

SERFF Tracking Number: ASPX-125981779 State: Arkansas
Filing Company: American Reliable Insurance Company State Tracking Number: EFT \$100
Company Tracking Number: SC10 PM AR035560ARR0
TOI: 09.0 Inland Marine Sub-TOI: 09.0006 Other Personal Inland Marine
Product Name: SCO - Watercraft
Project Name/Number: SCO - Watercraft/PM AR03560ARR01

Filing at a Glance

Company: American Reliable Insurance Company

Product Name: SCO - Watercraft	SERFF Tr Num: ASPX-125981779	State: Arkansas
TOI: 09.0 Inland Marine	SERFF Status: Closed	State Tr Num: EFT \$100
Sub-TOI: 09.0006 Other Personal Inland Marine	Co Tr Num: SC10 PM AR035560ARR0	State Status: Fees verified and received
Filing Type: Rate	Co Status:	Reviewer(s): Alexa Grissom, Betty Montesi
	Author: SPI AssurantPC	Disposition Date: 01/12/2009
	Date Submitted: 01/09/2009	Disposition Status: Filed
Effective Date Requested (New): 03/01/2009		Effective Date (New): 03/01/2009
Effective Date Requested (Renewal): 04/01/2009		Effective Date (Renewal): 04/01/2009

State Filing Description:

General Information

Project Name: SCO - Watercraft	Status of Filing in Domicile:
Project Number: PM AR03560ARR01	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 01/12/2009	
State Status Changed: 01/12/2009	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Due to IT programming constraints, American Reliable Insurance Company must make revisions to our currently approved Watercraft Program in Arkansas. The previous filing that was approved on 12/18/2008 under SERFF filing #ASPX-125916264. We are requesting an effective date of 3/1/09 for new and 4/1/09 for renewal business.

Clarifications:

Page WC.RP.1 - #2 Medical Payments

SERFF Tracking Number: ASPX-125981779 State: Arkansas
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We removed the wording "Maximum of \$10,000"

Page WC.RP.1 - #4 Boat Trailer

We removed the wording "Maximum of \$10,000"

Page WC.RP.2 - #6 Personal Property Coverage

We added the comment "\$100 Deductible applies to this coverage"

Page WC.RP.2 - #7 Replacement Cost Coverage

We added the comment "in addition to the Personal Property rate listed above"

Page WC.RP.3 - #10.F Premium Factors

We changed the wording to "All Arkansas Counties" for clarification.

Page WC.RP.5 - #11.C Surcharges

We added the comment "Applies to the driver with the highest number of points" for clarification.

Page WC.RP.5 - #11.C Surcharges

We added the comment "Driving after Suspension or Revocation"

Page WC.RP.5 - #11.D Surcharges

We added the comment "Ownership" for clarification

Page WC.RP.5 - #12.A Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.5 - #12.C Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.6 - #12.C Credits

We added the comment "continuous, claim free" for clarification

Page WC.RP.5 - #12.D Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.6 - #12.D Credits

We added the comment "for the previous 3 years" for clarification

Page WC.RP.8 - #14.A Deductibles

We added the comment "Applies to Physical Damage Premium" for clarification

Page WC.RP.8 - #14.B Deductibles

We added the comment "Applies to Trailer Premium" for clarification

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Company and Contact

Filing Contact Information

Wendy Sara, Regulatory Analyst wendy.sara@assurant.com
 8655 East Via De Ventura (480) 483-8666 [Phone]
 Scottsdale, AZ 85258 (480) 443-3785[FAX]

Filing Company Information

American Reliable Insurance Company CoCode: 19615 State of Domicile: Arizona
 11222 Quail Roost Dr Group Code: 19 Company Type:
 Miami, FL 33157 Group Name: Assurant, Inc. Group State ID Number:
 (305) 253-2244 ext. [Phone] FEIN Number: 41-0735002

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Reliable Insurance Company	\$100.00	01/09/2009	24922701

SERFF Tracking Number: ASPX-125981779 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	01/12/2009	01/12/2009

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Disposition

Disposition Date: 01/12/2009
 Effective Date (New): 03/01/2009
 Effective Date (Renewal): 04/01/2009
 Status: Filed
 Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
American Reliable Insurance Company	0.000%	\$0	0	\$0	0.000%	0.000%	0.000%

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Rate Rule Filing Sch	Filed	Yes
Supporting Document	P&C Filing Transmittal	Filed	Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Rate	WC.RP.1 through WC.RP.8	Filed	Yes

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Rate Information

Rate data applies to filing.

