



SERFF Tracking Number: GRTA-125791213 State: Arkansas  
 First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: SB-AR-0808-TELL  
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
 Product Name: SB-AR-0808-TELL  
 Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

## Company and Contact

### Filing Contact Information

Christie Mayes, Sr. Product Analyst cmayes@gaic.com  
 49 E Fourth St. Dts-4 (513) 412-3963 [Phone]  
 Cincinnati, OH 45202

### Filing Company Information

Great American Alliance Insurance Company	CoCode: 26832	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 95-1542353	

-----

Great American Assurance Company	CoCode: 26344	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 15-6020948	

-----

Great American Insurance Company	CoCode: 16691	State of Domicile: Ohio
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 31-0501234	

-----

Great American Insurance Company of New York	CoCode: 22136	State of Domicile: New York
580 Walnut Street	Group Code: 84	Company Type: P&C
Cincinnati, OH 45202	Group Name:	State ID Number:
(513) 369-5000 ext. [Phone]	FEIN Number: 13-5539046	

-----

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No

*SERFF Tracking Number:*      *GRTA-125791213*                      *State:*                      *Arkansas*  
*First Filing Company:*      *Great American Alliance Insurance Company, ...*      *State Tracking Number:*      *EFT \$50*  
*Company Tracking Number:*      *SB-AR-0808-TELL*  
*TOI:*                      *01.0 Property*                      *Sub-TOI:*                      *01.0001 Commercial Property (Fire and Allied Lines)*  
  
*Product Name:*                      *SB-AR-0808-TELL*  
*Project Name/Number:*              *SB-AR-0808-TELL/SB-AR-0808-TELL*  
  
**Fee Explanation:**              **\$50.00 fee per filing.**  
**Per Company:**                      **No**



SERFF Tracking Number: GRTA-125791213 State: Arkansas  
First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: SB-AR-0808-TELL  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: SB-AR-0808-TELL  
Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	08/27/2008	08/27/2008

SERFF Tracking Number: GRTA-125791213 State: Arkansas  
First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: SB-AR-0808-TELL  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: SB-AR-0808-TELL  
Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

## Disposition

Disposition Date: 08/27/2008  
Effective Date (New): 10/15/2008  
Effective Date (Renewal): 10/15/2008  
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

SERFF Tracking Number: GRTA-125791213 State: Arkansas  
 First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: SB-AR-0808-TELL  
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
 Product Name: SB-AR-0808-TELL  
 Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes
Supporting Document	Explanatory Memorandum	Approved	Yes
Supporting Document	Supporting Docs	Approved	Yes
Form	Select Business Policy for Rural Telecommunications Companies Declarations Page	Approved	Yes
Form	Select Business Policy Rural Telecommunications Companies Enhancement	Approved	Yes
Form	Select Business Policy Telcom Flood & Earthquake Endorsement	Approved	Yes

SERFF Tracking Number: GRTA-125791213 State: Arkansas  
 First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: SB-AR-0808-TELL  
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
 Product Name: SB-AR-0808-TELL  
 Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Select Business Policy for Rural Telecommunications Companies Declarations Page	SB 87 90	09/07	Declaration Replaced s/Schedule	Replaced Form #:0.00 SB 87 90 Previous Filing #:		SB8790JH.P DF
Approved	Select Business Policy Rural Telecommunications Companies Enhancement	SB 87 91	09/07	Endorsement Replaced/Amendment/Conditions	Replaced Form #:0.00 SB 87 91 Previous Filing #:		SB8791JH.P DF
Approved	Select Business Policy Telcom Flood & Earthquake Endorsement	SB 87 92	09/07	Endorsement Replaced/Amendment/Conditions	Replaced Form #:0.00 SB 87 92 Previous Filing #:		SB8792JH.P DF



Administrative Offices  
580 Walnut Street  
Cincinnati, Ohio 45202  
Tel: 1-513-369-5000

SB 87 90 (Ed. 09 07)

Policy No. -

**SELECT BUSINESS POLICY FOR RURAL TELECOMMUNICATIONS COMPANIES**

NAMED INSURED:

POLICY PERIOD:  
To  
To

TOTAL PROPERTY PREMIUM: \$

**DEDUCTIBLE AMOUNTS:**

\$	EDP Mechanical Breakdown	\$	In Transit
	Hrs. EDP Loss of Income or Extra Expense	\$	All Other
\$	Contractor's Equipment Rental Expense		

**NOT AT A DESCRIBED PREMISES:**

Insurance is provided only for those coverages for which a Limit of Insurance has been inserted:

	Newly acquired or constructed locations	At any other location	In transit, in or on any one conveyance unit
Building	\$	\$	NOT COVERED
Business Personal Property	\$	\$	\$
Business Income	\$	NOT COVERED	NOT COVERED
Extra Expense	Included in Above Business Income Limit	NOT COVERED	NOT COVERED

**DESCRIBED PREMISES:**

At the locations specified below, insurance is provided for those coverages for which a Limit of Insurance has been inserted:

Location: Building: Address:

**BUILDING:** Limit \$ Valuation

**BUSINESS PERSONAL PROPERTY:** Limit \$ Valuation

**BUSINESS INCOME INCLUDING EXTRA EXPENSE:** Limit \$

**MORTGAGE HOLDER:**

**SUPPLEMENTARY COVERAGES**

The coverages below apply per location. If you purchase additional limits for any of these coverages at a specified location, the Limits of Insurance shown at the location will reflect your total limits, including the Limits of Insurance shown below.

**A.** The Limits of Insurance shown below are provided for the coverages listed and apply separately at each of your premises. If there is no separate deductible indicated, the Property Deductible listed as all other under the Deductible Section of this Declarations Page will apply.

