

SERFF Tracking Number: VANL-125693961 State: Arkansas
Filing Company: Vanliner Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AR CRM FORM 0708
TOI: 26.0 Burglary & Theft Sub-TOI: 26.0001 Commercial Burglary & Theft
Product Name: AR Commercial Crime and Fidelity Form Filing
Project Name/Number: AR Commercial Crime and Fidelity Form Filing/AR CRM Form 0708

Filing at a Glance

Company: Vanliner Insurance Company

Product Name: AR Commercial Crime and Fidelity Form Filing SERFF Tr Num: VANL-125693961 State: Arkansas

TOI: 26.0 Burglary & Theft

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 26.0001 Commercial Burglary & Theft Co Tr Num: AR CRM FORM 0708 State Status: Fees verified and received

Filing Type: Rate/Rule

Co Status:

Reviewer(s): Betty Montesi,
Llyweyia Rawlins

Author: Brian Hingst

Disposition Date: 06/16/2008

Date Submitted: 06/16/2008

Disposition Status: Approved

Effective Date Requested (New): 07/01/2008

Effective Date (New): 07/01/2008

Effective Date Requested (Renewal): 07/01/2008

Effective Date (Renewal):
07/01/2008

State Filing Description:

FILING TYPE: FORMS - 2

General Information

Project Name: AR Commercial Crime and Fidelity Form Filing

Status of Filing in Domicile: Pending

Project Number: AR CRM Form 0708

Domicile Status Comments:

Reference Organization: ISO

Reference Number: See Exhibit V Page 1

Reference Title: ISO

Advisory Org. Circular: ISO

Filing Status Changed: 06/16/2008

State Status Changed: 06/16/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

The Vanliner Insurance Company (Vanliner) hereby files forms to support its entry into writing Commercial Crime Policies for moving and storage companies. This filing is for Commercial Crime. Vanliner is an ISO subscriber for Commercial Crime and is adopting the entire ISO Commercial Crime program (forms) with only minimal changes and additions.

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Company and Contact

Filing Contact Information

Tina Kampwerth, Senior Compliance Tina_Kampwerth@Vanliner.com
 Coordinator
 One Premier Drive (800) 325-3619 [Phone]
 St. Louis, MO 63026 (636) 305-4270[FAX]

Filing Company Information

Vanliner Insurance Company CoCode: 21172 State of Domicile: Arizona
 One Premier Drive Group Code: -99 Company Type:
 St Louis, MO 63026 Group Name: State ID Number:
 (636) 343-9889 ext. [Phone] FEIN Number: 86-0114294

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: \$50 Arkansas Filing Fee
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Vanliner Insurance Company	\$50.00	06/16/2008	20916185

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	06/16/2008	06/16/2008

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Disposition

Disposition Date: 06/16/2008

Effective Date (New): 07/01/2008

Effective Date (Renewal): 07/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: VANL-125693961 *State:* Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Supporting Documentation	Approved	Yes
Form	Manuscript Endorsement	Approved	Yes
Form	Privacy Policy	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	Manuscript Endorsement	VL0000	08 89	Endorsement/Amendment/Conditions	New			VL0000 08 89 Manuscript Endorsement.pdf
Approved	Privacy Policy	14344	06 01	Other	New			Doc. No. 14344 06 01.pdf

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

VANLINER INSURANCE COMPANY

(The attaching clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)

ENDORSEMENT

Effective Date At 12:01 A.M. Standard Time	Policy Number
Named Insured	Countersigned By

(AUTHORIZED REPRESENTATIVE)

PRIVACY POLICY

A. INTRODUCTION

We are sending this Privacy Policy to explain how Vanliner Group, Inc., Vanliner Insurance Company and TransProtection Service Company (hereinafter referred to as Vanliner) handle and protect personal information about you. Be assured that at Vanliner, keeping personal information secure is a priority. This Privacy Policy will explain how we utilize personal information, including the possible disclosure of that information to third parties.

At Vanliner, we strive to meet your expectations for privacy while still managing information to properly conduct our business and to serve you to our fullest potential. There are occasions when information must be disclosed to fulfill your requests, to deliver products and services, to administer and update policies and to comply with laws and regulations. Keep in mind that information sharing can be very important for meeting your needs and providing you with excellent and consistent quality service.

Please take a few minutes to review the contents of this brochure. If you have any questions concerning this Privacy Policy and how it may affect you, please write us at: One Premier Drive, Fenton, MO 63026.

B. INFORMATION SECURITY IS A PRIORITY

The security of personal information is one of Vanliner priorities. You may be assured that we regularly review our security practices to protect against unauthorized access to information. We restrict access to your personal information to those employees who need to know that information in the course of performing their jobs. We maintain physical, electronic and procedural safeguards that further protect your personal information.

C. PERSONAL INFORMATION COVERED BY THIS PRIVACY POLICY

Our Privacy Policy applies to all personal information that is obtained by Vanliner in connection with providing insurance coverage. Specifically, this includes individually identifiable information about your character, habits, finances, occupation, general reputation, credit, health, or other personal characteristics, including your name, address and medical information.

D. PERSONAL INFORMATION WE COLLECT

In order to properly serve you and to effectively and efficiently operate, we collect certain types of personal information about you, which may come from the following sources:

1. Information that you provide us, whether on applications, forms, in writing, over the telephone, electronically or by other means. This information may include your name, address, employment information, financial information, and claim information. It may also include health information such as individual medical records or information about an illness, disability or injury. This information could concern your application for an insurance policy or your utilization of an existing insurance policy, either through the claims process or otherwise.

2. Information that we receive from other sources about you. This may include information received from your employer, your health care providers and other third parties. Again, the information received from other sources may include individual medical records or information about an illness, disability or injury. This information could concern your application for an insurance policy or your utilization of an existing insurance policy, either through the claims process or otherwise. Note that information obtained from a report by an insurance support organization may be retained by that organization and disclosed to other persons.
3. Information that we receive from public sources, which may include telephone numbers, addresses, court records or other public records.

At Vanliner, we do not disclose personal information except as permitted or required by law.

E. TYPES OF INFORMATION DISCLOSURE DONE BY VANLINER

(1.) DISCLOSURE WITHIN THE VANLINER AFFILIATED FAMILY

We may disclose personal information to our affiliates in accordance with law.

(2.) DISCLOSURE TO NON - AFFILIATED THIRD PARTIES

To serve you and to properly administer our business, we may also disclose personal information to non-affiliated third parties, including other insurance companies, agents, brokers, administrators and service providers. We may also disclose personal information to non-affiliated third parties who are assisting us by performing services or functions, such as marketing our products and services, conducting surveys or performing audits.

