

SERFF Tracking Number: CNAB-125808631 State: Arkansas
 First Filing Company: Continental Insurance Company, ... State Tracking Number: EFT \$25
 Company Tracking Number: 08-F3240
 TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
 Product Name: Commercial Property
 Project Name/Number: ISO Water Exclusion Deferral/08-F3240

Filing at a Glance

Companies: Continental Insurance Company, American Casualty Company of Reading PA, National Fire Insurance Company of Hartford, Transportation Insurance Company, Valley Forge Insurance Company, Continental Casualty Company

Product Name: Commercial Property	SERFF Tr Num: CNAB-125808631	State: Arkansas
TOI: 01.0 Property	SERFF Status: Closed	State Tr Num: EFT \$25
Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)	Co Tr Num: 08-F3240	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins
	Authors: Roberta Cooper, Ruby McGhee	Disposition Date: 09/11/2008
	Date Submitted: 09/10/2008	Disposition Status: Filed
Effective Date Requested (New):		Effective Date (New): 09/11/2008
Effective Date Requested (Renewal):		Effective Date (Renewal): 09/11/2008

State Filing Description:

General Information

Project Name: ISO Water Exclusion Deferral	Status of Filing in Domicile:
Project Number: 08-F3240	Domicile Status Comments:
Reference Organization: ISO	Reference Number: CL-2008-OWEFO
Reference Title: Filing Designation Number (Water Exclusion)	Advisory Org. Circular: LI-CF-2008-215
Filing Status Changed: 09/11/2008	
State Status Changed: 09/11/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

The named companies, as subscribers to the Insurance Services Office, had the captioned revisions filed on their behalf. These revisions were announced in ISO Circular LI-CF-2008-215 dated August 18, 2008 with ISO Filing Designation Number CL-2008-OWEFO.

<i>SERFF Tracking Number:</i>	<i>CNAB-125808631</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Continental Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>08-F3240</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>ISO Water Exclusion Deferral/08-F3240</i>		

We request your approval to delay implementation of the referenced filing indefinitely.

Company and Contact

Filing Contact Information

Ruby G. McGhee, State Filing Analyst	ruby.mcghee@cna.com
333 S. Wabash	(312) 822-4344 [Phone]
Chicago, IL 60685	(312) 755-2394[FAX]

Filing Company Information

Continental Insurance Company	CoCode: 35289	State of Domicile: Pennsylvania
333 South Wabash	Group Code: 218	Company Type: Property and Casualty

37th Floor	Group Name: CNA Insurance Companies	State ID Number:
Chicago, IL 60604	FEIN Number: 13-5010440	
(312) 822-4292 ext. [Phone]	-----	

American Casualty Company of Reading PA	CoCode: 20427	State of Domicile: Pennsylvania
333 South Wabash	Group Code: 218	Company Type: Property and Casualty

37th Floor	Group Name: CNA Insurance Companies	State ID Number:
Chicago, IL 60604	FEIN Number: 23-0342560	
(312) 822-4292 ext. [Phone]	-----	

National Fire Insurance Company of Hartford	CoCode: 20478	State of Domicile: Illinois
333 South Wabash	Group Code: 218	Company Type: Property and Casualty

37th Floor	Group Name: CNA Insurance Companies	State ID Number:
Chicago, IL 60604	FEIN Number: 06-0464510	
(312) 822-4292 ext. [Phone]	-----	

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Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25.00 per group
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Continental Insurance Company	\$0.00	09/10/2008	
American Casualty Company of Reading PA	\$0.00	09/10/2008	
National Fire Insurance Company of Hartford	\$0.00	09/10/2008	
Transportation Insurance Company	\$0.00	09/10/2008	
Valley Forge Insurance Company	\$0.00	09/10/2008	
Continental Casualty Company	\$25.00	09/10/2008	22403137

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Llyweyia Rawlins	09/11/2008	09/11/2008

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Disposition

Disposition Date: 09/11/2008

Effective Date (New): 09/11/2008

Effective Date (Renewal): 09/11/2008

Status: Filed

Comment: Approval to delay implementation of the referenced filing indefinitely.

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty **Review Status:** Filed 09/11/2008

Comments:

Attachments:

08-F3240 (AR) Tranmittal.pdf

08-F3240 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 #
CNA Insurance	218

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Continental Casualty Company	IL	20443	36-2114545	
National Fire Insurance Company of Hartford	IL	20478	06-0464510	
American Casualty Company of Reading, PA	PA	20427	23-0342560	
Transportation Insurance Company	IL	20494	36-1877247	
Valley Forge Insurance Company	PA	20508	23-1620527	
The Continental Insurance Company	PA	35289	13-5010440	

5. Company Tracking Number	08-F3240
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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
	Ruby G. McGhee	State Filing Analyst	(312) 822-4344	(312) 755-2394	ruby.mcgee@cna.com
	CNA Plaza – 37S Chicago, IL 60685				
7.	Signature of authorized filer		<i>Ruby G. McGhee</i>		
8.	Please print name of authorized filer		Ruby G. McGhee		

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

9. Type of Insurance (TOI)	(01.0) Property
10. Sub-Type of Insurance (Sub-TOI)	1.0001 Commercial Property (Fire & Allied Lines)
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Commercial Property
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: Indefinite Delay Renewal: Indefinite Delay
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	09/10/2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	08-F3240
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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The named companies, as subscribers to the Insurance Services Office, had the captioned revisions filed on their behalf.

These revisions were announced in ISO Circular LI-CF-2008-215 dated August 18, 2008 with ISO Filing Designation Number **CL-2008-OWEFO**.

We request your approval to delay implementation of the referenced filing indefinitely.

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]
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Check #: N/A (EFT)
Amount: \$ 25.00

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

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

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	08-F3240			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	08-L3240			
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	ISO Filing Designation	CL-2008-OWEFO	<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	N/A	N/A
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		
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		