Filing at a Glance

Company: Sentry Select Insurance Company

Product Name: Motor Carrier Program, Non-Passenger	SERFF Tr Num: SEPX-125774116	State: Arkansas
TOI: 20.0 Commercial Auto	SERFF Status: Closed	State Tr Num: EFT $50
Sub-TOI: 20.0004 Truckers	Co Tr Num: CA AR08617TRF01	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins
	Author: SPI SentryInsurancePC	Disposition Date: 08/18/2008
	Date Submitted: 08/13/2008	Disposition Status: Approved
Effective Date Requested (New): 01/01/2009		Effective Date (New): 01/01/2009
Effective Date Requested (Renewal): 01/01/2009		Effective Date (Renewal): 01/01/2009

State Filing Description:

General Information

Project Name: Revised Endorsements	Status of Filing in Domicile: Pending
Project Number: CA AR08617TRF01	Domicile Status Comments: Filing is pending in our domicile state of Wisconsin.
Reference Organization: N/A	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 08/18/2008	
State Status Changed: 08/13/2008	Deemer Date:
Corresponding Filing Tracking Number:	

Filing Description:

This filing revises two independent company endorsements used with our Non-Passenger Motor Carrier Program:

CA 85 02 09 08: PHYSICAL DAMAGE - DOWNTIME replaces the 03 08 edition.

CA 85 04 09 08: PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE replaces the 06 07 edition.

The following exclusion is removed from the endorsement, thereby broadening the coverage provided:

ENDORSEMENT EXCLUSIONS

We will not pay for "loss", under these coverage extensions, arising out of any dishonest or illegal act, alone or in collusion with others by you, others in your employment or service or any person or persons to whom the property may be entrusted.

We are filing this change to be applicable to policies written on or after January 1, 2009.

Company and Contact

Filing Contact Information

Dan Zastava, Compliance and Development Sr. Analyst — dan.zastava@sentry.com

1800 North Point Drive — (715) 346-8210 [Phone]

Stevens Point, WI 54481 — (715) 346-6044[FAX]

Filing Company Information

Sentry Select Insurance Company	CoCode: 21180	State of Domicile: Wisconsin
1800 North Point Drive	Group Code: 169	Company Type:
Stevens Point, WI 54481	Group Name: Sentry Insurance Group	State ID Number:
(715) 346-6000 ext. [Phone]	FEIN Number: 36-2674180	

Filing Fees

Fee Required?	Yes
Fee Amount:	$50.00
Retaliatory?	No
Fee Explanation:	$50 filing fee for form filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sentry Select Insurance Company	$50.00	08/13/2008	21920125

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	08/18/2008	08/18/2008

Disposition

Disposition Date: 08/18/2008

Effective Date (New): 01/01/2009

Effective Date (Renewal): 01/01/2009

Status: Approved

Comment:

This filing is approved contingent on receiving the filing fees the company indicates in the filing that they have sent.

Rate data does NOT apply to filing.

SERFF Tracking Number:	*SEPX-125774116*	*State:*	*Arkansas*
Filing Company:	*Sentry Select Insurance Company*	*State Tracking Number:*	*EFT $50*
Company Tracking Number:	*CA AR08617TRF01*		
TOI:	*20.0 Commercial Auto*	*Sub-TOI:*	*20.0004 Truckers*
Product Name:	*Motor Carrier Program, Non-Passenger*		
Project Name/Number:	*Revised Endorsements/CA AR08617TRF01*		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	AR - FORM FILING ABSTRACT F-1	Approved	Yes
Supporting Document	AR - NAIC FORM FILING SCHEDULE	Approved	Yes
Form	PHYSICAL DAMAGE COVERAGE - DOWNTIME	Approved	Yes
Form	PHYSICAL DAMAGE DOWNTIME	Approved	Yes
Form	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	Approved	Yes
Form	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	Approved	Yes