- \$ Accounts Receivable
- \$ Building Ordinance or Law:
  - \$ Coverage A – Loss to Undamaged Portion of the Building
  - \$ Coverage B – Demolition Cost
  - \$ Coverage C – Increased Cost of Construction
- \$ Contractor’s Equipment:
  - \$ Any one occurrence
  - \$ Annual aggregate
- \$ Crime Coverages:
  - \$ Computer Fraud
  - \$ Calling Card Fraud
  - \$ Employee Theft – Per Loss Coverage
  - \$ Forgery or Alterations
  - \$ Funds Transfer Fraud
  - \$ Inside the Premises – Theft of Money and Securities
  - \$ Inside the Premises – Robbery and Safe Burglary of Other Property
  - \$ Outside Premises
- \$ Debris Removal
- \$ Electronic Data Processing Equipment (EDP)
  - \$ Blanket Coverage – applies to Electronic Equipment, Data, Programs and Media
  - \$ In Transit/Any Other Location
  - \$ Extra Expense
- \$ Fine Arts
- \$ Fire Department Service Charge
- \$ Fire Protection Device Recharge (other than EDP Fire Protection Device Recharge)
- \$ Installation Floater
- \$ Loss Data Preparation
- \$ Miscellaneous Tools and Equipment:
  - \$ Any one occurrence
  - \$ Any one item (coverage does not apply to any one item valued in excess of \$1,000)
- \$ Personal Property of Others
- \$ Telecommunications Industry Coverages:
  - \$ Cellular Telecommunication Equipment
  - \$ Overhead Transmission Lines and Poles (Aggregate Limit–direct and indirect loss)
  - \$ Tuning of Towers
  - \$ Underground Cables and Transmission Lines (Aggregate Limit–direct and indirect loss)
  - \$ Utility Services – Direct Damage
- \$ Valuable Papers (Other than Electronic Media)

New Employee Theft lower limit  
Default option = \$50,000

**B.** When Business Income Coverage is included in the Declarations, the following Limits of Insurance below are provided for the coverages list and apply separately at each of your premises:

- \$ Dependent Property Business Income
- \$ Ingress/Egress

§ Toll Tape  
§ Utility Services – Indirect Damage

C. The Limit of Insurance for the coverages below are the most we will pay in any one effective period, starting with the beginning of the current policy period, regardless of the number of occurrences of loss or damage or the number of premises or locations involved.

§ Earthquake (\$50,000 per occurrence deductible applies)  
§ Flood (\$50,000 per occurrence deductible applies)  
§ Pollutant Cleanup and Removal

---

**FORMS AND ENDORSEMENTS** applicable to the Coverage Part and made a part of this Policy at the time of issue are listed on the attached Forms and Endorsements Schedule, SB 88 01.

---



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

**SELECT BUSINESS POLICY  
RURAL TELECOMMUNICATIONS COMPANIES ENHANCEMENT ENDORSEMENT**

This endorsement modifies insurance provided under the following:

- COMMERCIAL CRIME COVERAGE FORM (LOSS SUSTAINED FORM)
- COMMERCIAL INLAND MARINE CONDITIONS
- CONTRACTOR'S EQUIPMENT SCHEDULED COVERAGE FORM
- CONTRACTOR'S EQUIPMENT AUTOMATIC ACQUISITION COVERAGE FORM
- SELECT BUSINESS POLICY CONDITIONS
- SELECT BUSINESS POLICY BUILDING AND PERSONAL PROPERTY COVERAGE FORM
- SELECT BUSINESS POLICY BUSINESS INCOME AND EXTRA EXPENSE COVERAGE FORM

The following is added to the **Select Business Policy Conditions**:

- A. We agree with the **Rural Utility Service** and certify that:
  1. the original policy and duplicate original policy, of which this endorsement forms a part are identical;
  2. we will mail to said service a copy of each endorsement subsequently issued to become a part of said original policy; and
  3. we will mail to said service, at least (10) days before the effective date thereof, any notice of cancellation or termination we issue concerning this Policy.

The following is added to **Commercial Crime Coverage Form (Loss Sustained Form)**:

- A. The following is added to **A. Insuring Agreements**:
  1. **Calling Card Fraud**  
  
We will pay for loss resulting directly from any fraudulent or unauthorized application for, fraudulent or unauthorized use of, or forgery of any instrument in connection with the use of, any calling card, debit card, or charge card, but only if that calling card, debit card, or charge

card was issued to you or one of your "employees" for business purposes. We will not pay for loss arising from any calling card, debit card, or charge card if you have not complied fully with all of the provisions, conditions, and other terms under which the card was issued.

The most we will pay under this Insuring Agreement for loss resulting from any one "occurrence" is the Limit of Insurance shown for this Insuring Agreement in the Declarations.

The following amends the **Commercial Inland Marine Conditions**:

- A. **Replacement Cost Valuation - No Model Year Restriction**  
  
As respects Contractor's Equipment Coverage, replacement cost valuation applies to covered property. General Conditions, **F. Valuation** of the **Commercial Inland Marine Conditions** is deleted in its entirety and replaced by the following:

**F. Valuation**

In the event of "loss" or damage covered by this Policy, we will determine the value of covered property at replacement cost (without deduction for depreciation).

We will not pay more for "loss" or damage on a "replacement cost" basis than the least of:

1. the cost to replace the lost or damaged property with other property:
  - a. of comparable material and quality; and
  - b. used for the same purpose: or
2. the amount you actually spend that is necessary to repair or replace the lost or damaged property.
3. the Limit of Insurance shown in the Declarations for Contractor's Equipment for the lost or damaged property.

In the event of "loss," the value of property will be determined as of the time of "loss."

- B. In section D. Additional Conditions, paragraph 2. Coinsurance of the Contractor's Equipment Scheduled Coverage Form or the Contractor's Equipment Automatic Acquisition Coverage Form, whichever is attached to this Policy, "replacement cost" is substituted for "actual cash value."**

The following amends the **Contractor's Equipment Scheduled Coverage Form**, or the **Contractor's Equipment Automatic Acquisition Coverage Form**, whichever is attached to this Policy:

**A. Land Motor Vehicles and Trailers Designed for Transporting Freight Coverage**

Under **A. Coverage, 2. Property Not Covered, e.** is deleted and replaced with the following:

- e. land motor vehicles and trailers designed for transporting passengers over the highway.

