

SERFF Tracking Number: MEAD-125622845 State: Arkansas  
Filing Company: Star Insurance Company State Tracking Number: EFT \$50  
Company Tracking Number: STAR-AR-CHEMPLAN-FUNGI-0508  
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package  
Liability  
Product Name: Star-CW-Chemplan-Fungi-0508  
Project Name/Number: Star-CW-Chemplan-Fungi-0508/Star-CW-Chemplan-Fungi-0508

## Filing at a Glance

Company: Star Insurance Company

Product Name: Star-CW-Chemplan-Fungi-0508 SERFF Tr Num: MEAD-125622845 State: Arkansas

TOI: 05.0 Commercial Multi-Peril - Liability & Non-Liability SERFF Status: Closed State Tr Num: EFT \$50

Sub-TOI: 05.0003 Commercial Package

Co Tr Num: STAR-AR-CHEMPLAN-FUNGI-0508

State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding

Author: Louis Sugarman

Disposition Date: 05/01/2008

Date Submitted: 04/28/2008

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: Star-CW-Chemplan-Fungi-0508

Status of Filing in Domicile: Authorized

Project Number: Star-CW-Chemplan-Fungi-0508

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:

Filing Description:

Dear Sir or Madam:

Star Insurance Company (Star) writes commercial lines of insurance in your state, Star is a member of the Insurance Services Office (ISO), and Star has authorized ISO to file rules and forms on our behalf in your state. We write our

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Chemplan program in your state using an array of ISO, AAIS, and independent rates, forms, and endorsements.

We apply to add an independent endorsement 4739 GL 0208 - Fungi or Bacteria Exclusion - Products Exception Chemplan Program. This endorsement is based on ISO's CG 2167 1204 - Fungi or Bacteria Exclusion, except that Paragraph D's exception to the exclusion has the effect of broadening coverage to "your product." This coverage was anticipated in setting overall rates for this program; this independent endorsement serves to clarify this coverage, and it has no effect on the rates we will charge any insureds.

An accompanying rule in the revised manual pages simply indicates that this is a mandatory endorsement with any general liability coverage. Rates and rules are exempt from filing in Arkansas, so these revised manual pages are desk-filed for record keeping purposes.

This form is submitted on a prior approval basis. We apply to implement this form and desk-filed manual pages effective 06/01/08 or as soon as practical following your approval of this form filing. Enclosed please find filing documentation for your review.

Thank you for your consideration,

Louis Sugarman  
Senior Compliance Analyst  
Star Insurance Company  
248-204-8228

## Company and Contact

### Filing Contact Information

Louis Sugarman, Sr. Compliance Analyst      lsugarman@meadowbrook.om  
26255 American Drive      (248) 204-8228 [Phone]  
Southfield, MI 48034      (248) 358-1614[FAX]

### Filing Company Information

Star Insurance Company      CoCode: 18023      State of Domicile: Michigan

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26255 American Drive  
Southfield, MI 48034  
(248) 358-1100 ext. [Phone]

Group Code: 748  
Group Name: Meadowbrook  
FEIN Number: 38-2626205  
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Company Type: property and  
casualty  
State ID Number:

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## Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Star Insurance Company	\$50.00	04/28/2008	19940963

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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.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	Fungi or Bacteria Exclusion - Products Exception Chemplan Program	Approved	Yes

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## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Fungi or Bacteria Exclusion - Products Exception Chemplan Program	4739 GL	0208	Endorsement/Amendment/Conditions	New	20.70	4739 GL 0208 Fungi Exclusion - Chemplan.pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## FUNGI OR BACTERIA EXCLUSION – PRODUCTS EXCEPTION CHEMPLAN PROGRAM

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

**A. The following exclusion is added to Paragraph 2. Exclusions of Section – Coverage A – Bodily Injury and Property Damage Liability:**

**2. Exclusions**

This insurance does not apply to:

Fungi or Bacteria

- a. "Bodily injury" or "property damage" which would not have occurred, in whole or in part, but for the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, or presence of, any "fungi" or bacteria on or within a building or structure, including its contents, regardless of whether any other cause, event, material or product contributed concurrently or in any sequence to such injury or damage.
- b. Any loss, cost or expenses arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of, "fungi" or bacteria, by any insured or by any other person or entity.

This exclusion does not apply to any "fungi" or bacteria that are, are on, or are contained in, a good or product intended for bodily consumption.

**B. The following exclusion is added to Paragraph 2. Exclusions of Section I – Coverage B – Personal and Advertising Injury Liability:**

**2. Exclusions**

This insurance does not apply to:

Fungi or Bacteria

- a. "Personal and advertising injury" which would not have taken place, in whole or in part, but for the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, or presence of any "fungi" or bacteria on or within a building or structure, including its contents, regardless of whether any other cause, event, material or product contributed concurrently or in any sequence to such injury.
- b. Any loss, cost or expenses arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of, "fungi" or bacteria, by any insured or by any other person or entity.

**C. The following definition is added to the Definitions Section:**

"Fungi" means any type or form of fungus, including mold or mildew and any mycotoxins, spores, scents or byproducts produced or released by fungi.

**D. This exclusion does not apply to "your product" in conjunction with the "Products-completed operations hazard" provided the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, or presence of any "fungi" or bacteria originates away from any premises, site, or location which is or was at any time owned or occupied by, or rented or loaned to any insured, or was a work site.**

All other policy terms, conditions, definitions and exclusions remain unchanged.

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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 05/01/2008

**Comments:**

**Attachments:**

NAIC Transmittal.pdf  
Form Filing Schedule.pdf



20. This filing transmittal is part of Company Tracking # Star-AR-Chemplan-CMP-0508

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

Star Insurance Company (Star) writes commercial lines of insurance in your state, Star is a member of the Insurance Services Office (ISO), and Star has authorized ISO to file rules and forms on our behalf in your state. We write our Chemplan program in your state using an array of ISO, AAIS, and independent rates, forms, and endorsements.

We apply to add an independent endorsement 4739 GL 0208 - Fungi or Bacteria Exclusion - Products Exception Chemplan Program. This endorsement is based on ISO's CG 2167 1204 - Fungi or Bacteria Exclusion, except that Paragraph D's exception to the exclusion has the effect of broadening coverage to "your product." This coverage was anticipated in setting overall rates for this program; this independent endorsement serves to clarify this coverage, and it has no effect on the rates we will charge any insureds.

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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 #: EFT  
Amount: 50.00

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. This filing transmittal is part of Company Tracking #</b>	Star-AR-Chemplan-CMP-0508
Serff MEAD-125622845	

<b>2. This filing corresponds to rate/rule filing number</b> (Company tracking number of rate/rule filing, if applicable)	
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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	Fungi or Bacteria Exclusion - Products Exception Chemplan Program	4739 GL 0208	<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		
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		
12			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
13			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
14			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		