(3.) OTHER INFORMATION DISCLOSURE

We may disclose personal information to companies or organizations outside the Vanliner family as required or permitted by law. For example, we may disclose personal information as required to respond to a subpoena, to respond to insurance regulatory authorities, or to service your policy.

F. PERMITTED DISCLOSURES OF PERSONAL INFORMATION

Vanliner is permitted by law to disclose some personal information obtained in connection with an insurance transaction without your prior authorization. Such permitted disclosures could occur in the context of claims adjusting, van line qualification or when revising or changing an agency contract. These permitted disclosures include:

- a. Disclosure to a third party other than an insurance institution, agent or insurance support organization if reasonably necessary for that person to perform a business, professional or insurance function for Vanliner and that person agrees not to further disclose the personal information without your written authorization. (However, further disclosure without your written authorization is permitted if it is reasonably necessary for the business, professional or insurance function that person is performing for Vanliner or if further disclosure would be permissible if made by an insurance institution, agent or insurance support organization.)

- b. Disclosure to a third party other than an insurance institution, agent or insurance support organization which enables the third party to provide Vanliner information it requires to determine your eligibility for an insurance benefit or payment.
- c. Disclosure to a third party other than an insurance institution, agent or insurance support organization for the purpose of detecting or preventing criminal activity, fraud, material misrepresentation or material nondisclosure in connection with an insurance transaction.
- d. Disclosure to an insurance institution, agent, insurance support organization or self-insurer if the information is reasonably necessary to detect or prevent criminal activity, fraud, material misrepresentation or material nondisclosure concerning an insurance transaction.
- e. Disclosure to an insurance institution, agent, insurance support organization or self-insurer if the information is reasonably necessary for either Vanliner or the other party receiving the information to perform their job with regards to an insurance transaction.
- f. Disclosure to a medical professional or medical institution to verify insurance coverage or benefits, informing an individual of a medical problem of which they may be unaware, or conducting operations audit or service audit. However, Vanliner is limited to only disclose enough information reasonably needed to accomplish these purposes.
- g. Disclosure to an insurance regulatory authority.
- h. Disclosure to a law enforcement or related governmental authority to protect Vanliner interests in preventing or prosecuting fraud or if Vanliner reasonably believes you may have broken the law in some other way.
- i. Disclosure to conduct actuarial or research studies provided no individual information is identified in the actuarial or research report. Materials which identify you must be returned to Vanliner or destroyed when no longer needed. The actuarial or research institution must agree not to further disclose the information unless further disclosure would be permitted if done by an insurance institution, agent or insurance support organization.
- j. Disclosure to a person or business for the sole purpose of marketing a product or service as long as no medical information is disclosed. Further, personal information concerning your character, personal habits, general reputation, mode of living or a classification derived from the information may not be disclosed. Further, an opportunity must be given for you to tell us you do not want personal information disclosed for this purpose and have not done so.
- k. Disclosure to an affiliate who will use the information in auditing Vanliner.
- l. Disclosure of nonmedical personal information to an affiliate who will use the information in marketing an insurance product or service. The affiliate must agree not to further disclose the information. Medical information may be disclosed for this purpose only with your written permission.
- m. Disclosure to a group insurance policyholder to report claims experience or audit Vanliner services. Only information reasonably needed for this review or audit may be disclosed.

- n. Disclosure pursuant to your written authorization.
- o. Disclosure pursuant to your written authorization but submitted by another insurance institution, agent or insurance support organization, if this authorization meets legal guidelines imposed on the insurance industry.
- p. Disclosure pursuant to a written authorization signed by you but submitted by someone other than that noted in subsection (o.) immediately above, if this authorization is dated and disclosure is sought within one year of the authorization date .

G. YOUR PRIVACY OPTIONS

For Vanliner to obtain additional personal information other than that listed previously, we need your prior authorization.

For Vanliner to disclose personal information other than that listed previously, we also need your authorization.

H. ACCESS TO PERSONAL INFORMATION

If you request in writing access to specific and reasonably retrievable personal information about yourself, and you have identified yourself in such a way so that we believe no unauthorized party is fraudulently attempting to review your personal information we, or another entity authorized to act on our behalf, will:

- (1) Inform you of the nature and substance of the requested personal information. We may do this in writing, by telephone or by another means of communication.
- (2) Allow you to personally inspect and copy the requested personal information or send to you via U.S. Mail a copy of the requested personal information. We may charge a reasonable fee for this service, and we may employ an insurance support organization to perform the copying and requested disclosure of your personal information.
- (3) Tell you to whom Vanliner has disclosed the requested personal information in the preceding two (2) years. If this is not discernible, we will tell you who normally would receive this type of information.
- (4) Tell you from where Vanliner obtained the requested personal information if from an institutional source.
- (5) Provide to you a summary of the procedures used to correct, amend or delete the requested personal information.

**** Note:** If the information you request is medical information which has been supplied to Vanliner by a medical professional or institution, we may give the information and the source of the information either directly to you or to a medical professional designated by you if this medical professional is licensed to provide medical care with respect to the medical condition to which the personal information relates. If we choose to provide the information to your designated medical professional, we will give you notice the requested information has been so disclosed.

**** Note:** The rights of access noted within this section only apply to information concerning natural persons which has been collected and maintained in connection with an insurance transaction. This section does not apply to personal information collected concerning possible or existing claims, civil proceedings or criminal proceedings.

I. CORRECTION OF PERSONAL INFORMATION

If you request in writing that we correct, amend or delete specific personal information about you that we have in our possession, we will:

- (1) Correct, amend or delete the personal information as requested. If we do this, we will notify you in writing of the change. We will also send notice of the correction, amendment or deletion to:
 - a. any person you designate who may have received this particular information within the preceding two years,
 - b. any insurance support organization that mainly receives personal information from insurance institutions if this support organization has been provided the prior version of the personal information within the preceding seven (7) years and if this support organization currently maintains recorded personal information about you,
 - c. any insurance support organization that furnished to Vanliner the information which has now been corrected, amended or deleted.