**B. Physical Damage Coverage for Trailers**

Under **A. Coverage, 2. Property Not Covered, i.** is deleted and replaced with the following:

- i. office furniture, fixtures and equipment.

The following are added to the Coverage Extensions in the **Select Business Policy Building and Personal Property Coverage Form**:

**A. Cellular Telecommunications Equipment**

1. You may extend the insurance that applies to **Your Building** to apply to:

- a. cellular telecommunications towers used for broadcasting or receiving, including above and below-ground foundations, antennae, dishes, de-icing equipment, guy wiring, and other permanent attachments and connections to such towers;

- b. cellular transmitting, receiving, and switching equipment;

- c. buildings used exclusively for the containment of such transmitting, receiving, switching, or other similar equipment;

- d. mobile or portable equipment used for cellular broadcasting or receiving while at or away from a covered location; and

- e. tools, spare or replacement parts, and test equipment used to service or repair property covered by this Coverage Extension that are:

- i. owned by you;

- ii. rented, leased, or regularly occupied by you and which you are legally obligated to insure.

2. Under this Coverage Extension, we will also pay for loss or damage that results directly from damage to the air conditioning or heating systems that service your cellular broadcasting and receiving equipment at a covered location, but only if the damage to the air conditioning or heating system is caused by a Covered Cause of Loss.

3. This Coverage Extension applies to loss or damage directly caused by the collapse of any tower or antennae described in 1., above, but we will not pay for loss or damage caused by or resulting from any

change or alteration to any tower, antennae, dish, or appurtenant device which results in exceeding the design load of the property. This exclusion does not apply to a temporary alteration or change that is both necessary for and incidental to necessary repairs.

4. The most we will pay under this Coverage Extension is the Limit of Insurance shown in the Declarations for this Coverage Extension, whether the loss occurs at a covered location or to personal property at any other location.

## B. Retuning of Towers

You may extend the insurance that applies to **Your Building** to apply to:

1. Retuning, including re-plumbing, your tower(s) that are damaged as a result of a Covered Cause of Loss.
2. The most we will pay under this Insuring Agreement for loss resulting from any one occurrence is the Limit of Insurance shown for this Insuring Agreement in the Declarations.

The amounts payable under these Coverage Extensions will not increase or be in addition to any other applicable Limit of Insurance.

## C. Contractors Equipment

1. You may extend the insurance provided to Your Business Personal Property to apply to your **Contractors' Equipment** that is principally operated away from the described premises.
  - a. **Covered Property**, as used in this Coverage Extension means:
    - i. your contractor's tools and equipment;
    - ii. similar property of others in your care, custody or control.

### b. Exclusions, Limitations and Related Provisions

1. Property Not Covered

The following are added to Property Not Covered in respects to this Coverage Extension:

- (1) property while loaned, leased or rented to others;
- (2) blue prints, mechanical drawings, plans or specifications;
- (3) tires and tubes, unless loss is coincidental with other covered loss;
- (4) property while underground or underwater.

2. The Exclusions and Limitation(s) sections of the **Select Business Policy Building and Personal Property Coverage Form** apply to coverage provided under this endorsement, except as provided in **b.3.** below.

3. To the extent that the Contractors' Equipment Limitation might conflict with coverage provided under this endorsement, the Contractors Equipment Limitation does not apply.

4. We will not pay for loss caused by or resulting from the weight of the load exceeding the lifting capacity of any equipment. Such lifting capacity shall be stated in the manufacturers operating specifications for the operating conditions existing at the time of loss.

### c. Limits of Insurance

The most we will pay for loss or damage in any one occurrence under this Coverage Extension is the applicable Limit of Insurance shown in the Declarations for this Coverage Extension.

The most we will pay for the total of all losses or damages arising out of all occurrences under this Coverage Extension occurring during each effective policy period is the Aggregate Limit of Insurance shown in the Declarations for this Coverage Extension.

2. You may extend the insurance that applies to Your Business Personal Property to **Miscellaneous Tools and Equipment** belonging to you or your employees valued at less than \$1,000 per item.

**a. Covered Property**, as used in this Coverage Extension, means:

1. your miscellaneous tools and equipment;
2. your employee's tools:
  - (a) while on the Insured's described premises;
  - (b) at the Insured's jobsites;
  - (c) while in transit to or from the Insured's jobsites in vehicles of the Insured.

**b. Limits of Insurance**

The most we will pay for loss or damage in any one occurrence under this Coverage Extension is the applicable Limit of Insurance shown in the Declarations for this Coverage Extension.

The most we will pay for the total of all losses or damages to any one item arising out of all occurrences under this Coverage Extension is the Limit of Insurance for any one item shown in the Declarations for this Coverage Extension.

No deductible applies to this Coverage Extension.

**3. Contractors' Equipment Rental Expense Additional Coverage**

**a. Coverage**

We will reimburse your actual expenses incurred for the rental of substitute Contractors' Equipment when such rental is made necessary:

1. by direct physical loss or damage from a Covered Cause of Loss to Contractors' Equipment as defined in item 1. of the Contractors' Equipment Coverage Extension; and

2. you use the substitute equipment to continue as nearly as practicable the normal operation on work in progress; and
3. you do not have suitable equipment that can be used for continuing or resuming operations.

**b. Coverage Period**

We will reimburse expenses incurred beginning at the time the loss or damage occurs, and terminating when the insured property has been replaced or restored to service with reasonable speed, or the need for such equipment no longer exists, whichever occurs first.

The expiration of this Policy will not cut short the reimbursement period of time.

**c. Limit of Insurance**

The most we will pay for loss or damage in any one occurrence under this Additional Coverage is the applicable Limit of Insurance shown in the Declarations for the Contractors Equipment.

The most we will pay for the total of all losses or damages arising out of all occurrences under this Additional Coverage occurring during each separate effective policy period is the Aggregate Limit of Insurance shown in the Declarations for Contractors' Equipment.

