

SERFF Tracking Number: CHER-125587007 State: Arkansas  
Filing Company: Securian Casualty Company State Tracking Number: #1198 \$50  
Company Tracking Number: CPI-END  
TOI: 28.0 Credit Sub-TOI: 28.0002 Creditor-Placed Auto  
Product Name: CPI Endorsements  
Project Name/Number: /

## Filing at a Glance

Company: Securian Casualty Company  
Product Name: CPI Endorsements  
TOI: 28.0 Credit  
Sub-TOI: 28.0002 Creditor-Placed Auto

SERFF Tr Num: CHER-125587007 State: Arkansas  
SERFF Status: Closed State Tr Num: #1198 \$50  
Co Tr Num: CPI-END State Status: Fees verified and received  
Co Status: Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding  
Author: Laura Jones Disposition Date: 05/07/2008  
Date Submitted: 04/23/2008 Disposition Status: Approved  
Effective Date (New): 05/07/2008  
Effective Date (Renewal): 05/07/2008

Filing Type: Form

Effective Date Requested (New): On Approval  
Effective Date Requested (Renewal): On Approval

State Filing Description:

## General Information

Project Name:  
Project Number:  
Reference Organization:  
Reference Title:  
Filing Status Changed: 05/07/2008  
State Status Changed: 05/07/2008  
Corresponding Filing Tracking Number:  
Filing Description:  
April 23, 2008

Status of Filing in Domicile: Pending  
Domicile Status Comments:  
Reference Number:  
Advisory Org. Circular:  
Deemer Date:

Arkansas Insurance Department  
1200 West Third St.



SERFF Tracking Number: CHER-125587007 State: Arkansas  
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TOI: 28.0 Credit Sub-TOI: 28.0002 Creditor-Placed Auto  
Product Name: CPI Endorsements  
Project Name/Number: /

## Company and Contact

### Filing Contact Information

Laura Jones, Assistant Vice President  
P.O. Box 6097  
Macon, GA 31208

Laura.Jones@cnlf.com  
(478) 314-3159 [Phone]  
(478) 757-1568[FAX]

### Filing Company Information

Securian Casualty Company  
P O Box 6097

CoCode: 10054  
Group Code: 869

State of Domicile: Minnesota  
Company Type: Property &  
Casualty

Macon, GA 31208-6097  
(478) 314-3159 ext. [Phone]

Group Name:  
FEIN Number: 41-1741988

-----

State ID Number:

## Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:  
Per Company: No

SERFF Tracking Number: CHER-125587007

State: Arkansas

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	05/07/2008	05/07/2008

*SERFF Tracking Number:*      *CHER-125587007*

*State:*      *Arkansas*

*Filing Company:*      *Securian Casualty Company*

*State Tracking Number:*      *#1198 \$50*

*Company Tracking Number:*      *CPI-END*

*TOI:*      *28.0 Credit*

*Sub-TOI:*      *28.0002 Creditor-Placed Auto*

*Product Name:*      *CPI Endorsements*

*Project Name/Number:*      */*

## **Disposition**

Disposition Date: 05/07/2008

Effective Date (New): 05/07/2008

Effective Date (Renewal): 05/07/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CHER-125587007 State: Arkansas  
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes
Form	Waiver of ACV Settlement Option	Approved	Yes
Form	ACV Settlement Option Endorsement	Approved	Yes
Form	Skip and Confiscation Coverage Endorsement	Approved	Yes
Form	120% ACV Settlement Endorsement	Approved	Yes
Form	Pro Rata Premium Refund Endorsement	Approved	Yes
Rate	Rates	Approved	Yes

SERFF Tracking Number: CHER-125587007 State: Arkansas  
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## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Waiver of ACV Settlement Option	08-50500	04/08	Endorsement/Amendment/Conditions	New	08-50500_SCC	Waiver of ACV Settlement Option Endorsement.pdf
Approved	ACV Settlement Option Endorsement	08-50101	04/08	Endorsement/Amendment/Conditions	New	08-50501_SCC	ACV Settlement Option Endorsement.pdf
Approved	Skip and Confiscation Coverage Endorsement	08-50502	04/08	Endorsement/Amendment/Conditions	New	08-50502_SCC	Skip and Confiscation Coverage Endorsement.pdf
Approved	120% ACV Settlement Endorsement	08-50509	04/08	Endorsement/Amendment/Conditions	New	08-50509	120% ACV Settlement.pdf
Approved	Pro Rata Premium Refund Endorsement	08-50510	04/08	Endorsement/Amendment/Conditions	New	08-50510	Pro Rata Premium Refund Endorsement.pdf



