

SERFF Tracking Number: REGU-125746652 State: Arkansas
First Filing Company: Discover Property & Casualty Insurance State Tracking Number: EFT \$50
Company, ...
Company Tracking Number: DPC-WC-PJSP-08
TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations
Product Name: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing
Project Name/Number: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing/

Filing at a Glance

Companies: Discover Property & Casualty Insurance Company, United States Fidelity and Guaranty Company, Fidelity and Guaranty Insurance Underwriters, Inc., Fidelity and Guaranty Insurance Company

Product Name: Workers Compensation, Excess SERFF Tr Num: REGU-125746652 State: Arkansas

Workers Compensation and Employers Liability

- Policy Jacket and Signature Page Forms

Filing

TOI: 16.0 Workers Compensation

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 16.0000 WC Sub-TOI Combinations Co Tr Num: DPC-WC-PJSP-08

State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding

Author: Christina Abate

Disposition Date: 07/25/2008

Date Submitted: 07/24/2008

Disposition Status: Approved

Effective Date Requested (New): 10/01/2008

Effective Date (New): 10/01/2008

Effective Date Requested (Renewal): 10/01/2008

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Workers Compensation, Excess Workers Compensation Status of Filing in Domicile: Pending and Employers Liability - Policy Jacket and Signature Page Forms Filing

Project Number:

Domicile Status Comments: Each Company has a different State of Domicile: DP&C - IL, USF&G - MD, FGIU - WI, FGIC - IA (Not being Filed in IA).

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 07/25/2008

State Status Changed: 07/25/2008

Deemer Date:

Corresponding Filing Tracking Number:

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Filing Description:

Discover Property & Casualty Insurance Company (DP&C), United States Fidelity & Guaranty Company (USF&G), Fidelity and Guaranty Insurance Company (FGIC) and Fidelity and Guaranty Insurance Underwriters (FGIU) are submitting Policy Jackets and Signature Page forms for use with their Workers Compensation, Excess Workers Compensation and Employers Liability business in your state.

This filing includes six forms, four are new and two are replacements. We are including marked up copies to show changes. A forms list to show which forms are used for each company is also included.

An EFT amount of \$50.00 has been submitted to cover the required filing fee.

We ask that this filing become effective for all policies effective on or after October 1, 2008.

Company and Contact

Filing Contact Information

(This filing was made by a third party - insuranceregulatoryconsultantsllc)
 Rose Battles, rosebattles@ircllc.com
 50 Broad Street (941) 926-0144 [Phone]
 New York, NY 10004

Filing Company Information

| | | |
|--|-------------------------|-----------------------------|
| Discover Property & Casualty Insurance Company | CoCode: 36463 | State of Domicile: Illinois |
| 5 Batterson Park | Group Code: 164 | Company Type: |
| Farmington, CT 06032 | Group Name: | State ID Number: |
| (860) 674-2660 ext. [Phone] | FEIN Number: 36-2999370 | |
| | ----- | |

| | | |
|---|--------------------------------------|-----------------------------|
| United States Fidelity and Guaranty Company | CoCode: 25887 | State of Domicile: Maryland |
| 385 Washington Street | Group Code: 164 | Company Type: P&C |
| St. Pau, MN 55102 | Group Name: Travelers Insurance Cos. | State ID Number: |
| (890) 277-0111 ext. [Phone] | FEIN Number: 52-0515280 | |

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Fidelity and Guaranty Insurance Underwriters, CoCode: 25879 State of Domicile: Wisconsin
Inc.
385 Washington Street Group Code: 164 Company Type: P&C
St. Paul, MN 55102 Group Name: Travelers Insurance State ID Number:
Cos.
(890) 277-0111 ext. [Phone] FEIN Number: 52-0616768

Fidelity and Guaranty Insurance Company CoCode: 35386 State of Domicile: Iowa
385 Washington Street Group Code: 164 Company Type: P&C
St. Paul, MN 55102 Group Name: Travelers Insurance State ID Number:
Cos.
(890) 277-0111 ext. [Phone] FEIN Number: 42-1091525

SERFF Tracking Number: REGU-125746652 State: Arkansas
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Project Name/Number: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing/

Filing Fees

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

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|---|---------|----------------|---------------|
| Discover Property & Casualty Insurance Company | \$50.00 | 07/24/2008 | 21581193 |
| United States Fidelity and Guaranty Company | \$0.00 | 07/24/2008 | |
| Fidelity and Guaranty Insurance Underwriters, Inc. | \$0.00 | 07/24/2008 | |
| Fidelity and Guaranty Insurance Company | \$0.00 | 07/24/2008 | |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|----------|----------------|------------|----------------|
| Approved | Carol Stiffler | 07/25/2008 | 07/25/2008 |