The **Contractors' Equipment Rental Expense Additional Coverage** limits are a part of, not in addition to, the Limits of Insurance applicable to the Contractors' Equipment Coverage Extension.

**d. Deductible**

In any one occurrence of loss or damage, we will subtract the amount of the Contractors' Equipment Rental Expense Deductible shown in the Declarations from the amount of loss and will pay the resulting amount or the Limit of Insurance, whichever is less.

The limits applicable to the Contractors' Equipment and Miscellaneous Tools and Equipment Coverage Extensions are in addition to the Limit of Insurance shown in the Declarations for Your Business Personal Property.

The following are added to the Coverage Extensions in the **Select Business Policy Business Income and Extra Expense Coverage Form**:

**A. Toll Tape**

1. You may extend the insurance provided under this Coverage Form to apply to your toll tape.
2. We will pay, up to the Limit of Insurance shown for this Coverage Extension in the Declarations, for the actual loss of business income that you sustain as a result of physical loss or damage to your toll tape, caused by or resulting from a Covered Cause of Loss.
3. For the purpose of this Coverage Extension, toll tape means tapes or similar data recording media used to record your revenue derived from the use of telecommunication devices.

**B. Ingress/Egress**

1. You may extend the insurance provided under this Coverage Form to apply to the actual loss of Business Income that you sustain (and, if included, reasonable and necessary extra expense) due to the necessary suspension of your operations caused by the prevention of ingress to or egress from a covered location (other than as provided in the Additional Coverage for Civil Authority) as the result of a covered loss.
2. The covered loss preventing such ingress or egress must occur within one statute mile of the covered location.
3. The Coverage Extension will apply only to the actual loss of Business Income that you sustain during the first thirty (30) consecutive days beginning on the first day the ingress or egress is denied.

The amounts payable under these Coverage Extensions will not increase or be in addition to any other applicable Limit of Insurance.

The following are added to the Coverage Extensions in the **Select Business Policy Building and Personal Property Coverage Form** and the **Select Business Policy Business Income and Extra Expense Coverage Form**:

**A. Overhead Telephone Transmission Lines and Poles**

1. You may extend the insurance provided under this Coverage Form to apply to your:
  - a. overhead telephone transmission lines; and
  - b. poles from which overhead telephone transmission lines are suspended.
2. The following Limits of Insurance and Deductibles apply to this Coverage Extension:
  - a. We will only pay for direct physical loss or damage when the amount of covered direct physical loss or damage exceeds \$25,000 as a result of any one occurrence. We will then pay only the amount of such loss that is in excess of this deductible, up to the Limit of Insurance of this Coverage Extension as shown in the Declarations.
  - b. If Business Income Coverage is indicated in the Declarations, we will pay only that part of a covered loss that begins after the first twenty-four (24) hours of the "period of restoration." We will then pay only the amount of your actual loss of Business Income up to the Limit of Insurance of this Coverage Extension as shown in the Declarations.
  - c. The most we will pay for the sum of all losses or damage to Overhead Telephone Transmission Lines and Poles, including any resulting Business Income and Extra Expense, during the effective period of this Policy, even if there is more than one occurrence during that period of time, is the Limit of Insurance shown on the Declarations for Overhead Telephone Transmission Lines and Poles.

If the first occurrence does not exhaust the Limit of Insurance, then the balance of the Limit is available for a subsequent occurrence(s).

If a single occurrence begins during the effective policy period of this Policy and continues into a subsequent policy period, the Limit of Insurance for this policy period will apply to the entire loss and no subsequent policy issued by us or a company affiliated with us will apply to that loss.

3. This Coverage Extension does not extend coverage provided by Dependent Property Business Income Coverage under the **Select Business Income and Extra Expense Coverage Form**.

#### **B. Underground Telephone Transmission Lines and Poles**

1. You may extend the insurance provided under this Coverage Form to apply to your:
  - a. underground fiber-optic communication transmission lines;
  - b. underground coaxial cables; and
  - c. other underground communication transmission lines.
2. The following Limits of Insurance and Deductibles apply to this Coverage Extension:
  - a. We will only pay for direct physical loss or damage when the amount of covered direct physical loss or damage exceeds \$25,000 as a result of any one occurrence. We will then pay only the amount of loss in excess of this deductible, up to the Limit of Insurance of this Coverage Extension as shown in the Declarations.

- b. If Business Income Coverage is indicated in the Declarations, we will pay only that part of a covered loss that begins after the first twenty-four (24) hours of the "period of restoration." We will then pay only for the amount of actual loss of Business Income up to the Limit of Insurance of this Coverage Extension as shown in the Declarations.

- c. The most we will pay for the sum of all losses or damages to Underground Telephone Transmission Lines and Poles, including any resulting Business Income and Extra Expense, during the effective period of this Policy, even if there is more than one occurrence during that period of time, is the Limit of Insurance shown on the Declarations for Underground Telephone Transmission Lines and Poles.

If the first occurrence does not exhaust the Limit of Insurance, then the balance of the Limit is available for a subsequent occurrence(s).

If a single occurrence begins during the effective period of this Policy and continues into a subsequent policy period, the Limit of Insurance for this policy period will apply to the entire loss and no subsequent policy issued by us or a company affiliated with us will apply to that loss.

3. This Coverage Extension does not extend coverage provided by Dependent Property Business Income Coverage under the **Select Business Income and Extra Expense Coverage Form**.

The amounts payable under these Coverage Extensions will not increase or be in addition to any other applicable Limit of Insurance.

This endorsement does not change any other provision of the Policy.



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**SELECT BUSINESS POLICY  
RURAL TELECOMMUNICATIONS COMPANIES  
FLOOD AND EARTHQUAKE COVERAGE ENDORSEMENT**

This endorsement modifies and is subject to the insurance provided under the following:

**SELECT BUSINESS POLICY PROPERTY COVERAGE PART**

**A. Flood Coverage**

**1. Covered Property**

Covered Property, as used in this endorsement, is the same as described in the **Select Business Policy Building and Personal Property Coverage Form** to which this endorsement is attached.