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	PHYSICAL DAMAGE COVERAGE - DOWNTIME	CA 85 02 09 08	09/08	Endorsement/Amendment/Conditions Replaced	Replaced Form #: CA 85 02 Previous Filing #:	0.00	CA 85 02 09 08 .PDF
Approved	PHYSICAL DAMAGE DOWNTIME	CA 85 02 ANNOTATED		Endorsement/Amendment/Conditions Replaced	Replaced Form #: Previous Filing #:	0.00	CA 85 02 ANNOTATED .PDF
Approved	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	CA 85 04 09 08	09/08	Endorsement/Amendment/Conditions Replaced	Replaced Form #: CA 85 04 Previous Filing #:	0.00	CA 85 04 09 08 .PDF
Approved	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	CA 85 04 ANNOTATED		Endorsement/Amendment/Conditions Replaced	Replaced Form #: Previous Filing #:	0.00	CA 85 04 ANNOTATED .PDF

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - DOWNTIME

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Item **A. COVERAGE - PHYSICAL DAMAGE**, the following is added:

If this policy provides Physical Damage Coverage on a truck or truck tractor, and a covered "loss" occurs to that vehicle, the coverage is extended to cover, in addition to the **LIMIT OF INSURANCE** on the vehicle, the following:

COVERAGE

We will pay for "downtime" in an amount of up to a maximum of $150 each day and a maximum of $5,000 each "loss" subject to the following:

"Downtime" coverage will begin the later of:

1. The seventh day after a covered "loss" has been reported to us; or

2. The seventh day after we have given you our agreement to pay for certain repairs and you have given the repair facility your authorization to repair your vehicle that is not road-worthy, or

3. If you choose to wait, or use your vehicle for a while before repairing it, then "downtime" coverage will begin on the seventh day after those repairs, which we had previously given our agreement to pay for, actually start.

"Downtime" coverage will cease:

1. When the covered repairs are completed by the repair facility and they determine that the vehicle is road-worthy, or

2. In the event of a total "loss" to the vehicle, the claim for physical damage coverage has been settled and payment has been issued by us.

If repairs have been completed and you dispute the quality of work done by the facility, then "downtime" coverage will continue immediately after we agree to pay for certain additional repairs by the repair facility.

DEFINITIONS

"Downtime" means the time a covered auto is out of service for repair and in the custody of a repair facility. "Downtime" payment is determined by taking the gross revenue generated by the covered auto and deducting all non-continuing expenses to reach the net loss of profit.

Policy No:	Issued To:	Effective:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - DOWNTIME

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Item **A. COVERAGE - PHYSICAL DAMAGE**, the following is added:

If this policy provides Physical Damage Coverage on a truck or truck tractor, and a covered "loss" occurs to that vehicle, the coverage is extended to cover, in addition to the **LIMIT OF INSURANCE** on the vehicle, the following:

COVERAGE

We will pay for "downtime" in an amount of up to a maximum of $150 each day and a maximum of $5,000 each "loss" subject to the following:

"Downtime" coverage will begin the later of:

1. The seventh day after a covered "loss" has been reported to us; or

2. The seventh day after we have given you our agreement to pay for certain repairs and you have given the repair facility your authorization to repair your vehicle that is not road-worthy, or

3. If you choose to wait, or use your vehicle for a while before repairing it, then "downtime" coverage will begin on the seventh day after those repairs, which we had previously given our agreement to pay for, actually start.

"Downtime" coverage will cease:

1. When the covered repairs are completed by the repair facility and they determine that the vehicle is road-worthy, or

2. In the event of a total "loss" to the vehicle, the claim for physical damage coverage has been settled and payment has been issued by us.

If repairs have been completed and you dispute the quality of work done by the facility, then "downtime" coverage will continue immediately after we agree to pay for certain additional repairs by the repair facility.

DEFINITIONS

Deleted: **EXCLUSIONS¶**
¶
We will not pay for "loss" arising out of any dishonest or illegal act, alone or in collusion with another by you, others in the employ or service of you or any person or persons to whom the property may be entrusted.
¶

"Downtime" means the time a covered auto is out of service for repair and in the custody of a repair facility. "Downtime" payment is determined by taking the gross revenue generated by the covered auto and deducting all non-continuing expenses to reach the net loss of profit.

