

SERFF Tracking Number: AGNY-125700308 State: Arkansas  
First Filing Company: American Home Assurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: AIC-08-CA-07  
TOI: 20.0 Commercial Auto Sub-TOI: 20.0002 Garage  
Product Name: Garage Coverage Program - Broad Form Named Insured Endorsement - 99217 (5/08)  
Project Name/Number: Garage Coverage Program - Broad Form Named Insured Endorsement - 99217 (5/08)/AIC-08-CA-07

## Filing at a Glance

Companies: American Home Assurance Company, American International South Insurance Company, AIG Casualty Company, Commerce and Industry Insurance Company, Granite State Insurance Company, National Union Fire Insurance Company of Pittsburgh, Pa., New Hampshire Insurance Company, The Insurance Company of the State of Pennsylvania

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TOI: 20.0 Commercial Auto  
Sub-TOI: 20.0002 Garage

SERFF Status: Closed  
Co Tr Num: AIC-08-CA-07

State Tr Num: EFT \$50  
State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,  
Llyweyia Rawlins

Author: Joseph Russo  
Date Submitted: 08/06/2008

Disposition Date: 08/08/2008  
Disposition Status: Approved  
Effective Date (New): 08/08/2008  
Effective Date (Renewal):

Effective Date Requested (New): 07/25/2008

Effective Date Requested (Renewal):

State Filing Description:

## General Information

Project Name: Garage Coverage Program - Broad Form Named Insured Endorsement - 99217 (5/08)

Project Number: AIC-08-CA-07

Reference Organization:

Reference Title:

Filing Status Changed: 08/08/2008

State Status Changed: 08/08/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

The referenced companies submit for your review and approval one (1) optional endorsement to be used with ISO's Garage Coverage Program currently on file with your department.

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## Company and Contact

### Filing Contact Information

Joseph Russo, Assistant Manager Joe.Russo@AIG.com  
 175 Water Street (212) 458-7072 [Phone]  
 New York, NY 10038 (212) 458-7077[FAX]

### Filing Company Information

American Home Assurance Company	CoCode: 19380	State of Domicile: New York
70 Pine Street	Group Code:	Company Type:
New York, NY 10270	Group Name:	State ID Number:
(212) 770-7000 ext. [Phone]	FEIN Number: 13-5124990	

American International South Insurance Company	CoCode: 40258	State of Domicile: Pennsylvania
70 Pine Street	Group Code:	Company Type:
New York, NY 10270	Group Name:	State ID Number:
(212) 770-7000 ext. [Phone]	FEIN Number: 02-6008643	

AIG Casualty Company	CoCode: 19402	State of Domicile: Pennsylvania
70 Pine Street	Group Code:	Company Type:
New York, NY 10270	Group Name:	State ID Number:
(212) 770-7000 ext. [Phone]	FEIN Number: 25-1118791	

Commerce and Industry Insurance Company	CoCode: 19410	State of Domicile: New York
70 Pine Street	Group Code:	Company Type:
New York, NY 10270	Group Name:	State ID Number:
(212) 770-7000 ext. [Phone]	FEIN Number: 13-1938623	

Granite State Insurance Company	CoCode: 23809	State of Domicile: Pennsylvania
70 Pine Street	Group Code:	Company Type:
New York, NY 10270	Group Name:	State ID Number:
(212) 770-7000 ext. [Phone]	FEIN Number: 02-0140690	

National Union Fire Insurance Company of Pittsburgh, Pa.	CoCode: 19445	State of Domicile: Pennsylvania
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70 Pine Street  
New York, NY 10270  
(212) 770-7000 ext. [Phone]

Group Code:  
Group Name:  
FEIN Number: 25-0687550  
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Company Type:  
State ID Number:

New Hampshire Insurance Company  
70 Pine Street  
New York, NY 10270  
(212) 770-7000 ext. [Phone]

CoCode: 23841  
Group Code:  
Group Name:  
FEIN Number: 02-0172170  
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State of Domicile: Pennsylvania  
Company Type:  
State ID Number:

The Insurance Company of the State of  
Pennsylvania  
70 Pine Street  
New York, NY 10270  
(212) 770-7000 ext. [Phone]

