

SERFF Tracking Number: ARMD-125207353 State: Arkansas
Filing Company: Armed Forces Insurance Exchange State Tracking Number: #139437 \$50
Company Tracking Number: AR-HO-4I-07-3
TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
Product Name: Homeowner
Project Name/Number: Arkansas Identity Fraud; Restricting Endorsement/AR-HO-4I-07-3

Filing at a Glance

Company: Armed Forces Insurance Exchange

Product Name: Homeowner

TOI: 04.0 Homeowners

Sub-TOI: 04.0000 Homeowners Sub-TOI
Combinations

Filing Type: Form

SERFF Tr Num: ARMD-125207353 State: Arkansas

SERFF Status: Closed

Co Tr Num: AR-HO-4I-07-3

Co Status: Proofing in Progress

Authors: Kimberly McMillan, Tama
Brzustowicz

Date Submitted: 06/13/2008

State Tr Num: #139437 \$50

State Status: Fees verified and
received

Reviewer(s): Becky Harrington,
Betty Montesi

Disposition Date: 06/18/2008

Disposition Status: Approved

Effective Date Requested (New): 08/04/2008

Effective Date Requested (Renewal): 09/22/2008

Effective Date (New): 08/04/2008

Effective Date (Renewal):
09/22/2008

State Filing Description:

General Information

Project Name: Arkansas Identity Fraud; Restricting Endorsement

Project Number: AR-HO-4I-07-3

Reference Organization: Insurance Services Office, Inc.

Reference Title: Homeowners 2000 Optional Identity Fraud Expense
Coverage Introduced

Filing Status Changed: 06/18/2008

State Status Changed: 06/18/2008

Corresponding Filing Tracking Number: AR-HO-3I-07-2

Filing Description:

Armed Forces Insurance Exchange is an ISO subscriber. The purpose of this filing, as described in further detail in the PC-TD-1 attached , is to:

Status of Filing in Domicile: Not Filed

Domicile Status Comments:

Reference Number: HO-2002-OIF02

Advisory Org. Circular:

Deemer Date:

1. Introduce a new Identity Fraud Expense Coverage endorsement, HO 04 55 06 06; and

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2. Revise our Restricting Endorsement HO AF 45.

This filing is submitted under the 'Prior Approval' provisions of Arkansas Insurance Laws, § 23-79-109. Unless disapproved, we will deem this filing applicable to all policies written on or after 4 August 2008.

Company and Contact

Filing Contact Information

Kimberly McMillan, Supervisor, Regulatory Compliance
 regcomp@afi.org
 550 Eisenhower Rd
 Leavenworth, KS 66048
 (800) 828-7732 [Phone]
 (800) 664-9320[FAX]

Filing Company Information

Armed Forces Insurance Exchange
 550 Eisenhower Rd
 Leavenworth, KS 66048
 (800) 828-7732 ext. [Phone]

CoCode: 41459
 Group Code:
 Group Name:
 FEIN Number: 48-0933281

State of Domicile: Kansas
 Company Type: P&C
 State ID Number:

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Armed Forces Insurance Exchange	\$0.00	06/13/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
B0000139437	\$50.00	06/13/2008

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Becky Harrington	06/18/2008	06/18/2008

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Disposition

Disposition Date: 06/18/2008

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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	Identity Fraud Expense Coverage	Approved	Yes
Form	Restricting 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	Identity Fraud Expense Coverage	HO 04 55	06 06	Endorsement/Amendment/Conditions	New	0.00	HO 04 55 06 06.pdf
Approved	Restricting Endorsement	HO AF 45	12 06 T	Endorsement/Amendment/Conditions	Replaced Form #: HO AF 45 04 91 Previous Filing #: AR-HO-4I-93-1	0.00	HO AF 45 12 06 T.pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

IDENTITY FRAUD EXPENSE COVERAGE

DEFINITIONS

With respect to the provisions of this endorsement only, the following definitions are added:

1. "Identity fraud" means the act of knowingly transferring or using, without lawful authority, a means of identification of an "insured" with the intent to commit, or to aid or abet another to commit, any unlawful activity that constitutes a violation of federal law or a felony under any applicable state or local law.
2. "Expenses" means:
 - a. Costs for notarizing affidavits or similar documents attesting to fraud required by financial institutions or similar credit grantors or credit agencies.
 - b. Costs for certified mail to law enforcement agencies, credit agencies, financial institutions or similar credit grantors.
 - c. Lost income resulting from time taken off work to complete fraud affidavits, meet with or talk to law enforcement agencies, credit agencies and/or legal counsel, up to a maximum payment of \$200 per day. Total payment for lost income is not to exceed \$5,000.
 - d. Loan application fees for re-applying for a loan or loans when the original application is rejected solely because the lender received incorrect credit information.
 - e. Reasonable attorney fees incurred as a result of "identity fraud" to:
 - (1) Defend lawsuits brought against an "insured" by merchants, financial institutions or their collection agencies;
 - (2) Remove any criminal or civil judgments wrongly entered against an "insured"; and
 - (3) Challenge the accuracy or completeness of any information in a consumer credit report.
 - f. Charges incurred for long distance telephone calls to merchants, law enforcement agencies, financial institutions or similar credit grantors, or credit agencies to report or discuss an actual "identity fraud".

