

SERFF Tracking Number: GRTA-125624405 State: Arkansas
 First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$100
 Company Tracking Number: IM-AR-0804-MTCF
 TOI: 09.0 Inland Marine Sub-TOI: 09.0005 Other Commercial Inland Marine
 Product Name: IM-AR-0804-MTCF
 Project Name/Number: IM-AR-0804-MTCF/IM-AR-0804-MTCF

Filing at a Glance

Companies: Great American Alliance Insurance Company, Great American Assurance Company, Great American Insurance Company, Great American Insurance Company of New York

Product Name: IM-AR-0804-MTCF	SERFF Tr Num: GRTA-125624405	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$100
Sub-TOI: 09.0005 Other Commercial Inland Marine	Co Tr Num: IM-AR-0804-MTCF	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Christie Mayes	Disposition Date: 05/01/2008
	Date Submitted: 04/25/2008	Disposition Status: Approved
Effective Date Requested (New): 06/01/2008		Effective Date (New): 06/01/2008
Effective Date Requested (Renewal): 06/01/2008		Effective Date (Renewal): 06/01/2008

State Filing Description:

General Information

Project Name: IM-AR-0804-MTCF	Status of Filing in Domicile:
Project Number: IM-AR-0804-MTCF	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 05/01/2008	
State Status Changed: 05/01/2008	Deemer Date:
Corresponding Filing Tracking Number: IM-AR-0804-MTCF	
Filing Description:	
Introducing CM 8105 04/08 - Locked Vehicle - Restricted Theft Coverage Endorsement and CM 8112 01/08 - Automobile Carriers Endorsement to be used with our Motor Truck Cargo Program. The Locked Vehicle - Restricted Theft Coverage Endorsement has been revised to include a clarification phrase that the endorsement only applies to cargo in a "fully enclosed" vehicle. The Automobile Carriers Endorsement has been revised to remove the Valuation Condition. We are reverting to the "standard" valuation contained in the Motor Truck Cargo Coverage form (CM 7677)	

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and the Commercial Inland Marine General Conditions, paragraph f. (CM 0001).

Company and Contact

Filing Contact Information

Christie Mayes, Sr. Product Analyst cmayes@gaic.com
 49 E Fourth St. Dts-4 (513) 412-3963 [Phone]
 Cincinnati, OH 45202

Filing Company Information

Great American Alliance Insurance Company	CoCode: 26832	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 95-1542353	

Great American Assurance Company	CoCode: 26344	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 15-6020948	

Great American Insurance Company	CoCode: 16691	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 31-0501234	

Great American Insurance Company of New York	CoCode: 22136	State of Domicile: New York
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 13-5539046	

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00

SERFF Tracking Number: GRTA-125624405 *State:* Arkansas
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Retaliatory? No
Fee Explanation: \$50.00 per form for Arkansas.
Per Company: No

SERFF Tracking Number: GRTA-125624405 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	05/01/2008	05/01/2008

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Disposition

Disposition Date: 05/01/2008
Effective Date (New): 06/01/2008
Effective Date (Renewal): 06/01/2008
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

SERFF Tracking Number: GRTA-125624405 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
Supporting Document	Explanatory Memorandum	Approved	Yes
Supporting Document	Supporting Doc	Approved	Yes
Form	Locked Vehicle - Restricted Theft Coverage Endorsement	Approved	Yes
Form	Automobile Carriers Endorsement	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Locked Vehicle - Restricted Theft Coverage Endorsement	CM 8105	04/08	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 CM 8105 Previous Filing #:		CM 8105.pdf
Approved	Automobile Carriers Endorsement	CM 8112	01/08	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 CM 8112 Previous Filing #:		CM 8112.pdf



Administrative Offices
580 Walnut Street
Cincinnati, Ohio 45202
Tel: 1-513-369-5000

CM 81 05
(Ed. 04 08)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LOCKED VEHICLE - RESTRICTED THEFT COVERAGE ENDORSEMENT

This endorsement modifies coverage provided under the following:

COMMERCIAL INLAND MARINE COVERAGE PART

Theft coverage for cargo in a fully enclosed vehicle applies to a locked or "attended" vehicle (only).