- (2) Notify you in writing of our refusal to correct, amend or delete the personal information within Vanliner possession, explain to you the reasons for this refusal, and inform you of your right to file with Vanliner a concise statement clearly illustrating what you believe is the correct information and why you disagree with Vanliner refusal to correct, amend or delete certain information. If you file such a statement, Vanliner shall:
 - a. file the statement along with the disputed personal information and make the statement available to those seeking access to the disputed personal information,
 - b. when subsequently disclosing the disputed personal information, clearly identify the disputed matter and provide your statement along with the disputed personal information,
 - c. provide your statement to any person you designate who may have received this particular information within the preceding two (2) years,
 - d. provide your statement to any insurance support organization that mainly receives personal information from insurance institutions if this support organization has been provided the disputed personal information within the preceding seven (7) years and if this support organization currently maintains recorded personal information about you,
 - e. provide your statement to any insurance support organization that furnished to Vanliner the disputed information.

**** Note:** The rights discussed in this section apply to information concerning natural persons which has been collected and maintained in connection with an insurance transaction. This section does not apply to personal information collected concerning possible or existing claims, civil proceedings or criminal proceedings.

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Supporting Documentation

Review Status:

Approved

06/16/2008

Comments:

Attachments:

AR CRM ltr.pdf

AR CRM P&C.pdf

AR CRM FFS.pdf

AR CRM Adoption.pdf

AR CRM XMemo.pdf



June 6, 2008

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

RE: Vanliner Insurance Company
Commercial Lines
Division Three – Crime and Fidelity
NAIC: 000-21172
Federal Employer ID #86-0114294
Proposed Effective Date: July 1, 2008

Dear Honorable Bowman:

Vanliner Insurance Company hereby files to adopt ISO Commercial Lines – Division Three – Crime and Fidelity as a new program. Vanliner is requesting an implementation date of July 1, 2008.

Should you have any questions or require additional information, please call me at 800-325-3619 extension 4793 or e-mail me at Ian_McKechnie@unigroupinc.com.

Sincerely,

Ian McKechnie
Chief Actuary, Director of Industry Compliance

Enc.

IM/tk

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="border: none;">New Business</td> <td style="border: none; width: 100px;"></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					

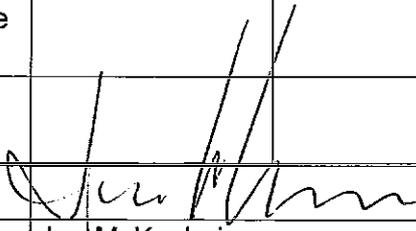
3. Group Name	Group NAIC #
----------------------	---------------------

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Vanliner Insurance Company	MO	21172	86-0114294	24

5. Company Tracking Number	AR CRM 0708
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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
	Ian McKechnie Vanliner Insurance Company One Premier Drive St. Louis, MO 63026	Chief Actuary, Director of Industry Compliance	636-305-4793 800-325-3619 ext. 4793	636-305-4270	ian_McKechnie@uni groupinc.om

7. Signature of authorized filer	
----------------------------------	--

8. Please print name of authorized filer	Ian McKechnie
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Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	026
10. Sub-Type of Insurance (Sub-TOI)	026.0001
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	AR CRM 0708
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" 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: 07/01/2008 Renewal: 07/01/2008

Property & Casualty Transmittal Document---

15.	Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	Reference Organization (if applicable)	ISO
17.	Reference Organization # & Title	ISO - Please see Exhibit V Page 1
18.	Company's Date of Filing	06/05/2008
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 #	AR CRM 0708
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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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New Program - Division 3 - Crime and Fidelity

22.	<p>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> <p>Check #: Amount:</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>
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***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 #		AR CRM 0708		
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	Manuscript Endorsement	VL0000 08 89	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Privacy Policy	Doc. No. 14344 06/01	<input checked="" 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		

Explanatory Memorandum

The Vanliner Insurance Company (Vanliner) hereby files rates, rules and forms to support its entry into writing Commercial Crime Policies for moving and storage companies. This filing is for Commercial Crime. Vanliner is an ISO subscriber for Commercial Crime and is adopting the entire ISO Commercial Crime program (rules, loss costs and forms) with only minimal changes and additions.

Proposed Effective Date

The following effective date rule is proposed:

“These rates, rules and forms will be used for policies effective on or after July 1, 2008.”

If approval is not received by the proposed effective date, these changes will become effective upon approval.

Vanliner Insurance Company

The Vanliner Insurance Company (NAIC # 21172) is a commercial lines insurer specializing in the moving and storage industry, Vanliner's state of domicile is Missouri. Vanliner has received an A- rating with a Stable outlook from A.M. Best.

Expense Experience

The Vanliner Insurance Company has never written Commercial Crime coverage in the past. As such we have no historical expense experience for this line of business. After review, we believe the combined industry expense experience for Fidelity, Burglary and Theft lines of business (lines 23 & 26) is the best proxy we can find for our expected expense provisions.

Exhibit 1 is a summary of the entire US P&C industry's expense experience for these lines of business. Page 3 shows the combined totals for both lines. This is direct data is taken from Part III of the prior three years' Insurance Expense Exhibits. The bottom half of Exhibit 1 displays a number of direct expense ratios. This data was drawn from A.M. Best's Aggregates and Averages – Property/Casualty.

Investment Income

The Vanliner Insurance Company has not written Commercial Crime coverage in past. As such we have no historical investment income experience for this line of business. After review, we believe the industry investment income experience for Fidelity, Burglary and Theft lines of business is the best proxy we can find for our expected investment income results. This data was drawn from A.M. Best's Aggregates and Averages – Property/Casualty.

Explanatory Memorandum

Exhibit II Page 1 is a summary of the entire US P&C industry's investment income experience for this line of business. This exhibit displays an allocation of policyholder's surplus to line of business calculation, calculates an investment gain ratio, a prepaid expense ratio and eventually develops an expected investment income by line of business attributable to insurance transactions provision.

Exhibit II Page 2 develops Vanliner's selected Profit and Contingency provision. The figures shown reflect our approach to developing the profit provision which is intended to generate the same average return the entire US P&C industry has experienced in the latest three period (2004-2006) for which data is available. See the notes for details about data sources and calculations. We are subtracting Investment Income Attributable to Insurance Transactions (Exhibit 2 page 1) from our Target Return as % of Direct Written Premium to get Vanliner's selected Profit & Contingency Provision. Normally we would express our target return as a % of GAAP equity. However since we are supporting our filing by citing returns industry statutory surplus, the surplus/equity ratio on line 4 of Exhibit II Page 2 has been set to 1.00.

Exhibit II Page 3 develops the three average industry after tax return on surplus based upon figures drawn from A.M. Best's Aggregates and Averages – Property/Casualty.