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Disposition

Disposition Date: 07/25/2008

Effective Date (New): 10/01/2008

Effective Date (Renewal):

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 |

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| Item Type | Item Name | Item Status | Public Access |
|---------------------|---|-------------|---------------|
| Supporting Document | Uniform Transmittal Document-Property & Casualty | Approved | Yes |
| Supporting Document | Filing Authorization | Approved | Yes |
| Supporting Document | Forms List | Approved | Yes |
| Form | USF&G Excess Workers Compensation and Employers Liability Insurance Policy | Approved | Yes |
| Form | USF&G Specific and Aggregate Excess Workers Compensation and Employers Liability Insurance Policy | Approved | Yes |
| Form | DP&C Excess Workers Compensation and Employers Liability Insurance Policy | Approved | Yes |
| Form | DP&C Specific and Aggregate Excess Workers Compensation and Employers Liability Insurance Policy | Approved | Yes |
| Form | Commercial Insurance Policy - Signature Page | Approved | Yes |
| Form | DPC - Signature Page | Approved | Yes |

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 Project Name/Number: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing/

Form Schedule

| Review Status | Form Name | Form # | Edition Date | Form Type Action | Action Specific Data | Readability | Attachment |
|---------------|---|--------|--------------|-------------------------------|---|-------------|---|
| Approved | USF&G Excess Workers Compensation and Employers Liability Insurance Policy | UW1002 | 0708 | Policy/Coverage Replaced Form | Replaced Form #:0.00 UW1002 0105 Previous Filing #: | | UW1002 0708 XS WC Jacket USF&G.pdf UW1002 0708 XS WC Jacket USF&G annotated.pdf |
| Approved | USF&G Specific and Aggregate Excess Workers Compensation and Employers Liability Insurance Policy | UW1003 | 0708 | Policy/Coverage Replaced Form | Replaced Form #:0.00 UW1003 0105 Previous Filing #: | | UW1003 0708 SA EX WC Jacket USF&G.pdf UW1003 0708 SA EX WC Jacket USF&F annotated.pdf |
| Approved | DP&C Excess Workers Compensation and Employers Liability Insurance Policy | UW1008 | 0708 | Policy/Coverage New Form | | 0.00 | UW1008 0708 XS WC Jacket DP&C.pdf |
| Approved | DP&C Specific and Aggregate Excess Workers Compensation and Employers Liability | UW1009 | 0708 | Policy/Coverage New Form | | 0.00 | UW1009 0708 SA EX WC Jacket DP&C.pdf |

SERFF Tracking Number: REGU-125746652 State: Arkansas
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 Project Name/Number: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing/

Insurance Policy

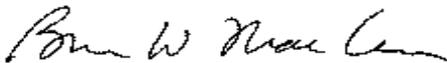
| | | | | | | |
|----------|--------------------------------------|----------------|-------|-----|------|---|
| Approved | Commercial | CL/IL 177 0708 | Other | New | 0.00 | CL IL 177 0708 Signature Page.pdf |
| | Insurance Policy - Signature Page | | | | | |
| Approved | DPC - Signature | UC 1011 0708 | Other | New | 0.00 | UC1011070 8 DPC Signature Page.pdf |
| | Page | | | | | |



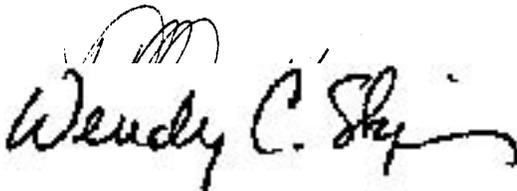
EXCESS WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY
INSURANCE POLICY

This Company has caused this policy to be signed by its President and its Corporate Secretary and counter-signed by a duly authorized representative.

United States Fidelity and Guaranty Company



BRIAN WILLIAM MACLEAN
President



Wendy C. Skjerven
Corporate Secretary



EXCESS WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY
INSURANCE POLICY

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~~UNITED STATES FIDELITY AND GUARANTY COMPANY~~

Norman P. Blake, Jr. _____ *Wendy C. Skjerven* _____
United States Fidelity and Guaranty Company

Brian William Maclean _____ *John F. Hoffen, Jr.* _____
BRIAN WILLIAM MACLEAN **Wendy C. Skjerven**
President Corporate Secretary

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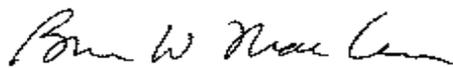
Formatted Table
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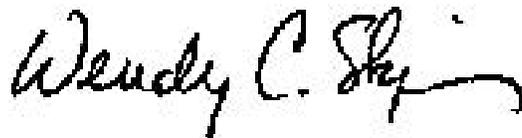
SPECIFIC AND AGGREGATE
EXCESS WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY
INSURANCE POLICY

This Company has caused this policy to be signed by its President and its Secretary and counter-signed by a duly authorized representative.

