with the ARID at least 30 days before their chosen effective date. A reference filing should contain only transmittal forms and the filing reference numbers. Copies of AAIS filed and approved materials should **not** be included in a reference filing.

Include the AAIS and state file numbers in all correspondence with the ARID.