Loss Cost Multiplier Calculations

Vanliner's Loss Cost Multiplier calculations are displayed in Exhibit III Page 1.

Our selected Commission and Brokerage expense provision is based upon our agency commission schedule. The selected Other Acquisition and General Expense provisions three year averages taken from Exhibit 1. The Tax provisions listed are a state premium tax plus a miscellaneous taxes, licenses and fees provision to cover various miscellaneous and payroll taxes. See Exhibit III Page 2 for the development of the miscellaneous and payroll taxes provision. The provisions used are displayed in Exhibit III page 3. The final provision is the selected Profit and Contingency provision developed in Exhibit II Page 2.

Loss Cost Modification

We have no experience with the Crime lines. Therefore our selected Loss Cost Modification will be 1.00 for this filing.

ISO Filings Being Adopted

With this filing Vanliner is adopting the entire ISO Commercial Crime Manual as currently filed and approved in this state. This includes the:

Crime and Fidelity Experience and Schedule Rating Plan
Composite Rating Plan

Explanatory Memorandum

Class Table
Class Table Reference
Kidnap/Ransom and Extortion Individual Risk Premium Modification Plan
Retrospective Rating Plan
State Insurance Manual
Terrorism Supplement to the CLM

Exhibit V contains a list of all the manual holder notices, ISO's reference filing numbers and the state filing reference numbers (if any) for various manual pages we are adopting with this filing.

Vanliner Exception Pages

Vanliner's proposed CLM exception pages are attached as Exhibit VI. These are built to work with ISO's Commercial Lines Manual. There is a company multistate exception page that displays the rules we intend to use in all states. The Vanliner state exception pages display the Loss Cost Multiplier developed and supported in this filing.

State Filing Forms

A complete set of state filing forms is attached.

Person to Contact

If there any questions about this filing please contact the following:

Ian McKechnie
Chief Actuary and Director of Industry Compliance
(636) 305-4793 or (800) 325-3619 ext 4793
Ian_McKechnie@unigroupinc.com

Explanatory Memorandum

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Exhibit I Insurance Expense Exhibit Summary

Page 1 – Total US PC Industry Fidelity

Page 2 – Total US PC Industry Burglary and Theft

Page 3 – Total US PC Industry Crime

Exhibit II Investment Income

Page 1 – Allocation of Investment Income by Line of Business

Page 2 – Profit and Contingency Exhibit

Page 3 – Industry Return on Policyholder Surplus

Exhibit III Loss Cost Multiplier Development

Page 1 – Selected Expense Provisions

Page 2 – Miscellaneous Taxes and Payroll Taxes

Page 3 – 2007 Tax Rates by State

Exhibit IV Not Applicable to this Filing

Exhibit V ISO / Bureau Reference Filings

Page 1 – ISO / Bureau Reference Filings

Page 2 – Vanliner Insurance Company Forms

Exhibit VI Vanliner's State Exception Pages

State Filing Forms

Total US PC Industry
Insurance Expense Exhibit (000) Omitted
Fidelity
As reported in Best's Aggregates & Averages - Property/Casualty

Col. Item	2003	2004	2005	2006	Latest 3 yr 2004-06
Part III - Allocation to Lines of Direct Business Written					
1 Premiums Written	1,308,183	1,400,603	1,364,541	1,295,915	4,061,059
3 Premiums Earned	1,235,275	1,364,079	1,369,224	1,295,548	4,028,851
5 Dividends to Policyholders	254	160	334	319	813
7 Incurred Loss	461,569	589,965	555,375	473,430	1,618,770
9 Defense and Cost Containment Expenses Incurred	34,960	47,084	55,908	27,945	130,937
11 Adjusting and Other Expenses Incurred	29,328	44,976	49,444	50,194	144,614
13 Unpaid Losses	1,019,630	1,190,801	1,256,217	1,254,627	3,701,645
15 Defense and Cost Containment Expenses Unpaid	103,112	117,476	147,132	147,938	412,546
17 Adjusting and Other Expenses Unpaid	41,543	44,802	47,846	46,911	139,559
19 Unearned Premium Reserves	703,665	739,110	734,493	729,177	2,202,780
21 Agent's Balances	263,118	262,509	258,063	281,302	801,874
23 Commission and Brokerage Expenses Incurred	159,711	161,400	157,300	121,537	440,237
25 Taxes, Licenses & Fees Incurred	29,644	33,119	35,856	22,565	91,540
27 Other Acquisitions, Field Supervision, and Collection Expenses Incurred	97,281	113,489	113,642	115,954	343,085
29 General Expenses Incurred	71,932	76,560	82,600	96,167	255,327
31 Other Income Less Expenses	(22,618)	(23,429)	(19,231)	(21,800)	(64,460)
33 Pre-Tax Profit or Loss Excluding All Investment Gain	327,969	273,874	299,529	365,646	939,049
Paid Loss		418,794	489,959	475,020	1,383,773
Defense and Cost Containment Expenses Paid		32,720	26,252	27,139	86,111
Adjusting and Other Expenses Paid		41,717	46,400	51,129	139,246

Direct Expense Ratios

Inc. Loss / Earned Premium Ratio	= (7) / (3)	37.4%	43.3%	40.6%	36.5%	40.2%
Inc. ALAE / Earned Premium Ratio	= (9) / (3)	2.8%	3.5%	4.1%	2.2%	3.2%
Inc. ULAE / Earned Premium Ratio	= (11) / (3)	2.4%	3.3%	3.6%	3.9%	3.6%
Inc. Loss & LAE / Earned Premium Ratio	subtotal	42.6%	50.0%	48.3%	42.6%	47.0%
Inc LAE / Inc Loss Ratio	= ((9)+(11))/(7)	13.9%	15.6%	19.0%	16.5%	17.0%
Inc Loss & LAE / Inc Loss & ALAE Ratio	= ((7)+(9)+(11))/((7)+(9))	105.9%	107.1%	108.1%	110.0%	108.3%
Inc Loss & LAE / Inc Loss Ratio	= ((7)+(9)+(11)) / (7)	113.9%	115.6%	119.0%	116.5%	117.0%
Paid Loss Ratio to DEP			30.7%	35.8%	36.7%	34.3%
Paid ALAE Ratio to DEP			2.4%	1.9%	2.1%	2.1%
Paid ULAE Ratio to DEP			3.1%	3.4%	3.9%	3.5%
Change in ALAE O/S to DEP			1.1%	2.2%	0.1%	
Change in ULAE O/S to DEP			0.2%	0.2%	-0.1%	
Commission Ratio to DWP	= (23) / (1)	12.2%	11.5%	11.5%	9.4%	10.8%
T. L. & F Ratio to DWP	= (25) / (1)	2.3%	2.4%	2.6%	1.7%	2.3%
Other Acq Ratio to DWP	= (27) / (1)	7.4%	8.1%	8.3%	8.9%	8.4%
General Exp Ratio to DEP	= (29) / (3)	5.8%	5.6%	6.0%	7.4%	6.3%
U/W Expense Ratio to DEP	sum((23):(29)) / (3)	29.0%	28.2%	28.4%	27.5%	28.1%