**2. Property Not Covered**

Property Not Covered is any property (other than property in transit) that is located within the "500 year flood plain," as determined by the Federal Emergency Management Agency (FEMA).

**3. Additional Covered Cause of Loss**

The following is added to the Covered Causes of Loss:

- a. Flood**, means a general and temporary condition of partial or complete inundation of normally dry land area from inland or tidal waters.
- b. Tsunami**, means a large wave or overflow of inland or tidal waters caused by an earthquake or volcanic eruption.
- c. Release of Water Impounded by a Dam**.
- d. Surface Water**, means the unusual or rapid accumulation or runoff of surface waters from any source;

- e. Mudslides**, includes mudflows caused by surface water and is similar to a river of liquid and flowing mud on the surface of normally dry land areas, as when earth is carried by a current of water and deposited along the path of the current.

All flooding in a continuous or protracted event will constitute a single flood.

**4. Exclusions, Limitations and Related Provisions**

- a.** The **Exclusions and Limitation(s)** sections of the **Select Business Policy Building and Personal Property Coverage Form** apply to coverage provided under this endorsement except as provided in **4.b.** and **4.c.** below.
- b.** To the extent that a part of the Water Exclusion might conflict with coverage provided under this endorsement, that part of the Water Exclusion does not apply.
- c.** To the extent that a tsunami causes the overflow of inland or tidal waters, the exclusion of earthquake, in the Earth Movement Exclusion, does not apply.
- d.** The Ordinance or Law Exclusion in this Coverage Part continues to apply with respect to any loss under this Cov-

erage Part including any loss under this endorsement, unless Ordinance or Law Coverage is added by endorsement.

- e. The additional cause of loss added under this endorsement does not apply to coverage(s) provided under the following:

(1) **Select Business Policy Business Income and Extra Expense Coverage Form.**

(2) **Select Business Policy Extra Expense Coverage Form.**

(3) **Select Business Policy Business Income Without Extra Expense Coverage Form.**

(4) Any other coverage form added to the Policy which provides Business Income and/or Extra Expense Coverage(s).

- f. The following exclusions and limitations are added and apply to coverage under this endorsement.

We will not pay for loss caused directly or indirectly by any of the following. Such loss is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss:

(1) **Landslide**

(2) **Presence, growth, proliferation, spread, or any activity of "fungus," wet rot, dry rot, or bacteria except as provided in Additional Cover paragraph A.5.a. below.**

(3) **Sewer and Drain Backup and Subsurface Water**

(i) water, which backs up or overflows from sewers, drains or a sump, within a building at a covered location;

(ii) water below the surface of the ground including that which exerts pressure on or flows, seeps or leaks on or into covered property.

(4) Any flooding or other cause of loss that begins before the inception of this insurance.

## **5. Additional Coverages and Coverage Extensions**

The limits for additional coverages are included in the Limits of Insurance per location stated in paragraph A.7. below. The deductible does not apply to the Additional Coverages.

### **a. "Fungus," Wet Rot, Dry Rot and Bacteria**

This Additional Coverage applies only if the "fungus," wet rot, dry rot or bacteria is the direct result of a covered "loss" from the Covered Causes of Loss listed in paragraph A.3. above and is at a covered location.

We will pay your direct physical loss to covered property at covered locations caused by:

(1) "Fungus," wet rot, dry rot or bacteria, including the cost of removal of the "fungus," wet rot, dry rot or bacteria; and

(2) The following related costs:

(i) the cost to tear out and replace any part of a building or other property to gain access to the "fungus," wet rot, dry rot or bacteria;

(ii) the cost of testing performed during the "remediation" process;

(iii) the cost of testing performed after such removal, repair, replacement or restoration is completed.

If Business Income or Extra Expense Coverage applies to the Covered Location premises; and

(1) there is a covered "suspension" of "operations" due to a covered direct physical loss from the Causes of Loss listed in paragraph A.3. above; and

- (2) "remediation" of the resulting "fungus" or bacteria is not completed by the time other repairs are completed, the "period of restoration" will be extended up to 30 days.

The most we will pay for your direct physical loss, Extra Expense and/or Business Income loss under this Additional Coverage is \$15,000. Regardless of the number of claims, number of locations, or number of occurrences of a Cause of Loss, this limit is the most we will pay for the total of all loss, damage, expenses and loss of income sustained in any effective period of the Policy.

If your policy covers Extended Business Income Coverage, it does not apply to this Additional Coverage.

#### **b. Debris Removal**

With respect to Flood Coverage, the Debris Removal Additional Coverage (and any additional limit for Debris Removal under a Limit of Insurance clause or an endorsement) is not applicable and is replaced by the following:

- (1) We will pay your expense to remove debris of covered property and other debris that is on the described premises of a covered location, when such debris is the direct result of a Covered Cause of Loss as listed in **A.3.** above. However, we will not pay to remove deposits of mud or earth from the grounds of the described premises of covered locations.
- (2) We will also pay the expense to remove debris of covered property that has floated or been removed from the described premises of a covered location by a Covered Cause of Loss as listed in **A.3.** above.

- (3) This coverage for Debris Removal, as set forth in **5.b.(1)** and **5.b.(2)** above, does not increase the applicable Limit of Insurance for Flood.

The most we will pay for the total of debris removal is the lesser of:

- (a) \$250,000; or
- (b) 25% of the amount we paid under this endorsement for direct physical loss to covered property at all covered locations caused by or resulting from the Additional Covered Cause of Loss – Flood.

This limit is the most we will pay for the sum of any and all debris removal expense as covered under this endorsement during the "effective period" of this Policy.

- c. With respect to Flood Coverage, the Coverage Extension for Newly Acquired or Constructed Property is amended by adding the following:

- (1) With respect to Flood Coverage, this Coverage Extension does not apply to any building or structure that is not fully enclosed by walls and roof.
- (2) With respect to a building or structure covered under this Coverage Extension, the amounts of coverage stated in the Coverage Extension do not apply to Flood Coverage. Instead, the most we will pay for all loss or damage to property covered under this Coverage Extension is 10% of the total of all Limits of Insurance for Flood Coverage as provided under this endorsement. Such coverage does not increase the Limit of Insurance for Flood.