UNITED STATES FIDELITY AND GUARANTY COMPANY



Brian W. MacLean.
President



Wendy Skjerven
Secretary

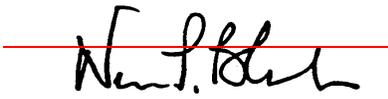


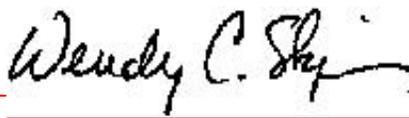
SPECIFIC AND AGGREGATE
EXCESS WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY
INSURANCE POLICY

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UNITED STATES FIDELITY AND GUARANTY COMPANY

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John F. Hoffen, Jr.
Wendy Skierven
Secretary

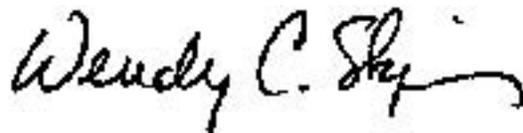
**EXCESS WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY
INSURANCE POLICY**

This company has caused this policy to be signed by its President and its Corporate Secretary and countersigned by a duly authorized representative.

DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY



Arthur W. Wright
President



Wendy C. Skjerven
Corporate Secretary

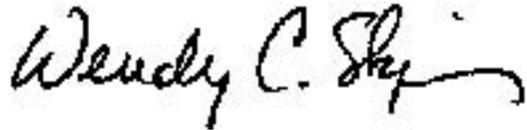
**SPECIFIC AND AGGREGATE
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AND
EMPLOYERS LIABILITY
INSURANCE POLICY**

This company has caused this policy to be signed by its President and its Corporate Secretary and countersigned by a duly authorized representative.

DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY



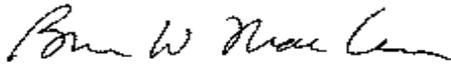
Arthur W. Wright
President



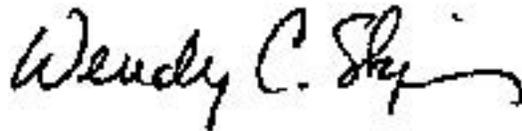
Wendy C. Skjerven
Corporate Secretary

COMMERCIAL
INSURANCE
POLICY

This company has caused this policy to be signed by its President and its Corporate Secretary and countersigned by a duly authorized representative.



BRIAN WILLIAM MACLEAN
President



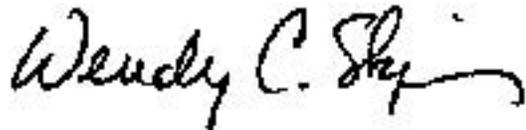
WENDY C. SKJERVEN
Corporate Secretary

DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY

This company has caused this policy to be signed by its President and its Corporate Secretary and countersigned by a duly authorized representative where required by law.



Arthur W. Wright
President



Wendy C. Skjerven
Corporate Secretary

SERFF Tracking Number: REGU-125746652 State: Arkansas
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Project Name/Number: Workers Compensation, Excess Workers Compensation and Employers Liability - Policy Jacket and Signature Page Forms Filing/

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 07/25/2008

Comments:

Attachment:

AR NAIC Transmittal.pdf

Satisfied -Name: Filing Authorization **Review Status:** Approved 07/25/2008

Comments:

Attachment:

Travelers DPC USFG FGIC FGIU.pdf

Satisfied -Name: Forms List **Review Status:** Approved 07/25/2008

Comments:

Attachment:

Forms List All Ex HI.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 | |

| | |
|----------------------|---------------------|
| 3. Group Name | Group NAIC # |
| St. Paul Travelers | 3548 |

| 4. Company Name(s) | Domicile | NAIC # | FEIN # | State # |
|--|-----------|--------|------------|---------|
| Discover Property & Casualty Insurance Company | Illinois | 36463 | 36-2999370 | |
| United States Fidelity & Guaranty Company | Maryland | 25887 | 52-0515280 | |
| Fidelity and Guaranty Insurance Company | Iowa | 35386 | 42-1091525 | |
| Fidelity and Guaranty Insurance Underwriters | Wisconsin | 25879 | 52-0616768 | |

| | |
|-----------------------------------|-----------------------|
| 5. Company Tracking Number | DPC-WC-PJSP-08 |
|-----------------------------------|-----------------------|

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

| 6. Name and address | Title | Telephone #s | FAX # | e-mail |
|--|---------|----------------|----------------|--|
| Rose Battles Insurance Regulatory Consultants 50 Broad Street, Suite 501 New York, NY 10004 | Manager | (941) 926-0144 | (212) 571-2502 | rosebattles@ircllc.com |

| | |
|--|--|
| 7. Signature of authorized filer |  |
| 8. Please print name of authorized filer | Rose Battles |