Policy No:	Issued To:	Effective:

Deleted: CA 85 02 03 08

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Paragraph **A. COVERAGE** of the **PHYSICAL DAMAGE COVERAGE** Section is amended by the addition of the following:

If this policy provides Physical Damage Coverage for a covered “auto", and a covered “loss” occurs to the covered “auto”, the coverage extensions described in paragraphs 1 through 6 below will also apply. Except for Extension 5, Physical Damage For Temporary Substitute Autos, these coverage extensions will apply in addition the Limit Of Insurance that applies to the covered “auto”.

1. MISCELLANEOUS EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $2,500 any one occurrence, for “loss” to hand trucks, dollies, pallets, pads, covers, tarpaulins, chains, binders or any similar equipment used in the shipping or handling of property being transported.

If the equipment is being used on a “trailer” at the time of “loss”, the truck or truck tractor operating with the “trailer” must have physical damage coverage in order for this coverage to apply.

In the event of other insurance with us for the same coverage, this policy will be primary and the other policy will be excess.

2. ELECTRONIC EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $5,000 any one occurrence, for “loss” to electronic equipment including satellite communication equipment, antennas, tapes, records, discs or other similar devices used with the electronic equipment and other accessories used for audio, visual or data purposes. At the time of “loss”, the equipment must be in or on the covered ”auto”.

We will not pay for the following: equipment used to operate the covered ”auto”; radar detection devices; actual data, facts, concepts or instructions converted to a form for use with the electronic equipment nor the cost to reproduce the information.

This insurance will not apply to theft coverage if, at the time of “loss”, the covered ”auto” is unattended, unless the “loss” is the result of forced entry into the covered “auto” while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

Policy No:	Issued To:	Effective:

3. PERSONAL PROPERTY/EFFECTS

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $5,000 any one occurrence, for “loss” to personal property or effects of the "insured". At the time of “loss”, the property must be in or on the covered ”auto”.

This insurance will not apply to theft coverage if, at the time of “loss”, the covered ”auto” is unattended, unless the “loss” is the result of forced entry into the covered “auto” while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

Under this extension, we will not pay for “loss” to the following: accounts, bills, currency, deeds, evidences of debt, money, notes or securities; electronic equipment or tapes, records, discs or other similar audio, visual or data electronic devices designed for use with audio, visual or data electronic equipment; jewelry, watches, necklaces, bracelets, gems, gold, platinum, silver, furs; animals, birds, or fish or any motorized vehicle.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

4. RENTAL REIMBURSEMENT

We will pay for rental reimbursement expenses for a truck or truck tractor of up to $150 each day or $750 each week subject to a maximum of $5,000 any one occurrence, which are incurred by you for the rental of a replacement “auto”. Coverage will begin on the seventh day after the “loss” has been reported to us and will terminate, regardless of the expiration date of the policy, when the first of the following occurs:

a. The covered “auto” has been replaced;
b. The covered “auto” has been repaired;
c. The need for the replacement “auto” no longer exists; or
d. If the covered “auto” is a total “loss”, the claim has been settled and payment has been issued by us.

5. PHYSICAL DAMAGE FOR TEMPORARY SUBSTITUTE AUTOS

If this policy provides a Physical Damage Coverage on an owned truck or truck tractor and that truck or truck tractor is out of service because of its:

a. Breakdown;
b. Repair;
c. Servicing;
d. “Loss”; or
e. Destruction;

A covered “auto” for that Physical Damage Coverage shall include a truck or truck tractor you do not own while used with the permission of its owner as a temporary substitute for that covered truck or truck tractor.

For “loss” to a temporary substitute truck or truck tractor, the most we will pay is the actual cash value, repair cost or replacement cost, whichever is less.

This coverage extension will end when the first of the following occurs:

(1) When the owned covered “auto” has either been repaired or replaced;
(2) If the covered “auto” you own is a total “loss”, when the claim has been settled and payment has been made by us;
(3) 30 days from the date you take possession of the temporary substitute “auto”; or
(4) The date the policy is cancelled or expires;

6. TOWING COVERAGE

If “loss” to a covered “auto” from a covered cause of “loss” occurs and the “loss” requires the covered “auto” be towed or hauled from the site of the “loss” to a repair or salvage facility, we will also pay the actual cost to tow or haul the covered “auto” to a repair or salvage facility agreed upon by you and us.