# SECURIAN CASUALTY COMPANY

## MAXIMUM LIABILITY – SETTLEMENT OPTIONS

**Insuring Agreement 6.** Our Maximum Liability, Settlement Options is deleted in its entirety and replaced as follows:

- 6. OUR MAXIMUM LIABILITY, SETTLEMENT OPTIONS** – The amount we will pay will not exceed the least of:
- A. The cost to repair the collateral;
  - B. The actual cash value of the collateral as of the date you report the loss to us, less salvage value;
  - C. Your unpaid loan balance as of the date you report the loss to us, less:
    - any payments more than one hundred-twenty (12) days past due, and
    - unearned interest and finance charges and unearned insurance charges, and
    - net salvage value, and
    - any late charges or penalties added after the loan was made;
  - D. The maximum liability shown in the Eligible Collateral Endorsement.

If you have repossessed the Insured Collateral, and there is damage caused by more than one collision loss, each loss shall be deemed a separate loss, and no loss of less than \$100 is covered beyond the first or largest loss.

The amount of each Borrower claim will be reduced by the deductible shown on the Declarations. If there is damage to the collateral caused by more than one occurrence, the deductible will apply to each occurrence.

If a loss occurs outside the United States and if the cost to repair or replace the Insured Collateral is greater outside the United States than it is where you are located, our liability shall be increased up to 10% over the cost to repair or replace the Insured Collateral in the city where you are located.

If two or more pieces of Insured Collateral secure the same loan, or if there is other collateral on the loan in addition to the Insured Collateral, we will not pay more than a proportionate share of the total unpaid balance that each item represents to the total loan.

**[This endorsement applies only to leases and loans with a Balloon Payment.]**

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, conditions, or limitations of the Policy to which this endorsement is attached other than as stated above.

This endorsement is attached to and forms a part of:

Policy Number \_\_\_\_\_ and is subject to all the terms and conditions of the Policy not inconsistent hereto.

Issued to \_\_\_\_\_.

By: **SECURIAN CASUALTY COMPANY**

Effective Date of this Endorsement \_\_\_\_\_ Endorsement Number \_\_\_\_\_

\_\_\_\_\_  
Countersigned at \_\_\_\_\_ Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_

# SECURIAN CASUALTY COMPANY

## SKIP AND CONFISCATION COVERAGE ENDORSEMENT

The Policy to which this endorsement is attached is hereby amended as follows:

**COVERAGE:** We will provide coverage for any direct loss sustained by you due to skip or confiscation involving the Insured Collateral described on an Individual Notice of Insurance.

**DEFINITIONS:**

SKIP means the Borrower has defaulted in his obligation to you and you can locate neither the Borrower, the co-maker, nor the Insured Collateral. The inability to locate the Insured Collateral is not by itself a loss under this endorsement.

CONFISCATION means when a government body or official lawfully obtains possession of the Insured Collateral.

**CONDITIONS PRECEDENT TO LIABILITY:** The conditions precedent to the attaching our liability for any loss or damage under this endorsement are:

1. That you have an interest in the Insured Collateral by virtue of a legally enforceable instrument and the Insured Collateral was delivered to a bona fide retail purchaser.
2. That the borrower has defaulted in his obligation to you.
3. That you have made all reasonable efforts to locate and repossess the Insured Collateral, including all legal means available, as evidenced by supporting documentation.
4. That you have made all reasonable efforts to locate and collect from any co-maker on the loan.
5. That you have located and made all reasonable efforts to reclaim the Insured Collateral from the governmental body or official, if it has been legally confiscated.
6. That for a skip loss you have reported the Borrower's loan status to a credit reporting bureau as a "skip" or "charge-off".

**DATE OF LOSS:** Date of loss shall be the date we receive notice that all conditions precedent to liability have been met.

**INVESTIGATION:** For any loss caused by skip, we shall have sixty (60) days from the date of loss to investigate the claim and attempt to locate either the Insured Collateral, the Borrower, or the co-maker. If we locate the Insured Collateral, the Borrower or the co-maker and notify you of its/their location, we have no further liability for coverage provided by this endorsement.