Filing Method: Prior Approval
Rate Change Type: Neutral
Overall Percentage of Last Rate Revision: -1.900%
Effective Date of Last Rate Revision: 03/01/2009
Filing Method of Last Filing: Prior Approval

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
American Reliable Insurance Company	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	WC.RP.1 through WC.RP.8	WC.RP.1 - WC.RP.8	Replacement	WC_RP_1 - WC_RP_8.PDF

**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

1. LIABILITY BODILY INJURY AND PROPERTY DAMAGE

Base Premium \$40

<u>Limit Of Liability</u>	<u>Factor</u>
\$50,000	1.35
\$100,000	1.65
\$300,000	2.30
\$500,000	3.20

“LIABILITY ONLY” POLICIES: Increase above factors by 50%

***2. MEDICAL PAYMENTS**

\$2.00 per each \$1,000

3. UNINSURED BOATOWNERS

Base Premium \$5

<u>Limit of Liability</u>	<u>Factor</u>
\$50,000	2.25
\$100,000	4.00
\$300,000	5.00
\$500,000	7.00

***4. BOAT TRAILER**

\$1.00 per \$100 of value

5. TOWING & ASSISTANCE

Base Premium \$10

<u>Limit of Liability</u>	<u>Factor</u>
\$500	1.00
\$750	1.50
\$1,000	2.50
\$2,000	3.00
\$3,000	3.50
\$4,000	4.00
\$5,000	4.50

**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

***6. PERSONAL PROPERTY COVERAGE (\$100 Deductible applies to this coverage)**

\$1.50 Per \$100 of coverage

*** 7. REPLACEMENT COST COVERAGE – PERSONAL PROPERTY COVERAGE**

.75 Per \$100 of coverage (in addition to the Personal Property rate listed above)

8. REPLACEMENT COST COVERAGE - WATERCRAFT

15% of the Physical Damage Premium

9. AGREED VALUE COVERAGE

10% of the Physical Damage Premium

***10. PREMIUM FACTORS**

A. OPERATOR AGE AND MARITAL STATUS (Applies to Physical Damage and Liability/Property Damage)

<u>Age of First Named Insured</u>	<u>Married Factor</u>	<u>Single Factor</u>
14-20	1.20	1.25
21-24	1.15	1.20
25-30	1.10	1.15
31-35	1.00	1.05
36-46	1.00	1.05
47-57	.90	.95
58-68	.95	1.00
69-79	1.00	1.05
80+	1.10	1.10
If not Operator	1.00	1.00

B. POWER TYPE (Applies to Physical Damage Premium)

<u>Type</u>	<u>Hull Factor</u>
Inboard/Outdrive	1.10
Outboard	.85
Sailboat	.75
Inboard	1.00
Jet	1.20
Outboard Jet Drive	.85
No Engine (not sailboat)	.75

**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

C. FUEL TYPE (Applies only to the Physical Damage Premium)

<u>Fuel</u>	<u>Factor</u>
Gas	1.00
Diesel	.90
Electric	.80
No Engine/Motor	1.00

D. SPEED ABILITY (Applies to the Physical Damage and Liability/Property Damage Premium)

<u>Maximum Vessel Speed</u>	<u>Factor</u>
0 – 20 MPH	.70
21 – 35	.80
36 – 50	.85
51 – 60	1.00
61 – 75	1.20
76+	1.30

E. SPECIAL WATERS FACTOR (Applies only to the Physical Damage Premium)

<u>Water Name</u>	<u>Factor</u>
Ozarks	1.25
Five Great Lakes & Seaways	1.20
Reservoirs and Straits	1.00
Rivers and Bays	1.00
Lakes	1.00
All Others	1.00
Great Salt Lake	.90

***F. COASTAL WATERS FACTOR** (Applies to the Physical Damage and Liability/Property Damage Premium)

Apply the following factor for vessels stored / moored in the listed county or state.