ENDORSEMENT DEDUCTIBLE PROVISIONS

Coverages 1,2,3 as provided by this endorsement are subject to an aggregate deductible amount of $250 any one occurrence, after all other adjustments, including application of the limits, have been made. This deductible shall apply separately from any other physical damage deductible and is not reduced or waived by the application of any Combined Deductible or Single Deductible or any other deductible provision.

Coverages 4 and 6. provided by this endorsement are not subject to a separate deductible.

A temporary substitute “auto” under Coverage 5 of this endorsement is subject to the same physical damage deductible that applied to the covered owned “auto” that is temporarily out of service.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Paragraph **A. COVERAGE** of the **PHYSICAL DAMAGE COVERAGE** Section is amended by the addition of the following:

If this policy provides Physical Damage Coverage for a covered “auto", and a covered “loss” occurs to the covered “auto”, the coverage extensions described in paragraphs 1 through 6 below will also apply. Except for Extension 5, Physical Damage For Temporary Substitute Autos, these coverage extensions will apply in addition the Limit Of Insurance that applies to the covered “auto”.

1. MISCELLANEOUS EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $2,500 any one occurrence, for “loss” to hand trucks, dollies, pallets, pads, covers, tarpaulins, chains, binders or any similar equipment used in the shipping or handling of property being transported.

If the equipment is being used on a “trailer” at the time of “loss”, the truck or truck tractor operating with the “trailer” must have physical damage coverage in order for this coverage to apply.

In the event of other insurance with us for the same coverage, this policy will be primary and the other policy will be excess.

2. ELECTRONIC EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $5,000 any one occurrence, for “loss” to electronic equipment including satellite communication equipment, antennas, tapes, records, discs or other similar devices used with the electronic equipment and other accessories used for audio, visual or data purposes. At the time of “loss”, the equipment must be in or on the covered ”auto”.

We will not pay for the following: equipment used to operate the covered ”auto”; radar detection devices; actual data, facts, concepts or instructions converted to a form for use with the electronic equipment nor the cost to reproduce the information.

This insurance will not apply to theft coverage if, at the time of “loss”, the covered ”auto” is unattended, unless the “loss” is the result of forced entry into the covered “auto” while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

Policy No:	Issued To:	Effective:

Deleted: CA 85 04 06 07

3. PERSONAL PROPERTY/EFFECTS

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of $5,000 any one occurrence, for “loss” to personal property or effects of the "insured". At the time of “loss”, the property must be in or on the covered ”auto”.

This insurance will not apply to theft coverage if, at the time of “loss”, the covered ”auto” is unattended, unless the “loss” is the result of forced entry into the covered “auto” while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

Under this extension, we will not pay for “loss” to the following: accounts, bills, currency, deeds, evidences of debt, money, notes or securities; electronic equipment or tapes, records, discs or other similar audio, visual or data electronic devices designed for use with audio, visual or data electronic equipment; jewelry, watches, necklaces, bracelets, gems, gold, platinum, silver, furs; animals, birds, or fish or any motorized vehicle.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

4. RENTAL REIMBURSEMENT

We will pay for rental reimbursement expenses for a truck or truck tractor of up to $150 each day or $750 each week subject to a maximum of $5,000 any one occurrence, which are incurred by you for the rental of a replacement “auto”. Coverage will begin on the seventh day after the “loss” has been reported to us and will terminate, regardless of the expiration date of the policy, when the first of the following occurs:

a. The covered “auto” has been replaced;
b. The covered “auto” has been repaired;
c. The need for the replacement “auto” no longer exists; or
d. If the covered “auto” is a total “loss”, the claim has been settled and payment has been issued by us.