**OUR MAXIMUM LIABILITY-SETTLEMENT OPTIONS:** The amount we will pay will not exceed the least of:

1. The value of the Insured Collateral as of the date of loss as determined by averaging the wholesale and retail values shown in vehicle pricing guide commonly in use by lenders in the state in which the loan is made, or
2. Your unpaid loan balance as of the date of loss, less;
  - any payments more than 120 days past due; and
  - any unearned interest, finance charges and unearned Insurance charges; and
  - any late charges or penalties added after the loan was made.

**ADDITIONAL CONDITIONS:**

1. You must give us clear title to the collateral when payment for loss under this endorsement is made by us to you.
2. For any loss caused by confiscation there will be a waiting period of sixty (60) days from the date of loss prior to the settlement of the loss by us.

**ADDITIONAL EXCLUSIONS:** We will not pay for losses:

1. to collateral on loans more than one hundred twenty (120) days past due as of the effective date of this endorsement.
2. where the collateral can be reclaimed by you from a governmental body or official by paying any fines or fees which may have been levied.

**PREMIUM RATE:** \$2.25 per Certificate in force per calendar quarter, commencing with the inception date of this endorsement.

**TERMINATION:** COVERAGE UNDER THIS ENDORSEMENT IS TERMINATED CONCURRENT WITH THE TERMINATION OF THE POLICY TO WHICH IT IS ATTACHED.

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, conditions, or limitations of the Policy to which this endorsement is attached other than as stated above.

This endorsement is attached to and forms a part of:

Policy Number \_\_\_\_\_ and is subject to all the terms and conditions of the Policy not inconsistent hereto.

Issued to \_\_\_\_\_.

By: **SECURIAN CASUALTY COMPANY**

Effective Date of this Endorsement \_\_\_\_\_ Endorsement Number \_\_\_\_\_

\_\_\_\_\_  
Countersigned at

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

# SECURIAN CASUALTY COMPANY

## MAXIMUM LIABILITY – SETTLEMENT OPTIONS OPTION B

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**Insuring Agreement 6.** Our Maximum Liability, Settlement Options is deleted in its entirety and replaced as follows:

- 6. OUR MAXIMUM LIABILITY, SETTLEMENT OPTIONS** – The amount we will pay will not exceed the least of:
- A. The cost to repair the collateral;
  - B. The actual cash value of the collateral as of the date you report the loss to us, less salvage value;
  - C. Your unpaid loan balance as of the date you report the loss to us, less:
    - any payments more than one hundred-twenty (12) days past due, and
    - unearned interest and finance charges and unearned insurance charges, and
    - net salvage value, and
    - any late charges or penalties added after the loan was made;
  - D. The maximum liability shown in the Eligible Collateral Endorsement.

Your interest shall be impaired when the value of the Insured Collateral at the time of and because of loss is reduced to an amount less than your interest therein.

Settlement Option B above will not apply provided the amount you loaned on the Insured Collateral did not exceed 120% of purchase price on new cars or 120% of retail value on used cars, as determined by vehicle pricing guide commonly in use by lenders in the state in which the loan is made, plus tax and license.

The amount of each Borrower claim will be reduced by the deductible shown on the Declarations. If there is damage to the collateral caused by more than one occurrence, the deductible will apply to each occurrence.

If a loss occurs outside the United States and if the cost to repair or replace the Insured Collateral is greater outside the United States than it is where you are located, our liability shall be increased up to 10% over the cost to repair or replace the Insured Collateral in the city where you are located.

If two or more pieces of Insured Collateral secure the same loan, or if there is other collateral on the loan in addition to the Insured Collateral, we will not pay more than a proportionate share of the total unpaid balance that each item represents to the total loan.

**[This endorsement applies only to leases and loans with a Balloon Payment.]**

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, conditions, or limitations of the Policy to which this endorsement is attached other than as stated above.

This endorsement is attached to and forms a part of:

Policy Number \_\_\_\_\_ and is subject to all the terms and conditions of the Policy not inconsistent hereto.

Issued to \_\_\_\_\_.

By: **SECURIAN CASUALTY COMPANY**

Effective Date of this Endorsement \_\_\_\_\_ Endorsement Number \_\_\_\_\_

\_\_\_\_\_  
Countersigned at

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

# SECURIAN CASUALTY COMPANY

## OPTIONAL PRO-RATA CANCELLATION METHOD

Insuring Agreement 2—Premium Refunds is deleted in its entirety and replaced as follows:

If a notice of insurance has been in effect 30 days or less and no claim has been reported, the entire premium will be refunded.