CoCode: 19429  
Group Code:  
Group Name:  
FEIN Number: 13-5540698  
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State of Domicile: Pennsylvania  
Company Type:  
State ID Number:

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50 per group form filing  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
AIG Casualty Company	\$50.00	08/06/2008	21820206
Commerce and Industry Insurance Company	\$0.00	08/06/2008	
The Insurance Company of the State of Pennsylvania	\$0.00	08/06/2008	
American Home Assurance Company	\$0.00	08/06/2008	
American International South Insurance Company	\$0.00	08/06/2008	
Granite State Insurance Company	\$0.00	08/06/2008	
National Union Fire Insurance Company of Pittsburgh, Pa.	\$0.00	08/06/2008	
New Hampshire Insurance Company	\$0.00	08/06/2008	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	08/08/2008	08/08/2008

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## Disposition

Disposition Date: 08/08/2008  
Effective Date (New): 08/08/2008  
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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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty	Approved	Yes
<b>Form</b>	Broad Form Named Insured 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	Broad Form Named Insured Endorsement	99217	5/08	Endorsement/Amendment/Conditions			99217 (5-08).pdf

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ENDORSEMENT #**

This endorsement, effective 12:01 A.M. forms a part of Policy

No. issued to by

**BROAD FORM NAMED INSURED**

*This endorsement modifies insurance provided under the following:*

**GARAGE COVERAGE FORM**

**Policy Declarations, "Named Insured"** is revised to include:

"Named Insured" means the person or organization first named as the Named Insured on the Declarations Page of this policy (the "First Named Insured").

Named Insured also includes (1) any other person or organization named as a Named Insured on the Declarations Page; (2) any subsidiary, associated, affiliated, allied or acquired company or corporation (including subsidiaries thereof) of which any insured named as the Named Insured on the Declarations Page has more than 50% ownership interest in or exercises management or financial control over at the inception date of this policy.

However, "Named Insured" status shall only be provided to such subsidiary, associated, affiliated, allied or acquired company or corporation while involved in "garage operations", and provided that their operations have been declared to Us prior to the inception date of this policy.

\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

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## Supporting Document Schedules

<b>Satisfied -Name:</b>	Uniform Transmittal Document- Property & Casualty	<b>Review Status:</b> Approved	08/08/2008
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**Comments:**

**Attachment:**

PCTD.pdf

## Property & Casualty Transmittal Document (Revised 1/1/06)

**1. Reserved for Insurance Dept. Use Only**

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**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	

<b>3. Group Name</b>	<b>Group NAIC #</b>
American International Group, Inc.	012

4. Company Name(s)	Domicile	NAIC #	FEIN #
American Home Assurance Company	NY	19380	13-5124990
American International South Insurance Company	PA	40258	02-6008643
AIG Casualty Company	PA	19402	25-1118791
Commerce and Industry Insurance Company	NY	19410	13-1938623
Granite State Insurance Company	PA	23809	02-0140690
National Union Fire Insurance Company of Pittsburgh, Pa.	PA	19445	25-0687550
New Hampshire Insurance Company	PA	23841	02-0172170
The Insurance Company of the State of Pennsylvania	PA	19429	13-5540698

<b>5. Company Tracking Number</b>	<b>AIC-08-CA-07</b>
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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
	Joe Russo 175 Water St., 17 <sup>th</sup> Fl. New York, NY 10038	Assistant Manager	212 458-7072	212 458-7077	Joe.Russo@AIG.com

7. Signature of authorized filer	
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8. Please print name of authorized filer	Joseph Russo
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**Filing information** (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	20.0 – Commercial Auto
10.	Sub-Type of Insurance (Sub-TOI)	20.0002 - Garage
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	
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
14.	Effective Date(s) Requested	New:    Upon Approval    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	August 6, 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---

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	AIC-08-TRIPRAWC-03
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<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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The referenced companies submit for your review and approval one (1) optional endorsement to be used with ISO's Garage Coverage Program currently on file with your department.

<b>22.</b>	<b>Filing Fees</b> (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]
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<b>Check #:</b>	N/A – Fees Submitted Via EFT
<b>Amount:</b>	

\$50
\$50 per form filing per group

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

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