<u>State/ County</u>	<u>Factor</u>
All Arkansas counties	1.00

American Reliable Insurance Company Watercraft Arkansas	WC.RP.3 * Indicates a change	3/1/2009
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**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

G. AGE OF WATERCRAFT (Applies only to the Physical Damage Premium)

<u>Vessel Age</u>	<u>Factor</u>
0	.85
1	.85
2	.88
3	.92
4	.95
5	1.05
6	1.08
7	1.11
8	1.14
9	1.17
10	1.20
11	1.23
12	1.26
13	1.29
14	1.32
15	1.35
16 – 20	1.40
21+	1.45

H. COUNTY FACTOR

Apply the following factor for each county listed.

<u>County</u>	<u>Factor</u>
All counties	1.00

I. BOAT TYPE

<u>Type of Watercraft</u>	<u>Factor</u>
Bass Boat	1.15
Houseboat	1.15

**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

***11. SURCHARGES** (Applies to the Physical Damage and Liability/Property Damage Premium)

A. Corporate Owned Watercraft \$100

B. Multiple Owners

Number of Additional Owners	Factor
0	1.00
1	1.25
2	1.50
3	1.75
4+	3.00

***C. MVR Surcharges**

Applies to the driver with the highest number of points (see point definitions below):

1 – 2 Points	0%
3 – 5 Points	35%
6 – 7 Points	50%
8+ Points	100%

Point Definition

Consider all accidents and violations occurring in automobiles and watercraft.

Major Violations - DWI/Implied Consent, Hit & Run, Eluding an Officer, Felony, Homicide or Manslaughter Involving a Motor Vehicle, Careless or Reckless Driving, **Driving after Suspension or Revocation.**

Minor Violations - All other moving violations.

At-Fault Accidents - All Accidents are considered At-Fault unless the application is accompanied by a police report or insurance company loss report showing Not At-Fault.

Any Minor Violation	1 Point
Any At-Fault Accident	2 Points
Any Major Violation	4 Points

***D. Principal operator with less than 3 years **ownership** experience** **10%**

E. Watercraft loss(es) in the past 3 years

Number of Watercraft Losses	Factor
0	1.00
1	1.10
2	1.75
3+	2.50

American Reliable Insurance Company Watercraft Arkansas	WC.RP.5 * Indicates a change	3/1/2009
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**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

***12. CREDITS**

***A. Boating Course Credit** (Applies to the Physical Damage and Liability/Property Damage Premium)

Only one discount will be given regardless of the number of courses/licenses. In the event of multiple selections, we will apply the highest credit.

<u>Boating Course</u>	<u>Factor</u>
Coast Guard Auxiliary	.95
Coast Guard Course	.98
Captain's License	.95
Chapman Boating School	.98
Marine Pilot's License	.95
Merchant Marine License	.95
Power Squadron Course	.98
State & Federal Accredited Maritime Academy	.98
State Sponsored Course	.98

B. Protective Device Credit (Applies only to the Physical Damage Premium)

A credit is available if the insured watercraft has one of the following devices on their watercraft.

Only one discount will be given regardless of the number of devices. In the event of multiple selections, we will apply the highest credit.

<u>Protective Device</u>	<u>Factor</u>
Automatic Fire Extinguishing Equipment	.95
Central station Monitoring System	.95
Alarm System (High water/Fire/Theft)	.97
No Strike Lightning System	.98

***C. Transfer Credit** (Applies to the Physical Damage and Liability/Property Damage Premium) **10%**

A credit applies if the first named insured has maintained **continuous, claim free**, insurance on a watercraft for the full year preceding the effective date of coverage. This applies to new business only.

***D. Renewal Credit** (Applies to the Physical Damage and Liability/Property Damage Premium) **15%**

A credit will apply if the policy is renewed with American Reliable and is claim free **for the previous 3 years**.