We will not pay for "loss" caused by theft of Covered Property from a fully enclosed vehicle that you own or operate which is not "attended," unless:

1. at the time of "loss" the doors, windows and compartments of the vehicle(s) were closed and locked; and
2. there are visible signs on the exterior of the vehicle that the theft was a result of forced entry.

"Attended" means:

1. someone is in or on a vehicle attached to the carrying conveyance, or in or on the carrying conveyance, whose sole duty is to safeguard the Covered Property; or

2. the conveyance is located in a fully fenced yard with:

- a. gates that are locked, unless a guard is present at the gate; and
- b. at least one guard, whose duties are to control access to the yard, protect cargo and protect the carrying conveyance(s); or

3. the conveyance is in a fully enclosed, locked building and the building is protected by a central station burglar alarm system or a watchman/guard whose sole duty is to protect the premises and the building contents.

All other terms remain unchanged.



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AUTOMOBILE CARRIERS ENDORSEMENT

This endorsement modifies coverage provided under the following:

MOTOR TRUCK CARGO COVERAGE FORM (Carriers' Liability)

I. Section A. Coverage paragraph 1. Covered Property the first sentence is amended to read as follows:

Covered Property means property of others, principally motor vehicles, that you have accepted for transportation as a motor carrier under your tariff and bill of lading, or shipping receipt issued by you, or under written contract.

II. Section C. Limits of Insurance is amended by adding the following:

The most we will pay for "loss" to any one motor vehicle is \$ _____.

III. Section D. Deductible is amended by adding the following:

The deductible amount per motor vehicle is \$ _____, but the total deductible amount will not exceed \$ _____ in any one "loss" occurrence that involves more than one motor vehicle.

IV. Section F. Definitions

The definition of "Loading" is amended to include the following:

Also, "Loading" means motor vehicles being operated under their own power, within a one half mile radius of the transporting conveyance, solely for the purpose of being placed on the transporting conveyance.

The definition of "Unloading" is amended to include the following:

Also, "Unloading" means motor vehicles being operated under their own power, within a one half mile radius of the transporting conveyance, solely for the purpose of delivery from the transporting conveyance.

All other terms remain unchanged.

SERFF Tracking Number: *GRTA-125624405* *State:* *Arkansas*
First Filing Company: *Great American Alliance Insurance Company, ...* *State Tracking Number:* *EFT \$100*
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Product Name: *IM-AR-0804-MTCF*
Project Name/Number: *IM-AR-0804-MTCF/IM-AR-0804-MTCF*

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 05/01/2008

Comments:

Attachment:

ar pctd1.pdf

Satisfied -Name: Cover Letter
Review Status: Approved 05/01/2008

Comments:

Attachment:

cover letter ar.pdf

Satisfied -Name: Explanatory Memorandum
Review Status: Approved 05/01/2008

Comments:

Attachment:

EXPLANATORY MEMORANDUM.pdf

Satisfied -Name: Supporting Doc
Review Status: Approved 05/01/2008

Comments:

Attachment:

AR pcffs1.pdf

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: New Business Renewal Business f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #
Great American Insurance Group	084

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Great American Insurance Company	Ohio	16691	31-0501234	
Great American Insurance Company of NY	New York	22136	13-5539046	
Great American Assurance Company	Ohio	26344	15-6020948	
Great American Alliance Ins Company	Ohio	26832	95-1542353	

5. Company Tracking Number	IM-AR-0804-MTCF
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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
	Christie Mayes, AFIS 49 E 4 th St. Suite DN6 Cincinnati, OH 45202	Sr. Product Analyst	513-412-3963	513-333-6996	cmayes@gaic.com