- d. With respect to any applicable additional coverages and coverage extensions in the **Select Business Policy Building and Personal Property Coverage Form** to which this endorsement

is attached, other than those addressed in **5.a.** and **5.b.** above, amounts payable under such other provisions, as set forth therein, do not increase the Limit of Insurance for Flood.

## 6. Coinsurance

The Coinsurance Condition in the applicable Coverage Form does not apply to the coverage provided under this endorsement.

## 7. Limit of Insurance

The most we will pay for the sum of all loss or damage caused by or resulting from any and all Causes of Loss listed in **A.3.** above during the effective period of this Policy, even if there is more than one occurrence during that period of time, is the Limit of Insurance shown on the Declarations Page for Flood Coverage. If the first occurrence does not exhaust the Limit of Insurance, then the balance of the Limit is available for a subsequent occurrence(s).

If a single occurrence begins during the "effective period" of this Policy and continues into the "effective period" of a subsequent policy, the Limit of Insurance for this policy period will apply to the entire loss and no subsequent policy issued by us or a company affiliated with us will apply to that loss.

## 8. Ensuing Loss

In the event of covered ensuing loss, for example, loss caused by Fire, Explosion and/or Sprinkler Leakage which results from the Flood, the most we will pay, for the total of all loss or damage caused by flood, fire, explosion and sprinkler leakage, is the Limit of Insurance applicable to Fire. We will **not** pay the sum of the Fire and Flood Limits.

## 9. Deductible

The deductible for Flood Coverage applies to each occurrence of a Flood.

## a. Deductible Amount

- (1) For Direct Physical Loss or Damage, we will pay for only the amount of the adjusted loss in excess of \$50,000, up to the applicable Limit of Insurance shown on the Declarations Page for Flood Coverage.
- (2) For Business Income or "Rental Value," we will pay only for the portion of such loss beginning after the applicable 72 hour waiting period from the time of the direct physical loss. The waiting period only applies to business income and "Rental Value" if your policy covers Business Income. The waiting period does not apply to Extra Expense Coverage.

## B. Earthquake

### 1. Additional Covered Causes of Loss

The following are added to the Covered Causes of Loss:

- a. Earthquake.
- b. Volcanic Eruption, meaning the eruption, explosion or effusion of a volcano.

All Earthquake shocks or Volcanic Eruptions that occur within any 168-hour period will constitute a single Earthquake or Volcanic Eruption. The expiration of this Policy will not reduce the 168-hour period.

### 2. Exclusions, Limitations and Related Provisions

- a. The Exclusions and Limitation(s) sections of the **Select Business Policy Building and Personal Property Coverage Form** apply to coverage provided under this endorsement, except as provided in **2.b.** and **2.c.** below.
- b. To the extent that the Earth Movement Exclusion might conflict with coverage provided under this endorsement, the Earth Movement Exclusion does not apply.

- c. The exclusion of collapse, in the **Select Business Policy Building and Personal Property Coverage Form** does not apply to collapse caused by Earthquake or Volcanic Eruption.
- d. The Additional Coverage – Collapse, in the **Select Business Policy Building and Personal Property Coverage Form** does not apply to the coverage provided under this endorsement. This endorsement includes coverage for collapse caused by Earthquake or Volcanic Eruption.
- e. We will not pay for loss or damage caused directly or indirectly by any of the following:
  - (1) any Earthquake or Volcanic Eruption that begins before the inception of this insurance;
  - (2) Earth Movement (other than coverage provided by this endorsement) such as landslide, or earth sinking, rising or shifting;
  - (3) fire, explosion (other than volcanic explosion), tidal wave, tsunami, flood, surface water, water which backs up or overflows from a sewer, drain or sump, water below the surface of the ground (including that which flows, leaks or seeps on or into covered property), mudslide or mudflow, release of water impounded by a dam, even if attributable to an Earthquake or Volcanic Eruption.

Such loss is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss.

- f. The additional cause of loss added under this endorsement does not apply to coverage(s) provided under the following:
  - (1) **Select Business Policy Business Income and Extra Expense Coverage Form.**
  - (2) **Select Business Policy Extra Expense Coverage Form.**

(3) **Select Business Policy Business Income without Extra Expense Coverage Form.**

(4) Any other coverage form added to the Policy which provides Business Income and/or Extra Expense Coverage(s).

g. The Ordinance or Law Exclusion in this Coverage Part continues to apply with respect to any loss under this Coverage Part including any loss under this endorsement, unless Ordinance or Law Coverage is added by endorsement.

h. Under this Coverage Part, as set forth under Property Not Covered in the **Select Business Policy Building and Personal Property Coverage Form** to which this endorsement is attached, land is not covered property, nor is the cost of excavations, grading, backfilling or filling. Therefore, coverage under this endorsement does not include the cost of restoring or re-planting land.

### 3. Limit of Insurance

The most we will pay for the sum of all loss or damage caused by or resulting from any and all Causes of Loss listed in B.1. above during the "effective period" of this Policy is the Limit of Insurance shown for Earthquake on the Declarations Page. If the first occurrence does not exhaust the Limit of Insurance, then the balance of the Limit is available for a subsequent occurrence(s).

If a single occurrence begins during the "effective period" of this Policy and continues into the "effective period" of any subsequent policy, the Limit of Insurance for this Policy will apply to the entire event. No subsequent policy issued by us or a company affiliated with us will apply to that loss.

#### a. Deductible

The deductible applies to each occurrence of an Earthquake or Volcanic Eruption covered under this endorsement.