American Reliable Insurance Company Watercraft Arkansas	WC.RP.6 * Indicates a change	3/1/2009
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**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

13. ALL RISK PHYSICAL DAMAGE: BOAT, EQUIPMENT & MOTOR

<u>Value</u>	<u>Premium</u>	<u>Value</u>	<u>Premium</u>
\$1-1,999	\$74	\$26,000-26,999	\$408
\$2,000-2,999	\$97	\$27,000-27,999	\$420
\$3,000-3,999	\$112	\$28,000-28,999	\$431
\$4,000-4,999	\$128	\$29,000-29,999	\$442
\$5,000-5,999	\$144	\$30,000-30,999	\$452
\$6,000-6,999	\$158	\$31,000-31,999	\$462
\$7,000-7,999	\$171	\$32,000-32,999	\$472
\$8,000-8,999	\$185	\$33,000-33,999	\$481
\$9,000-9,999	\$199	\$34,000-34,999	\$490
\$10,000-10,000	\$212	\$35,000-35,999	\$499
\$11,000-11,999	\$226	\$36,000-36,999	\$506
\$12,000-12,999	\$240	\$37,000-37,999	\$513
\$13,000-13,999	\$252	\$38,000-38,999	\$520
\$14,000-14,999	\$265	\$39,000-39,999	\$526
\$15,000-15,999	\$277	\$40,000-40,999	\$534
\$16,000-16,999	\$289	\$41,000-41,999	\$542
\$17,000-17,999	\$301	\$42,000-42,999	\$550
\$18,000-18,999	\$314	\$43,000-43,999	\$558
\$19,000-19,999	\$326	\$44,000-44,999	\$566
\$20,000-20,999	\$338	\$45,000-45,999	\$574
\$21,000-21,999	\$351	\$46,000-46,999	\$582
\$22,000-22,999	\$363	\$47,000-47,999	\$590
\$23,000-23,999	\$374	\$48,000-48,999	\$598
\$24,000-24,999	\$385	\$49,000-49,999	\$606
\$25,000-25,999	\$397	\$50,000-50,999	\$614
		Add'l	
		Rate	
		Per	
		\$1,000	\$9

**AMERICAN RELIABLE INSURANCE COMPANY
ARKANSAS WATERCRAFT PROGRAM**

***14. DEDUCTIBLES**

***A. WATERCRAFT (Applies to Physical Damage Premium)**

<u>AGE</u>	<u>DEDUCTIBLE</u>	<u>FACTOR</u>
When Hull is under 16 years old	Deductible is 1% of Coverage	
	A amount or \$250 minimum	
	1%	1.00
	2%	.95
	3%	.90
When Hull is 16+ years old	Deductible is 2% of Coverage	
	A amount or \$500 minimum	
	2%	1.00
	3%	.95
	5%	.90

***B. TRAILER (Applies to Trailer Premium)**

<u>DEDUCTIBLE</u>	<u>FACTOR</u>
\$250	1.00
\$500	.90

<i>SERFF Tracking Number:</i>	<i>ASPX-125981779</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Reliable Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
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Supporting Document Schedules

Satisfied -Name:	Rate Rule Filing Sch	Review Status:	Filed	01/12/2009
Comments:				
Attachment:	Rate Rule Filing Sch.PDF			

Satisfied -Name:	P&C Filing Transmittal	Review Status:	Filed	01/12/2009
Comments:				
Attachment:	P&C Filing Transmittal.PDF			

Satisfied -Name:	Uniform Transmittal Document- Property & Casualty	Review Status:	Filed	01/12/2009
Comments:				
Attachment:	P&C Filing Transmittal.PDF			

Bypassed -Name:	NAIC loss cost data entry document	Review Status:	Filed	01/12/2009
Bypass Reason:	NA			
Comments:				

Bypassed -Name:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Review Status:	Filed	01/12/2009
Bypass Reason:	NA			
Comments:				

PROPERTY & CASUALTY 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.)