Total US PC Industry
Insurance Expense Exhibit (000) Omitted
Burglary and Theft
As reported in Best's Aggregates & Averages - Property/Casualty

Col. Item	2003	2004	2005	2006	Latest 3 yr 2004-06
Part III - Allocation to Lines of Direct Business Written					
1 Premiums Written	123,848	135,844	132,718	214,873	483,435
3 Premiums Earned	121,820	129,447	131,921	199,357	460,725
5 Dividends to Policyholders	44	37	48	54	139
7 Incurred Loss	29,407	33,460	25,975	31,574	91,009
9 Defense and Cost Containment Expenses Incurred	579	1,843	1,288	934	4,065
11 Adjusting and Other Expenses Incurred	3,106	3,508	11,439	1,879	16,826
13 Unpaid Losses	36,767	45,487	48,044	62,923	156,454
15 Defense and Cost Containment Expenses Unpaid	2,714	3,319	3,470	7,546	14,335
17 Adjusting and Other Expenses Unpaid	1,779	1,176	2,822	2,009	6,007
19 Unearned Premium Reserves	61,326	66,540	67,430	82,913	216,883
21 Agent's Balances	21,948	24,036	38,816	27,041	89,893
23 Commission and Brokerage Expenses Incurred	28,495	18,902	19,960	49,029	87,891
25 Taxes, Licenses & Fees Incurred	2,813	3,342	4,215	4,754	12,311
27 Other Acquisitions, Field Supervision, and Collection Expenses Incurred	10,097	10,958	13,166	10,623	34,747
29 General Expenses Incurred	6,649	6,659	11,265	11,041	28,965
31 Other Income Less Expenses	(838)	(896)	(719)	(1,195)	(2,810)
33 Pre-Tax Profit or Loss Excluding All Investment Gain	39,802	49,824	43,822	88,251	181,897
Paid Loss		24,740	23,418	16,695	64,853
Defense and Cost Containment Expenses Paid		1,238	1,137	(3,142)	(767)
Adjusting and Other Expenses Paid		4,111	9,793	2,692	16,596

Direct Expense Ratios

Inc. Loss / Earned Premium Ratio	= (7) / (3)	24.1%	25.8%	19.7%	15.8%	19.8%
Inc. ALAE / Earned Premium Ratio	= (9) / (3)	0.5%	1.4%	1.0%	0.5%	0.9%
Inc. ULAE / Earned Premium Ratio	= (11) / (3)	2.5%	2.7%	8.7%	0.9%	3.7%
Inc. Loss & LAE / Earned Premium Ratio	subtotal	27.2%	30.0%	29.3%	17.2%	24.3%
Inc LAE / Inc Loss Ratio	= ((9)+(11))/(7)	12.5%	16.0%	49.0%	8.9%	23.0%
Inc Loss & LAE / Inc Loss & ALAE Ratio	= ((7)+(9)+(11))/((7)+(9))	110.4%	109.9%	142.0%	105.8%	117.7%
Inc Loss & LAE / Inc Loss Ratio	= ((7)+(9)+(11)) / (7)	112.5%	116.0%	149.0%	108.9%	123.0%
Paid Loss Ratio to DEP			19.1%	17.8%	8.4%	14.1%
Paid ALAE Ratio to DEP			1.0%	0.9%	-1.6%	-0.2%
Paid ULAE Ratio to DEP			3.2%	7.4%	1.4%	3.6%
Change in ALAE O/S to DEP			0.5%	0.1%	2.0%	
Change in ULAE O/S to DEP			-0.5%	1.2%	-0.4%	
Commission Ratio to DWP	= (23) / (1)	23.0%	13.9%	15.0%	22.8%	18.2%
T. L. & F Ratio to DWP	= (25) / (1)	2.3%	2.5%	3.2%	2.2%	2.5%
Other Acq Ratio to DWP	= (27) / (1)	8.2%	8.1%	9.9%	4.9%	7.2%
General Exp Ratio to DEP	= (29) / (3)	5.5%	5.1%	8.5%	5.5%	6.3%
U/W Expense Ratio to DEP	sum((23):(29)) / (3)	39.4%	30.8%	36.8%	37.8%	35.6%

Total US PC Industry
Insurance Expense Exhibit (000) Omitted
Fidelity & Burglary and Theft Combined
As reported in Best's Aggregates & Averages - Property/Casualty

Col. Item	2003	2004	2005	2006	Latest 3 yr 2004-06
Part III - Allocation to Lines of Direct Business Written					
1 Premiums Written	1,432,031	1,536,447	1,497,259	1,510,788	4,544,494
3 Premiums Earned	1,357,095	1,493,526	1,501,145	1,494,905	4,489,576
5 Dividends to Policyholders	298	197	382	373	952
7 Incurred Loss	490,976	623,425	581,350	505,004	1,709,779
9 Defense and Cost Containment Expenses Incurred	35,539	48,927	57,196	28,879	135,002
11 Adjusting and Other Expenses Incurred	32,434	48,484	60,883	52,073	161,440
13 Unpaid Losses	1,056,397	1,236,288	1,304,261	1,317,550	3,858,099
15 Defense and Cost Containment Expenses Unpaid	105,826	120,795	150,602	155,484	426,881
17 Adjusting and Other Expenses Unpaid	43,322	45,978	50,668	48,920	145,566
19 Unearned Premium Reserves	764,991	805,650	801,923	812,090	2,419,663
21 Agent's Balances	285,066	286,545	296,879	308,343	891,767
23 Commission and Brokerage Expenses Incurred	188,206	180,302	177,260	170,566	528,128
25 Taxes, Licenses & Fees Incurred	32,457	36,461	40,071	27,319	103,851
27 Other Acquisitions, Field Supervision, and Collection Expenses Incurred	107,378	124,447	126,808	126,577	377,832
29 General Expenses Incurred	78,581	83,219	93,865	107,208	284,292
31 Other Income Less Expenses	(23,456)	(24,325)	(19,950)	(22,995)	(67,270)
33 Pre-Tax Profit or Loss Excluding All Investment Gain	367,771	323,698	343,351	453,897	1,120,946
Paid Loss		443,534	513,377	491,715	1,448,626
Defense and Cost Containment Expenses Paid		33,958	27,389	23,997	85,344
Adjusting and Other Expenses Paid		45,828	56,193	53,821	155,842