If a notice of insurance has been in effect more than 30 days or if a claim has been reported, the premium will be refunded pro-rata.

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, conditions, or limitations of the Policy to which this endorsement is attached other than as stated above.

This endorsement is attached to and forms a part of:

Policy Number \_\_\_\_\_ and is subject to all the terms and conditions of the Policy not inconsistent hereto.

Issued to \_\_\_\_\_.

By: **SECURIAN CASUALTY COMPANY**

Effective Date of this Endorsement \_\_\_\_\_ Endorsement Number \_\_\_\_\_

\_\_\_\_\_  
Countersigned at

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

*SERFF Tracking Number:*      *CHER-125587007*

*State:*      *Arkansas*

*Filing Company:*      *Securian Casualty Company*

*State Tracking Number:*      *#1198 \$50*

*Company Tracking Number:*      *CPI-END*

*TOI:*      *28.0 Credit*

*Sub-TOI:*      *28.0002 Creditor-Placed Auto*

*Product Name:*      *CPI Endorsements*

*Project Name/Number:*      */*

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: CHER-125587007 State: Arkansas  
Filing Company: Securian Casualty Company State Tracking Number: #1198 \$50  
Company Tracking Number: CPI-END  
TOI: 28.0 Credit Sub-TOI: 28.0002 Creditor-Placed Auto  
Product Name: CPI Endorsements  
Project Name/Number: /

## Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Approved	Rates		New	Arkansas Rates updated 042308.pdf