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

| | |
|---|--|
| 9. Type of Insurance (TOI) | 16.0 Workers Compensation |
| 10. Sub-Type of Insurance (Sub-TOI) | 16.0000 WC Sub-TOI Combinations |
| 11. State Specific Product code(s) (if applicable)[See State Specific Requirements] | N/A |
| 12. Company Program Title (Marketing title) | N/A |
| 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: 10/1/2008 Renewal: |
| 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 | 7/24/2008 |
| 19. Status of filing in domicile | <input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved |

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # | DPC-WC-PJSP-08

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

Discover Property & Casualty Insurance Company (DP&C), United States Fidelity & Guaranty Company (USF&G), Fidelity and Guaranty Insurance Company (FGIC) and Fidelity and Guaranty Insurance Underwriters (FGIU) are submitting Policy Jackets and Signature Page forms for use with their Workers Compensation, Excess Workers Compensation and Employers Liability business in your state.

This filing includes six forms, four are new and two are replacements. We are including marked up copies to show changes. A forms list to show which forms are used for each company is also included.

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.)**

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 # | DPC-WC-PJSP-08 | | | |
|-----------|---|-----------------------------------|---|---|--|
| 2. | This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable) | N/A | | | |
| 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 | USF&G Excess Workers Compensation and Employers Liability Insurance Policy | UW1002 0708 | <input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | UW1002 0105 | |
| 02 | USF&G Specific and Aggregate Excess Workers Compensation and Employers Liability Insurance Policy | UW1003 0708 | <input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | UW1003 0105 | |
| 03 | DP&C Excess Workers Compensation and Employers Liability Insurance Policy | UW1008 0708 | <input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 04 | DP&C Specific and Aggregate Excess Workers Compensation and Employers Liability Insurance Policy | UW1009 0708 | <input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | | |
| 05 | Commercial Insurance Policy - Signature Page | CL/IL 177 07 08 | <input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn | DPC-COMMON-D | |
| 06 | DPC - Signature Page | UC 1011 0708 | <input checked="" 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 | | |

July 10, 2008

RE: Authority for Insurance Regulatory Consultants, LLC to Process Filings on behalf of:

Discover Property & Casualty Insurance Company (DP&C)
United States Fidelity and Guaranty Company (USF&G)
Fidelity and Guaranty Insurance Company (FGIC)
Fidelity and Guaranty Insurance Underwriters, Inc. (FGIU)

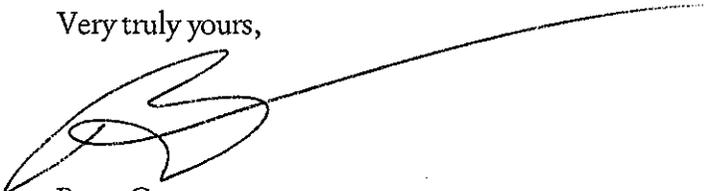
Dear Regulatory Official:

Please accept this letter as the authorization for representatives of Insurance Regulatory Consultants, LLC, to prepare and submit, on behalf of Discover Property & Casualty Insurance Company (DP&C), United States Fidelity and Guaranty Company (USF&G), Fidelity and Guaranty Insurance Company (FGIC) and Fidelity and Guaranty Insurance Underwriters, Inc. (FGIU) filings in your state. This authorization includes our permission for representatives of Insurance Regulatory Consultants, LLC, to receive and respond to any inquiries that you may raise on these filings.

This authority will continue in place until you receive, from Discover Property & Casualty Insurance Company (DP&C), United States Fidelity and Guaranty Company (USF&G), Fidelity and Guaranty Insurance Company (FGIC) and Fidelity and Guaranty Insurance Underwriters, Inc. (FGIU) a written statement that the authority has been removed.

If you have any questions on this or need any additional information, please don't hesitate to contact me.

Very truly yours,



Peter Gunn
Assistant Vice President

Workers Comp and Excess Workers Comp Forms Chart

| Company | LOB | Form | Type | New or Replacement | If Replacement, prior version |
|---------|----------------------|----------------|-----------|--------------------|-------------------------------|
| DP&C | WC | UC 1011 0708 | Sign Page | New | |
| | ExWC & EL | UW 1008 0708 | PJ & SP | New | |
| | Spec & Agg ExWC & EL | UW 1009 0708 | PJ & SP | New | |
| USF&G | WC | CL/IL 177 0708 | PJ & SP | New | |
| | ExWC & EL | UW 1002 0708 | PJ & SP | Replacement | UW 1002 0195 |
| | Spec & Agg ExWC & EL | UW 1003 0708 | PJ & SP | Replacement | UW 1003 0195 |
| FGIC | WC | CL/IL 177 0708 | PJ & SP | New | |
| FGIU | WC | CL/IL 177 0708 | PJ & SP | New | |