Direct Expense Ratios

Inc. Loss / Earned Premium Ratio	= (7) / (3)	36.2%	41.7%	38.7%	33.8%	38.1%
Inc. ALAE / Earned Premium Ratio	= (9) / (3)	2.6%	3.3%	3.8%	1.9%	3.0%
Inc. ULAE / Earned Premium Ratio	= (11) / (3)	2.4%	3.2%	4.1%	3.5%	3.6%
Inc. Loss & LAE / Earned Premium Ratio	subtotal	41.2%	48.3%	46.6%	39.2%	44.7%
Inc LAE / Inc Loss Ratio	= ((9)+(11))/(7)	13.8%	15.6%	20.3%	16.0%	17.3%
Inc Loss & LAE / Inc Loss & ALAE Ratio	= ((7)+(9)+(11))/((7)+(9))	106.2%	107.2%	109.5%	109.8%	108.8%
Inc Loss & LAE / Inc Loss Ratio	= ((7)+(9)+(11)) / (7)	113.8%	115.6%	120.3%	116.0%	117.3%
Paid Loss Ratio to DEP			29.7%	34.2%	32.9%	32.3%
Paid ALAE Ratio to DEP			2.3%	1.8%	1.6%	1.9%
Paid ULAE Ratio to DEP			3.1%	3.7%	3.6%	3.5%
Change in ALAE O/S to DEP			1.0%	2.0%	0.3%	
Change in ULAE O/S to DEP			0.2%	0.3%	-0.1%	
Commission Ratio to DWP	= (23) / (1)	13.1%	11.7%	11.8%	11.3%	11.6%
T. L. & F Ratio to DWP	= (25) / (1)	2.3%	2.4%	2.7%	1.8%	2.3%
Other Acq Ratio to DWP	= (27) / (1)	7.5%	8.1%	8.5%	8.4%	8.3%
General Exp Ratio to DEP	= (29) / (3)	5.8%	5.6%	6.3%	7.2%	6.3%
U/W Expense Ratio to DEP	sum((23):(29)) / (3)	30.0%	28.4%	29.2%	28.9%	28.8%

Total US PC Industry
Allocation of Investment Income by Line of Business (000) Omitted
As Reported in A.M. Best's Aggregates and Averages

	Overall US PC Industry			Line - Crime			Notes:
	(a) 2005	(b) 2006	(c) Mean	(s) 2005	(t) 2006	(u) Mean	
Allocation of Policyholder Surplus to Line of Business							
Direct Earned Premium (1)	475,744,787	484,089,549	479,917,168	1,501,145	1,494,903	1,498,024	
Net Earned Premium (2)	425,631,427	440,531,383	433,081,405	1,346,234	1,361,222	1,353,728	
Net Loss Reserves (3)	435,546,639	444,012,015	439,779,327	1,120,573	1,279,225	1,199,899	
Net LAE Reserves (4)	88,037,369	93,017,782	90,527,576	175,363	173,928	174,646	
Net Loss & LAE Reserves (5)	523,584,008	537,029,797	530,306,903	1,295,936	1,453,153	1,374,545	= (3) + (4)
Net Unearned Premium Reserves (6)	192,545,236	199,911,689	196,228,463	755,449	782,398	768,924	
Mean Reserves & Current Premium (7)			1,167,066,748			3,504,690	= (2) + (5) + (6)
Policyholder's Surplus (8)	438,730,167	501,207,293	469,968,730				
Policyholder Surplus Ratio (9)			40.27%			40.27%	= (8) / (7)
Allocated Policyholder Surplus (10)			469,968,730			1,411,311	= (7) * (9)
Premium / Surplus Ratio (11)			0.94			0.96	= (2) / (10)
Calculation of Investment Gain Ratio							
Net Investment Income Earned (12)	51,734,584	54,646,113					
Net Realized Capital Gains or (Losses) (13)	12,194,108	3,587,228					
Net Investment Gain or (Loss) (14)	63,928,692	58,233,341					= (12) + (13)
Net Loss & LAE & Unearned Premium f (15)	716,129,244	736,941,486	726,535,365	2,051,385	2,236,551	2,143,468	= (5) + (6)
Net Agents' Balances (16)	85,518,520	92,714,854	89,116,687	222,177	301,306	261,742	
Funds held by company under reinsura (17)	33,994,289	30,553,086	32,273,688			-	
Policyholder's Surplus (18)			469,968,730			1,411,311	= (10)
Total Investable Funds (19)			1,139,661,096			3,293,038	= (15) - (16) + (17) + (18)
Net Investment Gain Ratio (20)			0.051			0.051	= (14) / (19)
Calculation Of Prepaid Expense Ratio							
Commissions (21)	45,587,636	46,948,341	46,267,989	157,772	155,789	156,781	
Taxes, Licenses & Fees (22)	11,918,521	11,869,096	11,893,809	41,375	33,393	37,384	
Other Acquisition Expense (23)	28,606,861	31,302,514	29,954,688	122,803	132,314	127,559	
General Expense (24)	24,793,525	27,773,256	26,283,391	97,099	112,110	104,605	
Net Prepaid Expense (25)	98,509,781	104,006,579	101,258,180	370,500	377,551	374,025	= (21)+(22)+(23)+(0.5 * (24
Net Written Premium (26)	433,530,933	448,417,041	440,973,987	1,349,690	1,388,239	1,368,965	
Prepaid Expense Ratio (27)	22.72%	23.19%	23%	27%	27%	27%	= (25) / (26)
Investment Gain on Funds Attributable to Insurance Transactions							
Net Unearned Premium Reserves (28)	192,545,236	199,911,689	196,228,463	755,449	782,398	768,924	= (6)
(1 - Prepaid Expense ratio) (29)			0.7681			0.7280	= 1 - (27)
Unpaid Unearned Premium Reserve (30)			150,714,913			559,804	= (28) * (29)
Net Loss & LAE Reserves (31)	523,584,008	537,029,797	530,306,903	1,295,936	1,453,153	1,374,545	= (5)
Net Agents' Balances (32)	85,518,520	92,714,854	89,116,687	222,177	301,306	261,742	= (16)
Investment Funds Attributable to Insura (33)			591,905,129			1,672,607	= (30) + (31) - (32)
Net Investment Gain Ratio (34)			0.051			0.051	= (20)
Investment Gain on Funds Attributable f (35)			30,244,617			85,465	= (33) * (34)
Investment Gain on Funds Attributable to Capital & Surplus							
Total Investable Funds (36)			1,139,661,096			3,293,038	= (19)
Net Investment Gain Ratio (37)			0.051			0.051	= (20)
Total Investment Gain (38)			58,233,341			168,265	= (36) * (37)
Investment Gain On Funds Attributable (39)			30,244,617			85,465	= (35)
Investment Gain on Funds Attributable (40)			27,988,724			82,799	= (38) - (39)
Investment Gain on Funds Attributable (41)			5.8%			5.5%	= (40) / (1)
Investment Income Attributable to Insurance Transactions							
(As a % of Net Earned Premium) (42)			6.9%			6.3%	= (35) / (2)
(As a % of Direct Earned Premium) - pr (43)			6.2%			5.7%	= (35) / (1)
Latest Federal Income Tax Rate (44)			24.9%			24.9%	AS Pg 4 Col 1 Line 19/18
(As a % of Direct Earned Premium) - afi (45)			4.7%			4.3%	= (1.00 - (44)) * (43)