## Arkansas Collateral Protection Policy Coverage Information

<b>Approved Coverages</b>	<p>Refund Method = Standard LSI, Pro-Rata Repos</p> <p>A. If coverage is canceled at Company request, the refund will be computed on a pro-rata basis.</p> <p>B. All other cancellations will be as outlined in one of the following:</p> <ol style="list-style-type: none"> <li>1. as outlined in Insuring Agreement 2 of the policy utilizing the refund table attached hereto; or</li> <li>2. an optional 45-day flat cancellation utilizing (1) above; or</li> <li>3. Optional Cancellation Method (pro-rata) endorsement; or</li> <li>4. Optional daily pro-rata endorsement</li> </ol> <p>IF (2) is selected, a .25% (1/4 of 1%) surcharge of base rate applies  IF (3) is selected, a 10% surcharge of base rate applies  IF (4) is selected, a 9% surcharge of base rate applies</p>																																						
<b>Base Rate w/Min &amp; Max Deviations</b>	Base Rate = 16% with minimum and maximum deviations of 25%																																						
<b>Deductible Options &amp; Deviations</b>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 35%;">Borrower Claim</th> <th style="width: 35%;">Repo Claim</th> <th style="width: 25%;">Deviations</th> </tr> </thead> <tbody> <tr> <td>A.</td> <td>\$200</td> <td>0</td> <td>Basic</td> </tr> <tr> <td>B.</td> <td>\$200</td> <td>\$200</td> <td>-04%</td> </tr> <tr> <td>C.</td> <td>\$500</td> <td>0</td> <td>-09%</td> </tr> <tr> <td>D.</td> <td>\$500</td> <td>\$200</td> <td>-12%</td> </tr> <tr> <td>E.</td> <td>\$500</td> <td>\$500</td> <td>-15%</td> </tr> <tr> <td>F.</td> <td>\$1000</td> <td>0</td> <td>-19%</td> </tr> <tr> <td>G.</td> <td>\$1000</td> <td>\$500</td> <td>-26%</td> </tr> </tbody> </table>		Borrower Claim	Repo Claim	Deviations	A.	\$200	0	Basic	B.	\$200	\$200	-04%	C.	\$500	0	-09%	D.	\$500	\$200	-12%	E.	\$500	\$500	-15%	F.	\$1000	0	-19%	G.	\$1000	\$500	-26%						
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G.	\$1000	\$500	-26%																																				
<b>Credits for Collateral Type</b>	<p>A. 50% premium credit for non-commercial boats.</p> <p>B. 75% premium credit for recreational vehicles (including motor homes), mobile homes, travel trailers and unlicensed machinery.</p>																																						
<b>Lender Pay Approved</b>	<p>Yes – Optional Coverages – Lender Paid are:</p> <p>PREMIUM CHARGED PER \$1000 OF OUTSTANDING ELIGIBLE LOANS PER QUARTER</p> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 70%;">A. Instrument Non-Filing – Blanket</td> <td style="text-align: right;">\$.002</td> </tr> <tr> <td>B. Repossessed Collateral Coverage – Blanket</td> <td style="text-align: right;">\$.004</td> </tr> </tbody> </table> <p>PREMIUM CHARGED PER CERT INFORCE, PER QUARTER</p> <p><b>C. Repossession Expense Reimbursement – with or without loss - Notice Required</b></p> <ol style="list-style-type: none"> <li>1. \$750 Mechanic's Lien &amp; \$500 other Expenses \$0.375</li> <li>2. \$2000 Mechanic's Lien &amp; \$1000 other Expenses \$0.44</li> </ol> <p><b>D. Premium Deficiency with 55% permissible loss ratio</b> \$0.38  <b>Premium Deficiency with 60% permissible loss ratio</b> \$0.50  <b>Premium Deficiency with 65% permissible loss ratio</b> \$0.53</p> <p><b>E. Conversion, Secretion and Confiscation Coverage – Notice Required</b></p> <ol style="list-style-type: none"> <li>1. Basic Base Rate \$3.00</li> <li>2. Broad Form Base Rate \$4.50</li> </ol> <p><b>Options – basic or broad form</b></p> <ul style="list-style-type: none"> <li>• <b>Deductibles</b> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>\$ 0</td><td>Base</td></tr> <tr><td>\$500</td><td>-3%</td></tr> <tr><td>\$1,000</td><td>-5%</td></tr> <tr><td>\$1,500</td><td>-8%</td></tr> <tr><td>\$2,000</td><td>-11%</td></tr> <tr><td>\$2,500</td><td>-13%</td></tr> </tbody> </table> </li> <li>• <b>Number of days Securian Casualty Company has to investigate and locate vehicle.</b> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>60 days</td><td>Base</td></tr> <tr><td>90 days</td><td>-5%</td></tr> <tr><td>120 days</td><td>-10%</td></tr> </tbody> </table> </li> <li>• <b>Maximum Liability – Payments overdue beyond the period will not be covered.</b> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>120 days</td><td>Base</td></tr> <tr><td>150 days</td><td>+4%</td></tr> </tbody> </table> </li> <li>• <b>Number of days after delinquency within which claims must be reported.</b> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>90 days</td><td>Base</td></tr> <tr><td>120 days</td><td>+5%</td></tr> <tr><td>150 days</td><td>+8%</td></tr> </tbody> </table> </li> <li>• <b>For Confiscation losses, waiting period prior to settlement.</b> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>60 days</td><td>Base</td></tr> <tr><td>90 days</td><td>-0.5%</td></tr> <tr><td>120 days</td><td>-1.0%</td></tr> </tbody> </table> </li> </ul> <p><b>F. Skip and Confiscation Coverage Endorsement</b> \$2.25</p>	A. Instrument Non-Filing – Blanket	\$.002	B. Repossessed Collateral Coverage – Blanket	\$.004	\$ 0	Base	\$500	-3%	\$1,000	-5%	\$1,500	-8%	\$2,000	-11%	\$2,500	-13%	60 days	Base	90 days	-5%	120 days	-10%	120 days	Base	150 days	+4%	90 days	Base	120 days	+5%	150 days	+8%	60 days	Base	90 days	-0.5%	120 days	-1.0%
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120 days	-1.0%																																						
<b>ACV Settlement</b>	Settlement options may be amended to include actual cash value at a 5% credit. If ACV is selected, use form 06-50453.																																						

**Standard LSI Refund Table**

Day	Refund Percentage
0-30	100%
31-48	82%
49-63	76%
64-79	70%
80-94	64%
95-110	58%
111-127	52%
128-144	46%
145-160	43%
161-175	36%
176-183	34%
184-199	28%
200-224	24%
225-237	21%
238-250	18%
251-264	15%
265-278	12%
279-294	9%
295-316	7%
317-349	3%
350-365	0%

SERFF Tracking Number: CHER-125587007

State: Arkansas

Filing Company: Securian Casualty Company

State Tracking Number: #1198 \$50

Company Tracking Number: CPI-END

TOI: 28.0 Credit

Sub-TOI: 28.0002 Creditor-Placed Auto

Product Name: CPI Endorsements

Project Name/Number: /

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-  
Property & Casualty

**Review Status:**

Approved

05/07/2008

**Comments:**

**Attachment:**

AR CPI endorsements Transmittal.pdf

**Satisfied -Name:** Cover Letter

**Review Status:**

Approved

05/07/2008

**Comments:**

**Attachment:**

AR Endorsements Cover Letter.pdf

## Property &amp; Casualty Transmittal Document (Revised 1/1/06)

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

<b>3.</b>	<b>Group Name</b>	<b>Group NAIC #</b>		
	Minnesota Mutual Group	0869		
<b>4.</b>	<b>Company Name(s)</b>	<b>Domicile</b>	<b>NAIC #</b>	<b>FEIN #</b>
	Securian Casualty Company	Minnesota	10054	41-1741988