## Deductible Amount

- (1) For Direct Physical Loss or Damage, we will pay for only the amount of the adjusted loss in excess of \$50,000, up to the applicable Limit of Insurance shown on the Declarations Page for Flood Coverage.
- (2) For Business Income or "Rental Value," we will pay only for the portion of such loss beginning after the applicable 72 hour waiting period from the time of the direct physical loss. The waiting period only applies to business income and "Rental Value" if your policy covers Business Income. The waiting period does not apply to Extra Expense Coverage.

## 4. Ensuing Loss

If a Cause of Loss (such as fire) is covered by means of an exception to the Earth Movement Exclusion, in the **Select Business Building and Personal Property Coverage Form**, we will also pay for the loss or damage caused by that other Covered Cause of Loss. But the most we will pay, for the total of all loss or damage caused by the Earthquake, Volcanic Eruption and other Covered Cause of Loss, is the Limit of Insurance applicable to such other Covered Cause of Loss. We will **not** pay the sum of the two Limits.

## C. Definitions

- a. **"100 year flood plain"** means a geographic area where the water surface elevation resulting from a flood has at least a

1% chance of equaling or exceeding the elevation of that geographic area in a given year, according to FEMA. The FEMA designations for such Special Flood Hazard areas include: A, A1 to A30, A-99, AE, AO, AH, AR, AR/A, AR/AE, AR/A1 to A30, AR/AH, AR/AO, V1 to V30, VE, and XFUT.

- b. **"500 year flood plain"** means a geographic area where there is a 0.2% or greater chance of flooding in a given year, according to FEMA. The FEMA designations for such areas include: B, XB, X500 and on a FEMA Flood Rate Map, shaded X.

The term "500 year flood plain" as used in this endorsement, includes the area that is within the "100 year flood plain."

- c. **"Remediation"** means:

- (1) the tearing out and replacing any part of the building or other property to gain access to the "fungus," wet rot, dry rot or bacteria;
- (2) the removal of "fungus," wet rot, dry rot or bacteria;
- (3) testing performed during the remediation process; and/or
- (4) testing performed after such removal, repair or restoration is complete.

- d. **"Effective Period"**

Effective Period of the Policy begins at the inception date of the Policy and ends at the earlier of the expirations date or cancellation of the Policy.

*SERFF Tracking Number:*      *GRTA-125791213*                      *State:*                      *Arkansas*  
*First Filing Company:*      *Great American Alliance Insurance Company, ...*      *State Tracking Number:*      *EFT \$50*  
*Company Tracking Number:*      *SB-AR-0808-TELL*  
*TOI:*                      *01.0 Property*                      *Sub-TOI:*                      *01.0001 Commercial Property (Fire and Allied Lines)*  
  
*Product Name:*                      *SB-AR-0808-TELL*  
*Project Name/Number:*              *SB-AR-0808-TELL/SB-AR-0808-TELL*

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: GRTA-125791213 State: Arkansas  
First Filing Company: Great American Alliance Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: SB-AR-0808-TELL  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: SB-AR-0808-TELL  
Project Name/Number: SB-AR-0808-TELL/SB-AR-0808-TELL

## Supporting Document Schedules

<b>Satisfied -Name:</b> Uniform Transmittal Document-Property & Casualty	<b>Review Status:</b> Approved	08/27/2008
<b>Comments:</b>		
<b>Attachment:</b> ar tell pctd-1.pdf		
<b>Satisfied -Name:</b> Cover Letter	<b>Review Status:</b> Approved	08/27/2008
<b>Comments:</b>		
<b>Attachment:</b> sb cover letter AR.pdf		
<b>Satisfied -Name:</b> Explanatory Memorandum	<b>Review Status:</b> Approved	08/27/2008
<b>Comments:</b>		
<b>Attachment:</b> Explanatory Memorandum - Telcom SBP Forms-0907.pdf		
<b>Satisfied -Name:</b> Supporting Docs	<b>Review Status:</b> Approved	08/27/2008
<b>Comments:</b>		
<b>Attachment:</b> AR pcffs1.pdf		

## Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b> 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> Great American Insurance Group	<b>Group NAIC #</b> 084
--	----------------------------

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Great American Insurance Company	Ohio	16691	31-0501234	
Great American Insurance Company of NY	New York	22136	13-5539046	
Great American Assurance Company	Ohio	26344	15-6020948	
Great American Alliance Ins Company	Ohio	26832	95-1542353	

<b>5. Company Tracking Number</b>	<b>SB-AR-0808-TELL</b>
-----------------------------------	------------------------

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

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Christie Mayes, AFIS 49 E 4 <sup>th</sup> St. Suite DN6 Cincinnati, OH 45202	Sr. Product Analyst	513-412-3963	513-333-6996	cmayes@gaic.com

7. Signature of authorized filer	<i>Christie Mayes IDW</i>
8. Please print name of authorized filer	Christie Mayes

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

9.	Type of Insurance (TOI)	1.0000 Property
10.	Sub-Type of Insurance (Sub-TOI)	1.0001 Commercial Property
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	Select Business Policy
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" 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: 10/15/2008      Renewal: 10/15/2008

## Property & Casualty Transmittal Document---

<b>15.</b>	<b>Reference Filing?</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>16.</b>	<b>Reference Organization (if applicable)</b>			
<b>17.</b>	<b>Reference Organization # &amp; Title</b>			
<b>18.</b>	<b>Company's Date of Filing</b>	08/26/2008		
<b>19.</b>	<b>Status of filing in domicile</b>	<input type="checkbox"/> Not Filed	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	SB-AR-0808-TELL
------------	--	-----------------

<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]
------------	--

The purpose of this filing is to file revised forms for use on our Telcom Insurance Group program designed to cover the specific exposures of small and rural telephone cooperatives and commercial companies. The forms are used in combination with our previously filed and approved Select Business Policy coverage forms.