7. Signature of authorized filer	<i>Christie Mayes IDW</i>
8. Please print name of authorized filer	Christie Mayes

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

9.	Type of Insurance (TOI)	Inland Marine 9.0000
10.	Sub-Type of Insurance (Sub-TOI)	Other Commercial Inland Marine 9.0005
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	Motor Truck Cargo
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: 06/01/2008 Renewal: 06/01/2008

Property & Casualty Transmittal Document---

15.	Reference Filing?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)		
17.	Reference Organization # & Title		
18.	Company's Date of Filing	04/25/2008	
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

20.	This filing transmittal is part of Company Tracking #	IM-AR-0804-MTCF
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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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Introducing CM 8105 04/08 - Locked Vehicle - Restricted Theft Coverage Endorsement and CM 8112 01/08 - Automobile Carriers Endorsement to be used with our Motor Truck Cargo Program. The Locked Vehicle - Restricted Theft Coverage Endorsement has been revised to include a clarification phrase that the endorsement only applies to cargo in a "fully enclosed" vehicle. The Automobile Carriers Endorsement has been revised to remove the Valuation Condition. We are reverting to the "standard" valuation contained in the Motor Truck Cargo Coverage form (CM 7677) and the Commercial Inland Marine General Conditions, paragraph f. (CM 0001).

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]
<p>Check #: EFT Amount: 50.00</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

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

Specialty Operations
49 East Fourth Street
Dixie Terminal South Building
4th Floor
Cincinnati, OH 45202-3803
PO Box 5425
Cincinnati, OH 45201-5425
513.287.8100 ph
513.333.6996 fax



April 25, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

RE:	Great American Insurance Company	084-16691	31-0501234
	Great American Alliance Insurance Company	084-26832	95-1542353
	Great American Assurance Company	084-26344	15-6020948
	Great American Insurance Company of New York	084-22136	13-5539046
	Inland Marine – Motor Truck Cargo Form		
	Company File # <u>IM-AR-0804-MTCF</u>		

To Whom It May Concern:

The Great American Insurance Group, consisting of the aforementioned companies, hereby submits for your approval the enclosed revised form filing to be used with our Motor Truck Cargo Program. Please see the explanatory memorandum for additional details.

Please find enclosed, for review, the following:

1. An Explanatory Memorandum.
2. Copies of the Form Pages.
3. Any Appropriate State Transmittals.

We propose that this filing be applicable to all policies written on or after June 1, 2008. Please return the duplicate of this letter to acknowledge approval and confirm your action. A self-addressed, stamped envelope is enclosed for your convenience.

Sincerely,
Christie M. Mayes

Christie M. Mayes, AFIS
Sr. Product Analyst
Phone: (513) 412-3963
Fax: (513) 333-6996
Email: cmayes@gaic.com

EXPLANATORY MEMORANDUM

MOTOR TRUCK CARGO

The purpose of this filing is to submit revised forms used with our Motor Truck Cargo (Carrier's Liability) Program.

CM 8105 (Ed. 04/08) – Locked Vehicle – Restricted Theft Coverage Endorsement – this endorsement has been revised to include a clarification phrase that the endorsement only applies to cargo in a “fully enclosed” vehicle.

CM 8112 (Ed. 01/08) – Automobile Carriers Endorsement – this endorsement has been revised to remove the Valuation Condition. We are reverting to the “standard’ valuation contained in the Motor Truck Cargo Coverage form (CM 7677) and the Commercial Inland Marine General Conditions, paragraph f. (CM 0001).

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 #	IM-AR-0804-MTCF			
2.	This filing corresponds to rate/rule filing number <small>(Company tracking number of rate/rule filing, if applicable)</small>				
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	Restricted Theft Coverage Endorsement	CM 8105 Ed. 04/08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	CM 8105 Ed. 04/05	
02	Automobile Carriers Endorsement	CM 8112 Ed. 01/08	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	CM 8112 Ed. 07/04	
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		