Vanliner Insurance Company
Profit & Contingency Exhibit
Commercial Crime

#	Item	
(1)	Direct Earned Premium	1,501,145
(2)	Net Earned Premium	1,346,235
(3)	Premium / Surplus Ratio	0.96
(4)	Statutory Surplus to GAAP Equity Ratio	1.000
(5)	GAAP Equity	1,395,773
(6)	ROE Objective	11.73%
(7)	After-Tax Target Return	163,702
(8)	Federal Income Tax Rate	35.0%
(9)	Before Tax Target Return	251,849
(10)	Target Return as % of DWP = Underwriting Profit & Contingencies Provision	16.8%
(11)	Investment Gain Attributable to Insurance Transactions	5.7%
(12)	Investment Gain Attributable to Capital & Surplus	5.5%
(13)	Company Selected Profit & Contingency Provision* *Net of Investment Income Attributable to Insurance Transactions	11.06%

Notes:

- (1) Exhibit 1 (2006 Best's Aggregates and Averages)
- (2) 2006 Best's Aggregates and Averages
- (3) Exhibit 2 Page 1 Line 11
- (4) Exhibit 2 Page 3 Line 8
- (5) = ((2) / (3)) / (4)
- (6) Exhibit 2 Page 3 Line 5
- (7) = (5) * (6)
- (8) Federal Income Tax Rate
- (9) = (7) / (1 - (8))
- (10) = (9) / (1)
- (11) = Investment Income Exhibit - See Exhibit 2 Page 1
- (12) = Investment Income Exhibit - See Exhibit 2 Page 2
- (13) = (10) - (11)

Total US PC Industry
Underwriting and Investment Exhibit
Statement of Income
As Reported in A.M. Best's Aggregates and Averages

	Calendar Year				
	2004	2005	2006		2004-06
Total US PC Industry					
(1) Net Income before income tax	55,287,713	59,496,441	89,956,746	204,740,900	
(2) Federal and foreign income taxes	14,757,786	10,700,427	22,362,919	47,821,132	
(3) Net Income after income tax	40,529,927	48,796,014	67,593,827	156,919,768	
(4) Surplus as regards policyholders	401,388,974	435,348,403	501,207,293	1,337,944,670	
(5) Return on Policyholder Surplus (After Tax)	10.10%	11.21%	13.49%	11.73%	
	2004	2005	2006	2007	2005-07
Vanliner Insurance Company					
(6) Surplus as regards policyholders (STAT)	104,922,753	107,627,181	112,738,562	118,554,575	338,920,318
(7) Shareholder's Equity (GAAP)	110,702,213	114,515,478	124,033,206	131,907,755	370,456,439
(8) Surplus / Equity ratio	0.948	0.940	0.909	0.899	0.915

Notes / Sources

- (1) AS Page 4 Line 18
- (2) AS Page 4 Line 19
- (3) AS Page 4 Line 20
- (4) AS Page 3 Line 35
- (5) = (3) / (5)
- (6) Vanliner Insurance Company - Reclass for Statutory Financial Statements
- (7) Vanliner Insurance Company - Reclass for Statutory Financial Statements
- (8) = (6) / (7)

Vanliner Insurance Company
Arkansas Crime
Selected Expense Provisions

<u>Item</u>	<u>Provision</u>
(1) Commission & Brokerage	17.50%
(2) Other Acquisition Expenses	8.31%
(3) General Expenses	6.33%
Taxes, Licenses & Fees	
(4) Premium Tax	2.50%
(5) Miscellaneous Taxes, Licenses and Fees	0.94%
(6) total	<u>3.44%</u>
Other Expenses	
(7) Unallocated Loss Adjustment Expense	0.00%
(8) Residual Market Costs	0.00%
(9) Total	<u>0.00%</u>
(10) Profit & Contingencies	
(11) Required Return on Surplus	16.78%
(12) Expected Investment Income on Insurance Transactions	5.72%
(13) Profit & Contingencies net of Investment Income	<u>11.06%</u>
(14) Expense Ratio	46.65%
(15) Expected Loss and LAE Ratio	53.35%
(16) Loss Cost Modification	100%
(17) Indicated Loss Cost Multiplier	1.874

Notes:

- (1) Per Commission Schedule
- (2) Three year average from Exhibit I
- (3) Three year average from Exhibit I
- (4) Statutory rate per state
- (5) Industry average
- (7) Three year average from Exhibit I
- (13) Net of expected investment income on insurance transactions
- (11) Line 10 Exhibit 2 Page 2
- (12) Line 11 Exhibit 2 Page 2
- (14) = sum (1) to (13)
- (15) = 100% minus (8)
- (16) Exhibit IV
- (17) = (16) / (15)

INSURANCE SERVICES OFFICE, INC.