5. PHYSICAL DAMAGE FOR TEMPORARY SUBSTITUTE AUTOS

If this policy provides a Physical Damage Coverage on an owned truck or truck tractor and that truck or truck tractor is out of service because of its:

a. Breakdown;
b. Repair;
c. Servicing;
d. “Loss”; or
e. Destruction;

A covered “auto” for that Physical Damage Coverage shall include a truck or truck tractor you do not own while used with the permission of its owner as a temporary substitute for that covered truck or truck tractor.

For “loss” to a temporary substitute truck or truck tractor, the most we will pay is the actual cash value, repair cost or replacement cost, whichever is less.

This coverage extension will end when the first of the following occurs:

(1) When the owned covered “auto” has either been repaired or replaced;
(2) If the covered “auto” you own is a total “loss”, when the claim has been settled and payment has been made by us;
(3) 30 days from the date you take possession of the temporary substitute “auto”; or
(4) The date the policy is cancelled or expires;

Deleted: CA 85 04 06 07

6. TOWING COVERAGE

If “loss” to a covered “auto” from a covered cause of “loss” occurs and the “loss” requires the covered “auto” be towed or hauled from the site of the “loss” to a repair or salvage facility, we will also pay the actual cost to tow or haul the covered “auto” to a repair or salvage facility agreed upon by you and us.

Deleted: **ENDORSEMENT EXCLUSIONS¶**
¶
We will not pay for "loss", under these coverage extensions, arising out of any dishonest or illegal act, alone or in collusion with others by you, others in your employment or service or any person or persons to whom the property may be entrusted.

ENDORSEMENT DEDUCTIBLE PROVISIONS

Coverages 1,2,3 as provided by this endorsement are subject to an aggregate deductible amount of $250 any one occurrence, after all other adjustments, including application of the limits, have been made. This deductible shall apply separately from any other physical damage deductible and is not reduced or waived by the application of any Combined Deductible or Single Deductible or any other deductible provision.

Coverages 4 and 6. provided by this endorsement are not subject to a separate deductible.

A temporary substitute “auto” under Coverage 5 of this endorsement is subject to the same physical damage deductible that applied to the covered owned “auto” that is temporarily out of service.

Deleted: CA 85 04 06 07

Rate Information

Rate data does NOT apply to filing.

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty

Review Status: Approved 08/18/2008

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Satisfied -Name: AR - FORM FILING ABSTRACT F-1

Review Status: Approved 08/18/2008

Comments:

Attachment:

AR - FORM FILING ABSTRACT F-1.PDF

Satisfied -Name: AR - NAIC FORM FILING SCHEDULE

Review Status: Approved 08/18/2008

Comments:

Attachment:

AR - NAIC FORM FILING SCHEDULE.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 #
	Sentry Insurance Group	169

4.	Company Name(s)	Domicile	NAIC #	FEIN #	State #
	Sentry Select Insurance Company	WI	21180	36-2674180	

5.	Company Tracking Number	CA AR08617TRF01

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

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Dan Zastava 1800 North Point Drive Stevens Point WI 54481	Compliance and Development Analyst	715-346-6000 Ext. 8210	715-346-6044	dan.zastava@sentry.com

7.	Signature of authorized filer	Dan Zastava
8.	Please print name of authorized filer	Dan Zastava

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)**	20.0004 Truckers			
11.	**State Specific Product code(s) (if applicable) [See State Specific Requirements]**				
12.	**Company Program Title** (Marketing Title)	Motor Carrier Program, Non-Passenger			
13.	**Filing Type**	☐ Rate/Loss Cost ☐ Rules ☐ Rates/Rules ☒ Forms ☐ Combination Rates/Rules/Forms ☐ Withdrawal ☐ Other (give description)			
14.	**Effective Date(s) Requested**	New:	1/1/09	Renewal:	1/1/09
15.	**Reference Filing?**	☐ Yes ☒ No			
16.	**Reference Organization** (if applicable)	N/A			
17.	**Reference Organization # & Title**	N/A			
18.	**Company's Date of Filing**	8/13/08			
19.	**Status of filing in domicile**	☐ Not Filed ☒ Pending ☐ Authorized ☐ Disapproved			

© 2007 National Association of Insurance Commissioners

Property & Casualty Transmittal Document

20.	**This filing transmittal is part of Company Tracking #**	CA AR08617TRF01

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

This filing revises two independent company endorsements used with our Non-Passenger Motor Carrier Program:

CA 85 02 09 08: PHYSICAL DAMAGE - DOWNTIME replaces the 03 08 edition.
CA 85 04 09 08: PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE replaces the 06 07 edition.