<b>5.</b>	<b>Company Tracking Number</b>	CPI-AR-END
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

<b>6.</b>	<b>Name and address</b>	<b>Title</b>	<b>Telephone #s</b>	<b>FAX #</b>	<b>e-mail</b>
	Laura Jones	VP Agency	(478) 314-3159 (800) 333-0404	(478) 757-1568	Laura.jones@cnlf.com
<b>7.</b>	Signature of authorized filer				
<b>8.</b>	Please print name of authorized filer		Laura Jones		

**Filing information** (see General Instructions for descriptions of these fields)

<b>9.</b>	<b>Type of Insurance (TOI)</b>	28 Credit
<b>10.</b>	<b>Sub-Type of Insurance (Sub-TOI)</b>	28.2002 Creditor Placed Auto
<b>11.</b>	<b>State Specific Product code(s)(if applicable)[See State Specific Requirements]</b>	N/A
<b>12.</b>	<b>Company Program Title (Marketing title)</b>	CPI
<b>13.</b>	<b>Filing Type</b>	<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)
<b>14.</b>	<b>Effective Date(s) Requested</b>	New: 6/1/2008      Renewal:
<b>15.</b>	<b>Reference Filing?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>16.</b>	<b>Reference Organization (if applicable)</b>	N/A
<b>17.</b>	<b>Reference Organization # &amp; Title</b>	N/A
<b>18.</b>	<b>Company's Date of Filing</b>	04/23/2008
<b>19.</b>	<b>Status of filing in domicile</b>	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

## Property & Casualty Transmittal Document—

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	CPI-AR-END
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<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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These forms are being filed to be used with our Collateral Protection Insurance product, which was approved by the State of Arkansas on 08/28/2007. The SERFF tracking number for that filing is CHER-125273609

These forms are being filed so that our product will more closely mirror that of Balboa Insurance Group's Collateral Protection Insurance. Our CPI product is intended to be a "me-too" of Balboa's product. The above endorsements will have no premium impact except for form 08-50502. The rate for this endorsement is \$2.25 per certificate in force per quarter. A separate rate filing showing an updated rate sheet including this coverage will be filed via SERFF.

If you need additional information, please contact Matt Rushing who is the Analyst for this filing project. Matt may be contacted by email at [matt.rushing@cnlf.com](mailto:matt.rushing@cnlf.com); by fax at 651-665-7364; or by telephone at 478-314-3197.

**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]

**Check #:**  
**Amount:**

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

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

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## 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.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	CPI-AR-END			
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> <small>(Company tracking number of rate/rule filing, if applicable)</small>	CPI-AR-END			
<b>3.</b>	<b>Form Name /Description/Synopsis</b>	<b>Form # Include edition date</b>	<b>Replacement Or withdrawn?</b>	<b>If replacement, give form # it replaces</b>	<b>Previous state filing number, if required by state</b>
01	Waiver of ACV Settlement Option Endorsement	08-50500	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	ACV Settlement Option Coverage Endorsement	08-50501	New		
03	Skip and Confiscation Coverage Endorsement	08-50502	New		
04	120% ACV Settlement Endorsement	08-50509	New		
05	Pro Rata Premium Refund Endorsement	08-50510	New		

PC FFS-1

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April 23, 2008

Arkansas Insurance Department  
1200 West Third St.  
Little Rock, AR 72201

Attention: Property and Casualty Division

Re: **Collateral Protection Insurance – Coverage Endorsements**  
Filing Identification Number: CPI-AR-Endorsements

Form Number	Form Description
07-50488	Declarations Page
08-50500	Waiver of ACV Settlement Option Endorsement
08-50501	ACV Settlement Option Endorsement
08-50502	Skip and Confiscation Coverage Endorsement
05-50509	120% ACV Settlement Endorsement
08-50510	Pro Rata Premium Refund Endorsement

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Sincerely,

  
Terry A. McClellan  
Vice President