Miscellaneous Taxes and Payroll Taxes

<u>Miscellaneous Taxes</u>	<u>Industry Aggregates All Lines</u>
(1) Net Earned Premium	\$433,983,070
(2) Insurance Department Licenses and Fees Paid ^a	725,703
(3) Ratio [(2) / (1)]	0.17%
(4) All Other Miscellaneous Taxes Paid ^b	742,741
(5) Ratio [(4) / (1)]	0.17%
(6) Total Miscellaneous Tax Ratio [(3) + (5)]	0.34%
 <u>Payroll Taxes</u>	
(1) Net Earned Premium	\$433,983,070
(2) Payroll Taxes ^c	2,623,932
(3) Ratio [(2) / (1)]	0.60%

Note: All dollar amounts are in thousands.

^a Includes only those taxes that appear in Part I, line 20.2, column 4 (Taxes, Licenses and Fees), of the Insurance Expense Exhibit.

^b Includes only those taxes that appear in Part I, line 20.4, column 4 (Taxes, Licenses and Fees), of the Insurance Expense Exhibit.

^c Payroll taxes include Social Security, Medicare and unemployment taxes. Of the \$2.6 billion in payroll taxes reported above, \$1.0 billion are classified as loss adjustment expenses on the Insurance Expense Exhibit, \$0.8 billion are classified as acquisition expenses and \$0.8 billion are classified as general expenses. Thus, adding the payroll tax ratio to underwriting expense ratios shown elsewhere in this circular would result in double counting.

Source: Insurance Expense Exhibit data for calendar year 2006 from A.M. Best.

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INSURANCE SERVICES OFFICE, INC.

2007 Tax Rates by State†

(1) (2)

Premium Tax

State	Foreign Rate		Domestic Rate	
Alabama	3.60%	a	3.60%	a
Alaska	2.70%		2.70%	
Arizona	2.20%	b	2.20%	b
Arkansas	2.50%		2.50%	
California	2.35%		2.35%	
Colorado	2.00%	d	2.00%	d
Connecticut	1.75%		1.75%	
Delaware	1.75%		1.75%	
District of Columbia	1.70%		1.70%	
Florida	1.75%		1.75%	
Georgia	2.25%		2.25%	
Hawaii	4.27%	k	4.27%	k
Idaho	2.10%	n	2.10%	n
Illinois	0.50%		0.50%	
Indiana	1.30%			r
Iowa	1.00%		1.00%	
Kansas	2.00%		2.00%	
Kentucky	2.00%		2.00%	u
Louisiana	3.00%		3.00%	
Maine	2.00%		2.00%	
Maryland	2.00%		2.00%	
Massachusetts	2.28%		2.28%	
Michigan		cc		cc
Minnesota	2.00%	dd	2.00%	dd
Mississippi	3.00%		3.00%	
Missouri	2.00%		2.00%	
Montana	2.75%		2.75%	
Nebraska	1.00%		1.00%	
Nevada	3.50%	ii	3.50%	ii
New Hampshire		jj		jj
New Jersey	2.10%	ll	2.10%	ll
New Mexico	3.00%	pp	3.00%	pp
New York	2.00%	rr	2.00%	rr
North Carolina	1.90%		1.90%	
North Dakota	1.75%		1.75%	
Ohio	1.40%		1.40%	
Oklahoma	2.25%		2.25%	
Oregon		bbb		bbb
Pennsylvania	2.00%		2.00%	
Puerto Rico		fff	0.00%	ggg
Rhode Island	2.00%		2.00%	
South Carolina	1.25%		1.25%	
South Dakota	2.50%	jjj	2.50%	jjj, kkk
Tennessee	2.50%		2.50%	
Texas	1.60%		1.60%	
Utah	2.25%		2.25%	
Vermont	2.00%		2.00%	
Virginia	2.25%		2.25%	
Washington	2.00%		2.00%	
West Virginia	4.00%	rrr	4.00%	rrr
Wisconsin	0.38%	ttt		uuu
Wyoming	0.75%		0.75%	

† Tax rates do not reflect any credits for payments to guaranty fund associations or any other credits that may be available under the laws of each state.

* Applies to both foreign and domestic companies unless otherwise noted.

See State Notes starting on Sheet 2.

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Vanliner Insurance Company
Arkansas Commercial Lines Manual
Division Three - Crime and Fidelity
ISO / Bureau Reference Filing Numbers

Manualholder Notice	Filing Reference #
Multistate:	
CR-MU-2007-RU-001	CR-2006-ORU06
CR-MU-2002-CRES-001	RP-2001-RCC01
CR-MU-2007-RRP-001	RP-2006-RRP06
CR-MU-2007-CRP-001	RP-2006-RCR06
CR-MU-2002-KRIRPM-001	RP-2001-RKR01
CR-MU-2008-LC-001	CR-2007-RLA1
CR-MU-2007-FO-001	CR-2006-OFR06
Arkansas:	
CR-AR-2007-RU-001	CR-2006-ORU06
CR-AR-2002-CRES-001	RP-2001-RCC01
CR-AR-2007-RRP-001	RP-2006-RRP06
CR-AR-2007-CRP-001	RP-2006-RCR06
CR-AR-2002-KRIRPM-001	RP-2001-RKR01
CR-AR-2008-LC-001	CR-2007-RLA1
CR-AR-2007-FO-002	CR-2006-OFR06

Vanliner Insurance Company
Multistate Commercial Lines Manual
Division Three - Crime and Fidelity
Vanliner Insurance Company Forms

Form Number	Form Title
VL0000 08 89 Doc. No. 14344 06/01	Manuscript Endorsement Privacy Policy

Vanliner Insurance Company
Commercial Lines Manual
Division Three - Crime and Fidelity - Multistate Rules

Rule 9: Policy Writing Minimum Premium

A	Prepaid Policies	\$100
B	Annual Premium Payment Plan Policies or Continuous Policies	\$100

Rule 11: Premium Changes

- B Additional Premiums
 - 4 Waiver of Premium
In the event of a policy change that generates a premium change Vanliner will bill the full additional premium or credit the insured with the full return premium no matter how small the premium difference is i.e., there is no size of change where Vanliner will waive the premium change amount.

- C Return Premiums
 - 4 Waiver of Premium
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Vanliner Insurance Company
 Commercial Lines Manual
 Division Three - Crime and Fidelity - State Exceptions

Rule 1: Application of this Division

D. Company Rates/ISO Loss Costs

3 Loss Cost Conversion - Loss Cost Multiplier

Policies effective on or after	LCM
7/1/2008	1.874

Rounding Rule - Base rates are calculated by multiplying the ISO loss cost times the Vanliner loss cost multiplier and rounding to 3 places.

4 Expected Loss Ratio

Policies effective on or after	
7/1/2008	0.534

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Commercial Lines Manual
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