<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]
------------	---

**Check #:** EFT  
**Amount:** \$50.00

**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.)**

Specialty Operations  
49 East Fourth Street  
Dixie Terminal South Building  
4<sup>th</sup> Floor  
Cincinnati, OH 45202-3803  
PO Box 5425  
Cincinnati, OH 45201-5425  
513.287.8100 ph  
513.333.6996 fax



August 26, 2008

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

RE: Great American Insurance Company	084-16691	31-0501234
Great American Alliance Insurance Company	084-26832	95-1542353
Great American Assurance Company	084-26344	15-6020948
Great American Insurance Company of New York	084-22136	13-5539046
Commercial Property – Select Business Policy Form Company File # <u>SB-AR-0808-TELL</u>		

To Whom It May Concern:

The Great American Insurance Group, consisting of the aforementioned companies, hereby submits for your approval the enclosed revised form filing to be used with our Select Business Policy. Please see the explanatory memorandum for additional details.

Please find enclosed, for review, the following:

1. An Explanatory Memorandum.
2. Copies of the Form Pages.
3. Any Appropriate State Transmittals.

We propose that this filing be applicable to all policies written on or after October 15, 2008. Please return the duplicate of this letter to acknowledge approval and confirm your action. A self-addressed, stamped envelope is enclosed for your convenience.

Sincerely,  
*Christie M. Mayes*

Christie M. Mayes, AFIS  
Sr. Product Analyst  
Phone: (513) 412-3963  
Fax: (513) 333-6996  
Email: [cmayes@gaic.com](mailto:cmayes@gaic.com)

**EXPLANATORY MEMORANDUM  
RURAL TELECOMMUNICATIONS (TELCOM INSURANCE GROUP)  
PROGRAM FORMS**

The purpose of this filing is to file revised forms for use on our Telcom Insurance Group program designed to cover the specific exposures of small and rural telephone cooperatives and commercial companies. The forms are used in combination with our previously filed and approved Select Business Policy coverage forms.

The revised property coverage forms are:

**SB 8790 (Ed. 09/07)** – Select Business Policy for Rural Telecommunications Companies  
Declarations Page

**SB 8791 (Ed. 09/07)** – Select Business Policy Rural Telecommunications Companies  
Enhancement

**SB 8792 (Ed. 09/07)** – Select Business Policy Telcom Flood & Earthquake Endorsement

**SB 8790 (Ed. 09/07)** – Select Business Policy for Rural Telecommunications Companies  
Declarations Page

The **SB 8790** is the common declarations page to be used on all property coverage parts issued under the program. Revisions made to the declarations page are primarily minor and include:

- Removal of the \$ in front of the 24 hour EDP deductible, which was an error.
- Removal of the term Valuation from the Business Income including Extra Expense Limitation
- Removal of the edition date under SB 88 01 on the FORMS AND ENDORSEMENTS statement.
- Supplementary Coverages were amended to show in alphabetical order.

Revisions of significance include:

- Under Supplementary Coverages, Crime Coverages, an increase in Computer Fraud from \$50,000 to \$250,000
- Addition of Funds Transfer Fraud of \$250,000

**SB 8791 (Ed. 09/07)** – Select Business Policy Rural Telecommunications Companies

The **SB 8791** modifies the previously filed and approved:

Select Business Policy Conditions,  
Select Business Policy Building and Personal Property Coverage Form,  
Select Business Policy Business Income and Extra Expense Coverage Form  
ISO's Government Crime Coverage Form  
ISO's Commercial Inland Marine Conditions – newly added to modified list  
Contractor's Equipment Scheduled Coverage Form – newly added to modified list  
Contractor's Equipment Automatic Acquisition Coverage Form – newly added to  
modified list

**EXPLANATORY MEMORANDUM  
RURAL TELECOMMUNICATIONS (TELCOM INSURANCE GROUP)  
PROGRAM FORMS**

in order to define the scope of the following additional coverages listed on the declarations, or valuation changes under commercial inland marine coverages:

Calling Card Fraud – no change over prior edition

Cellular Telecommunications Equipment – no change over prior edition

Contractors Equipment – a) modification in coverage to cover land motor vehicles and trailers designed for transporting freight, which is included under the Contractor's Equipment Coverage Forms as Property Not Covered. Land Motor Vehicles and Trailers designed for transporting passengers over the highway remain Property Not Covered.

b) modification in coverage for office trailers, which is included under the Contractor's Equipment Coverage Forms as Property Not Covered. Office furniture, fixtures and equipment remain Property Not Covered.

Replacement Cost Valuation – newly added valuation for contractor's equipment at replacement cost without restriction to equipment model year.

Retuning of Towers – no change over prior edition

Toll Tape – no change over prior edition

Ingress/Egress – no change over prior edition

Overhead Telephone Transmission Lines and Poles – no change over prior edition

Underground Cables and Transmission Lines – no change over prior edition

**SB 8792 (Ed. 09/07) – Select Business Policy Telcom Flood & Earthquake Endorsement**

The **SB 8792** defines the scope of the Earthquake and Flood coverages included on the declarations page under item C.

This form was revised to redefine flood Property Not Covered as any property (other than property in transit) that is located within the "500 year flood plain" as determined by the Federal Emergency Management Agency (FEMA). Definitions of "100 year flood plain" and "500 year flood plain" are added.

Most importantly, this revision eliminates the Other Insurance Condition modification included in the prior edition that basically stated that if the loss was also covered under a National Flood Insurance Program (NFIP) policy, or if the property was eligible for coverage under an NFIP, but no policy was purchased, our policy paid only for the amount of loss in excess of the maximum limit that can be insured under an NFIP policy.

### FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)

(Do **not** refer to the body of the filing for the forms listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	SB-AR-0808-TELL			
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> <small>(Company tracking number of rate/rule filing, if applicable)</small>	SB-AR-0808-TELL			
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	Select Business Policy for Rural Telecommunications Companies Declarations Page	SB 87 90 (Ed. 09/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	SB 87 90 (Ed. 09/03)	
02	Select Business Policy Rural Telecommunications Companies Enhancement	SB 87 91 (Ed. 09/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	SB 87 91 (Ed. 09/03)	
03	Select Business Policy Telcom Flood & Earthquake Endorsement	SB 87 92 (Ed. 09/07)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	SB 87 92 (Ed. 09/03)	
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		