The following Additional Coverage is added under **Section I:**

IDENTITY FRAUD EXPENSE

We will pay up to \$15,000 for "expenses" incurred by an "insured" as the direct result of any one "identity fraud" first discovered or learned of during the policy period.

Any act or series of acts committed by one or more persons, or in which such person or persons are aiding or abetting others against an "insured", is considered to be one "identity fraud", even if a series of acts continues into a subsequent policy period.

This coverage is additional insurance.

EXCLUSIONS

The following additional exclusions apply to this coverage:

We do not cover:

1. Loss arising out of or in connection with a "business".
2. "Expenses" incurred due to any fraudulent, dishonest or criminal act by an "insured" or any person aiding or abetting an "insured", or by any authorized representative of an "insured", whether acting alone or in collusion with others.
3. Loss other than "expenses".

SPECIAL DEDUCTIBLE

We will pay only that part of the loss that exceeds \$250. No other deductible applies to "identity fraud" expense coverage.

SECTION I – CONDITION

2. Your Duties After Loss

The following is added:

Send to us, within 60 days after our request, receipts, bills or other records that support your claim for "expenses" under "identity fraud" coverage.

All other provisions of this policy apply.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

RESTRICTING ENDORSEMENT

This endorsement applies to:

- Section I only
- Section II only
- Both Section I and II

Description of property:

Location of property:

Under **Section I – Exclusions**, the following additional exclusion is added:

We do not insure for any loss, regardless of cause or peril, to the property described above.

Under **Section II – Exclusions, 2. Coverage E – Personal Liability**, the following additional exclusion is added:

Coverage E – Personal Liability does not apply to “bodily injury” or “property damage” caused by or arising out of the ownership, custody or care of the property described above.

This exclusion, if applicable to other than a specific structure, shall apply regardless of whether the “bodily injury” or “property damage” occurs at an “insured location” or at some other location.

We do not insure for loss to the above regardless of:

- (a) the cause of the excluded event.
- (b) other causes of the loss.
- (c) whether other causes acted concurrently or in any sequence with the excluded event to produce the loss.
- (d) the number of policies involved.
- (e) persons covered.
- (f) claims made.
- (g) properties or premiums shown on the policy.
- (h) premiums paid.
- (i) persons involved in an “occurrence”.

This endorsement shall remain in effect for the term of the policy and for each renewal, reinstatement, substitute, modified, replacement or amended policy, unless discontinued by us.

All other provisions of this policy apply.

The undersigned named “insured(s)” accept(s) this exclusion or these exclusions on behalf of all “insureds” as defined in this policy.

* Policy Number

* Named Insured’s Signature

Date

* Named Insured’s Signature (If applicable)

Date

* *Entries may be left blank if an original signed endorsement is currently on file with Armed Forces Insurance Exchange.*

If a signed endorsement is not on file with Armed Forces Insurance Exchange, please complete, sign, date and return an initial endorsement to Armed Forces Insurance Exchange. (You may want to retain a copy of the signed endorsement for your personal records.) The original signed endorsement will remain on file with Armed Forces Insurance Exchange as a permanent record of your ongoing agreement to this exclusion.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status: Approved 06/18/2008

Comments:

Attachment:

PC-TD-1 AR-HO-4I-07-3.pdf

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	AR-HO-41-07-3
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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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Armed Forces Insurance Exchange is an ISO subscriber. The purpose of this filing is to:

1. Introduce a new Identity Fraud Expense Coverage endorsement.

Our endorsement, HO 04 55 06 06, was developed based on the content of the approved ISO HO 2000 Series endorsement HO 04 55 03 03 found in ISO Filing Designation Number HO-2002-OIF02. Both our endorsement and the ISO endorsement provide up to \$15,000 of first party coverage, less a \$250 deductible, for expenses incurred by an insured as a direct result of any one identity fraud first discovered or learned of during the policy period. The only difference between our 06 06 edition and the ISO 03 03 edition is the paragraph designation found in the last paragraph of the endorsement. Our 06 06 edition refers to the Homeowner 91 Series Policy "Section 2. Your Duties After Loss", while the ISO 03 03 edition refers to the Homeowner 2000 Series Policy "Section B. Duties After Loss".

2. Revise our Restricting Endorsement HO AF 45.

We are filing to revise and update our Homeowners Restricting Endorsement HO AF 45 to provide more specific policy references, more accurate accountability, better readability, and to conform with our updated form standards. However, the use and application of this optional endorsement will remain unchanged.

A copy of our new Restricting Endorsement, HO AF 45 12 06 T, has been included with this filing for reference purposes.

Our previously approved edition, HO AF 45 04 91, will be withdrawn from use.

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.)**