1.	This filing transmittal is part of Company Tracking #	SC10 PM AR035560ARR0
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	
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Rate Increase
 Rate Decrease
 Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	
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4a. Rate Change by Company (As Proposed)							
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)
American Reliable Insurance Company	0	0	0	0	0	0	0

4b. Rate Change by Company (As Accepted) For State Use Only							
Company Name	Overall % Indicated Change (when Applicable)	Overall % Rate Impact	Written Premium Change for this program	# of policyholder affected for this program	Written premium for this program	Maximum %Change (where required)	Minimum %Change (where required)

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

6.	Overall percentage of last rate revision	-1.9
7.	Effective Date of last rate revision	03/01/2009
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	Prior Approval

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	WC.RP.1 - WC.RP.8 0309	<input type="checkbox"/> New <input checked="" 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	

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: <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">New Business</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Renewal Business</td> <td style="border: none;"></td> </tr> </table> f. State Filing #: g. SERFF Filing #: h. Subject Codes	New Business		Renewal Business	
New Business					
Renewal Business					

3. Group Name	Group NAIC #
Assurant, Inc. Group	0019

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
American Reliable Insurance Company	AZ	19615	41-0735002	

5. Company Tracking Number	SC10 PM AR035560ARR0
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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
	Wendy Sara 8655 East Via De Ventura Scottsdale AZ 85258	Regulatory Analyst	800-535-1333 Ext. 563	480-443-3785	wendy.sara@assurant.com

7. Signature of authorized filer	
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8. Please print name of authorized filer	Wendy Sara
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Filing Information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	09.0 Inland Marine
10.	Sub-Type of Insurance (Sub-TOI)	09.0006 Other Personal Inland Marine
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Watercraft Program
13.	Filing Type	<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)
14.	Effective Date(s) Requested	New: 03/01/2009 Renewal: 04/01/2009
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	1/9/2009
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	SC10 PM AR035560ARR0
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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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Page WC.RP.5 - #11.C Surcharges

We added the comment "Applies to the driver with the highest number of points" for clarification.

Page WC.RP.5 - #11.C Surcharges

We added the comment "Driving after Suspension or Revocation"

Page WC.RP.5 - #11.D Surcharges

We added the comment "Ownership" for clarification

Page WC.RP.5 - #12.A Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.5 - #12.C Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.6 - #12.C Credits

We added the comment "continuous, claim free" for clarification

Page WC.RP.5 - #12.D Credits

We added the comment "Applies to the Physical Damage and Liability/Property Damage Premium" for clarification.

Page WC.RP.6 - #12.D Credits

We added the comment "for the previous 3 years" for clarification

Page WC.RP.8 - #14.A Deductibles

We added the comment "Applies to Physical Damage Premium" for clarification

Page WC.RP.8 - #14.B Deductibles

We added the comment "Applies to Trailer Premium" for clarification

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]
<p>Check #: Amount:</p> <p>EFT \$100.00</p> <p style="text-align: center;">Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	

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

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 #
Assurant, Inc. Group	0019

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
American Reliable Insurance Company	AZ	19615	41-0735002	

5. Company Tracking Number	SC10 PM AR035560ARR0
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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
	Wendy Sara 8655 East Via De Ventura Scottsdale AZ 85258	Regulatory Analyst	800-535-1333 Ext. 563	480-443-3785	wendy.sara@assurant.com

7. Signature of authorized filer	
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8. Please print name of authorized filer	Wendy Sara
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Filing Information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	09.0 Inland Marine
10.	Sub-Type of Insurance (Sub-TOI)	09.0006 Other Personal Inland Marine
11.	State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12.	Company Program Title (Marketing Title)	Watercraft Program
13.	Filing Type	<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)
14.	Effective Date(s) Requested	New: 03/01/2009 Renewal: 04/01/2009
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	1/9/2009
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	SC10 PM AR035560ARR0
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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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Due to IT programming constraints, American Reliable Insurance Company must make revisions to our currently approved Watercraft Program in Arkansas. The previous filing that was approved on 12/18/2008 under SERFF filing #ASPX-125916264. We are requesting an effective date of 3/1/09 for new and 4/1/09 for renewal business.

Clarifications:

Page WC.RP.1 - #2 Medical Payments

We removed the wording "Maximum of \$10,000"

Page WC.RP.1 - #4 Boat Trailer

We removed the wording "Maximum of \$10,000"

Page WC.RP.2 - #6 Personal Property Coverage

We added the comment "\$100 Deductible applies to this coverage"

Page WC.RP.2 - #7 Replacement Cost Coverage

We added the comment "in addition to the Personal Property rate listed above"

Page WC.RP.3 - #10.F Premium Factors

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