

SERFF Tracking Number: TRGR-125790866 State: Arkansas  
Filing Company: Southern Insurance Company State Tracking Number: #302548 \$100  
Company Tracking Number: 08-188AR-R  
TOI: 03.0 Personal Farmowners Sub-TOI: 03.0000 Personal Farmowners  
Product Name: Farmowner  
Project Name/Number: Equine Program/08-188

## Filing at a Glance

Company: Southern Insurance Company

Product Name: Farmowner

TOI: 03.0 Personal Farmowners

Sub-TOI: 03.0000 Personal Farmowners

Filing Type: Rate/Rule

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

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

SERFF Tr Num: TRGR-125790866 State: Arkansas

SERFF Status: Closed

Co Tr Num: 08-188AR-R

Co Status:

Author: Jerry Mobley

Date Submitted: 08/26/2008

State Tr Num: #302548 \$100

State Status: Fees verified and received

Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding

Disposition Date: 08/29/2008

Disposition Status: Filed

Effective Date (New): 10/01/2008

Effective Date (Renewal):

10/01/2008

State Filing Description:

## General Information

Project Name: Equine Program

Project Number: 08-188

Reference Organization: A.A.I.S.

Reference Title: n/a

Filing Status Changed: 08/29/2008

State Status Changed: 08/29/2008

Corresponding Filing Tracking Number:

Filing Description:

Filing our rates/rules for a new equine coverage program.

Status of Filing in Domicile: Pending

Domicile Status Comments: filed

Reference Number: n/a

Advisory Org. Circular: n/a

Deemer Date:

## Company and Contact

### Filing Contact Information

Jerry Mobley, Senior Filings Specialist

Jerry.mobley@republicgroup.com

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5525 LBJ Freeway (972) 788-6619 [Phone]  
Dallas, TX 75240 (972) 788-6609[FAX]

**Filing Company Information**

Southern Insurance Company CoCode: 19216 State of Domicile: Texas  
5525 LBJ Freeway Group Code: 3489 Company Type:  
Dallas, TX 75240 Group Name: The Republic Group State ID Number:  
(972) 788-6001 ext. [Phone] FEIN Number: 75-6021170  
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## Filing Fees

Fee Required? Yes  
Fee Amount: \$100.00  
Retaliatory? No  
Fee Explanation: Rate filing fee - \$100 for one company  
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
0000302548	\$100.00	08/20/2008

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	08/29/2008	08/29/2008

*SERFF Tracking Number:* TRGR-125790866      *State:* Arkansas  
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*TOI:* 03.0 Personal Farmowners      *Sub-TOI:* 03.0000 Personal Farmowners  
*Product Name:* Farmowner  
*Project Name/Number:* Equine Program/08-188

## **Disposition**

Disposition Date: 08/29/2008

Effective Date (New): 10/01/2008

Effective Date (Renewal): 10/01/2008

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: TRGR-125790866 State: Arkansas  
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 Project Name/Number: Equine Program/08-188

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp		Yes
Supporting Document	Filing Memo	Filed	Yes
Rate	Equine Property Endorsement	Filed	Yes
Rate	Animal Boarding Rates	Filed	Yes
Rate	Equine Liability	Filed	Yes

<i>SERFF Tracking Number:</i>	<i>TRGR-125790866</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Southern Insurance Company</i>	<i>State Tracking Number:</i>	<i>#302548 \$100</i>
<i>Company Tracking Number:</i>	<i>08-188AR-R</i>		
<i>TOI:</i>	<i>03.0 Personal Farmowners</i>	<i>Sub-TOI:</i>	<i>03.0000 Personal Farmowners</i>
<i>Product Name:</i>	<i>Farmowner</i>		
<i>Project Name/Number:</i>	<i>Equine Program/08-188</i>		

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: TRGR-125790866 State: Arkansas  
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## Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Equine Property Endorsement	FO RG R-12	New	Excep-Equine Property.pdf
Filed	Animal Boarding Rates	FO RG R-13	New	Animal Boarding rates 10 01 08.pdf
Filed	Equine Liability	FO RG R-14	New	Equine Liability Rate10 01 08.pdf

## **Additional Rules**

### **Equine Property Endorsement**

- 1. Description**  
This form is utilized on the Farm and Ranch policy to provide additional Equine coverages to the Incidental Property Coverages.
- 2. Form**  
Use FO R013
- 3. Rate**  
The premium for adding this endorsement is a flat charge of \$125.00.

**Farmowner Manual  
Company Rate Page**

Countrywide

The following is added to Rule 9.15:

**Animal Boarding Rates**

Limit per Horse (static)	Transit		Total Limit (variable)	Premium=(rate x total Rate/\$1,000 of total limit limit)/1000	
	Limit per Horse (static)	Occurr. Limit (static)		Rate/\$1,000 of total limit	limit)/1000
\$ 1,000	\$ 5,000	10,000	20.00	\$ 200	
\$ 2,500	\$ 7,500	25,000	12.00	\$ 300	
\$ 5,000	\$ 15,000	50,000	7.00	\$ 350	
\$ 7,500	\$ 20,000	75,000	6.75	\$ 506	
\$ 10,000	\$ 25,000	100,000	6.50	\$ 650	
\$ 15,000	\$ 30,000	95,000	6.00	\$ 570	
\$ 20,000	\$ 40,000	115,000	5.75	\$ 661	
\$ 25,000	\$ 50,000	120,000	5.50	\$ 660	

**Farmowner Manual  
Company Rule - Rates**

Countrywide

The following is added to Rule 9.15:

**Equine Liability**

Rates/ horse, wagon, event

GL-610	Liability Limit				Med Pay \$1,000 incl 1,000,000 Each additional \$1,000	
	100,000	300,000	500,000	1,000,000		
Private Saddle Animals (pleasure owned, used leased)						
rate/horse 1-10 animals	24.00	25.00	26.00	30.00	3.00	rate
rate/horse > 10 animals	15.00	16.00	17.00	18.00		
Horse Boarding Stables(breeding, pleasure) (attach GL-78)						
rate/horse 1-10 animals	30.00	35.00	44.00	59.00	3.00	rate
rate/horse > 10 animals	15.00	18.00	22.00	30.00		
Show and Pleasure Training Stables						
rate/horse 1-10 animals	35.00	37.00	46.00	60.00	3.00	rate
rate/horse > 10 animals	17.00	18.00	23.00	30.00		
Contest Animals (any horse used off premises in prearranged racing or speed contest)						
rate/horse	55.00	60.00	68.00	80.00	3.00	rate
Carts, Buggies or Wagons (used off premises)						
rate/cart	24.00	25.00	27.00	30.00		
Shows, Sales, Events on Premises 0-500 spectators and participants - RATES						
rate/show day	100.00	125.00	175.00	225.00	10.00	rate

Except where noted attached form GL-612

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## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-  
Property & Casualty

**Review Status:**

Filed

08/29/2008

**Comments:**

**Attachment:**

pc\_FO Equine Program rates 1008 .pdf

**Satisfied -Name:** Filing Memo

**Review Status:**

Filed

08/29/2008

**Comments:**

**Attachment:**

Filememo Equine - rates.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
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<b>3. Group Name</b>	<b>Group NAIC #</b>
Republic Group of Companies	3489

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Southern Insurance Company	Texas	19216	75-6021170	

<b>5. Company Tracking Number</b>	08-188ar-r
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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
	Jerry Mobley 5525 LBJ Freeway Dallas, TX 75240-6241	State Filings Analyst	972-788-6619	972-788-6909	<a href="mailto:Jerry.Mobley@republicGroup.com">Jerry.Mobley@republicGroup.com</a>
<b>7.</b>	Signature of authorized filer				
<b>8.</b>	Please print name of authorized filer		Jerry Mobley		

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

<b>9. Type of Insurance (TOI)</b>	3.0000 Farmowners
<b>10. Sub-Type of Insurance (Sub-TOI)</b>	5.0006 Commercial Farm and Ranch
<b>11. State Specific Product code(s)(if applicable)[See State Specific Requirements]</b>	N/a
<b>12. Company Program Title (Marketing title)</b>	Farmowners
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
<b>14. Effective Date(s) Requested</b>	New: Oct. 1, 2008      Renewal: Oct. 1, 2008
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>16. Reference Organization (if applicable)</b>	American Association of Insurance Services
<b>17. Reference Organization # &amp; Title</b>	n/a
<b>18. Company's Date of Filing</b>	August 26, 2008
<b>19. Status of filing in domicile</b>	<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>	<b>08-188ar-r</b>
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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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We are filing rates and rule pages for a new Equine program offered in our Farmowner program. Our proposed effective date to begin this program is with policies effective **October 1, 2008**.

Please refer to the filing memorandum provided for more information. This program has been filed in our domicile state of Texas.

If you have any questions, please contact me. The applicable filing fee is being mailed today. Thank you for your assistance.

<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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**Check #: 0000302548**

**Amount: \$100.00**

rate filing fee = (1 x \$100 filing fee) for one company

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

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

PC TD-1 pg 2 of 2

## RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

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

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>08-188ar-r</b>
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<b>2.</b>	<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	n/a
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Rate Increase     
  Rate Decrease     
  Rate Neutral (0%)

<b>3.</b>	<b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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<b>4a.</b>	<b>Rate Change by Company (As Proposed)</b>
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
Southern Ins.	n/a	0%	0	0	\$0		

<b>4b.</b>	<b>Rate Change by Company (As Accepted) For State Use Only</b>
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

<b>5.</b>	<b>Overall Rate Information (Complete for Multiple Company Filings only)</b>
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		COMPANY USE	STATE USE
<b>5a</b>	<b>Overall percentage rate indication (when applicable)</b>	n/a	
<b>5b</b>	<b>Overall percentage rate impact for this filing</b>	0%	
<b>5c</b>	<b>Effect of Rate Filing – Written premium change for this program</b>	\$0	
<b>5d</b>	<b>Effect of Rate Filing – Number of policyholders affected</b>	0	

<b>6.</b>	<b>Overall percentage of last rate revision</b>	Initial filing
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<b>7.</b>	<b>Effective Date of last rate revision</b>	n/a
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<b>8.</b>	<b>Filing Method of Last filing (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	File and use
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<b>9.</b>	<b>Rule # or Page # Submitted for Review</b>	<b>Replacement or withdrawn?</b>	<b>Previous state filing number, if required by state</b>
01	Company Rate Pages FO RG R12, FO RG R13, FO RG R14	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

**Southern Insurance Company  
Farm Owners Multiperil - Rates  
Filing Memorandum – Equine Program**

**Countrywide Filing**

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Separately, we have filed an enhancement endorsement, Equine Property Endorsement, FO R013, to provide additional coverages that we will offer under our Equine Program.

We are filing at this time an additional rule to provide the rate charge of \$125.00 for this property enhancement form.

Also filed are two company rate pages to provide Equine Liability and additional Animal Boarding Transit rates under Rule 9.15, Horse Boarding. We propose an effective date of **October 1, 2008** for these rating rules and enhancement form.

The rates as provided were obtained through agent input and competitive analysis of similar programs in the state. We will monitor our experience and revise the rating values as needed. We feel the rates are competitive and adequate for our farmowner operation. These additional coverages have been requested by our agents.