The following exclusion is removed from the endorsement, thereby broadening the coverage provided:

ENDORSEMENT EXCLUSIONS
We will not pay for "loss", under these coverage extensions, arising out of any dishonest or illegal act, alone or in collusion with others by you, others in your employment or service or any person or persons to whom the property may be entrusted.

We are filing this change to be applicable to policies written on or after January 1, 2009.

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

© 2007 National Association of Insurance Commissioners

Form F-1
Rev. 4/96

ARKANSAS INSURANCE DEPARTMENT

FORM FILING ABSTRACT

ALL QUESTIONS MUST BE ANSWERED

Companies filing for a group may use a consolidated abstract if all forms are identical.

1. Date Filed August 13, 2008

2. Company Name(s) Sentry Select Insurance Company

   Group Name Sentry Insurance Group NAIC No. 21180 Group No. 169

3. (a) Annual Statement Line of Business Number (Page 14) 21.2
   (b) Class of Business Motor Carrier Program, Non-Passenger
   © Coverages Affected Physical Damage

4. (a) Name of Advisory Organization, if any ISO
   (b) Affiliations with Advisory Organization: Member (☐) Subscriber (☒)

5. Is this a reference filing? Yes (☐) No (☒) If yes, please provide the following:
   (a) Name of Advisory Organization (or Affiliated Company)
   N/A
   (b) Date of Filing N/A
   © Filing Designation Number or Description N/A

PROVIDE THE INFORMATION REQUESTED ON PAGE 2 OF THIS FORM

7. Has the form(s) been approved for use in your domiciliary state and/or other states?
   Filing is pending in our domicile state of Wisconsin.

8. Is the form filed in response to or due to legislation? If so, specify legislation.
   No.

9. Is the form in response to or due to recent court decisions? If so, give citation.
   No.

THIS INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Dan Zastava

Signature

Dan Zastava

Title

715-346-8210

Telephone Number

Old Form No.	Proposed Effective Date of New Form	New Form No.	Title of the Form(s); also Indicate Withdrawals: Provide Synopsis of Coverage
CA 85 02 03 08	1/1/09	CA 85 02 09 08 09/08	PHYSICAL DAMAGE COVERAGE - DOWNTIME
		CA 85 02 ANNOTATED	PHYSICAL DAMAGE DOWNTIME
CA 85 04 06 07	1/1/09	CA 85 04 09 08 09/08	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE
		CA 85 04 ANNOTATED	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE

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 #**	CA AR08617TRF01

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	PHYSICAL DAMAGE COVERAGE - DOWNTIME	CA 85 02 09 08 09/08	☐ New ☒ Replacement ☐ Withdrawn	CA 85 02 03 08	
02	PHYSICAL DAMAGE DOWNTIME	CA 85 02 ANNOTATED	☐ New ☒ Replacement ☐ Withdrawn		
03	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	CA 85 04 09 08 09/08	☐ New ☒ Replacement ☐ Withdrawn	CA 85 04 06 07	
04	PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE	CA 85 04 ANNOTATED	☐ New ☒ Replacement ☐ Withdrawn		
05			☐ New ☐ Replacement ☐ Withdrawn		
06			☐ New ☐ Replacement ☐ Withdrawn		
07			☐ New ☐ Replacement ☐ Withdrawn		
08			☐ New ☐ Replacement ☐ Withdrawn		
09			☐ New ☐ Replacement ☐ Withdrawn		
10			☐ New ☐ Replacement ☐ Withdrawn		
11			☐ New ☐ Replacement ☐ Withdrawn		

© 2007 National Association of Insurance Commissioners