

SERFF Tracking Number: SEPX-125987584 State: Arkansas
First Filing Company: Sentry Insurance a Mutual Company, ... State Tracking Number: EFT \$20
Company Tracking Number: GL AR09126CGF01
TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0001 Commercial General Liability
Product Name: Commercial General Liability
Project Name/Number: 2009 Multistate Delay/GL AR09126CGF01

Filing at a Glance

Companies: Sentry Insurance a Mutual Company, Middlesex Insurance Company, Sentry Casualty Company, Sentry Select Insurance Company

Product Name: Commercial General Liability SERFF Tr Num: SEPX-125987584 State: Arkansas
TOI: 17.0 Other Liability-Occ/Claims Made SERFF Status: Closed State Tr Num: EFT \$20
Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: GL AR09126CGF01 State Status: Fees verified and received
Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Edith Roberts
Author: SPI SentryInsurancePC Disposition Date: 01/14/2009
Date Submitted: 01/14/2009 Disposition Status: Non-Adoption
Effective Date Requested (New): 05/01/2009 Effective Date (New):
Effective Date Requested (Renewal): 05/01/2009 Effective Date (Renewal):
State Filing Description:

General Information

Project Name: 2009 Multistate Delay Status of Filing in Domicile:
Project Number: GL AR09126CGF01 Domicile Status Comments:
Reference Organization: ISO Reference Number: GL-2008-OFR08
Reference Title: Advisory Org. Circular:
Filing Status Changed: 01/14/2009 Deemer Date:
State Status Changed: 01/14/2009
Corresponding Filing Tracking Number:
Filing Description:

This filing is to inform your department that we wish to indefinitely delay adoption of ISO designation GL-2008-OFR08 (GL Multistate Endorsements Revision) for the following companies:

- * Sentry Insurance A Mutual Company - NAIC 169-24988
- * Middlesex Insurance Company - NAIC 169-23434
- * Sentry Select Insurance Company - NAIC 169-21180

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* Sentry Casualty Company - NAIC 169-28460

We will make a separate filing with your department once we are in a position to adopt this designation. Feel free to contact me with any questions or if you would like to discuss.

Thanks,

Dan Zastava
 Compliance/Development Analyst
 Sentry Insurance
 715-346-8210

Company and Contact

Filing Contact Information

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

1800 North Point Drive (715) 346-8210 [Phone]
 Stevens Point, WI 54481 (715) 346-6044[FAX]

Filing Company Information

Sentry Insurance a Mutual Company	CoCode: 24988	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: 39-0333950	

Middlesex Insurance Company	CoCode: 23434	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: 04-1619070	

Sentry Casualty Company	CoCode: 28460	State of Domicile: Wisconsin
1800 North Point Drive	Group Code: 169	Company Type:

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Stevens Point, WI 54481 Group Name: Sentry Insurance State ID Number:
Group
(715) 346-6000 ext. [Phone] FEIN Number: 88-0119246

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 State ID Number:
Group
(715) 346-6000 ext. [Phone] FEIN Number: 36-2674180

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Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sentry Insurance a Mutual Company	\$20.00	01/14/2009	25014698
Middlesex Insurance Company	\$0.00	01/14/2009	
Sentry Casualty Company	\$0.00	01/14/2009	
Sentry Select Insurance Company	\$0.00	01/14/2009	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Non-Adoption	Edith Roberts	01/14/2009	01/14/2009

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Disposition

Disposition Date: 01/14/2009

Effective Date (New):

Effective Date (Renewal):

Status: Non-Adoption

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

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

<i>SERFF Tracking Number:</i>	<i>SEPX-125987584</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Sentry Insurance a Mutual Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$20</i>
<i>Company Tracking Number:</i>	<i>GL AR09126CGF01</i>		
<i>TOI:</i>	<i>17.0 Other Liability-Occ/Claims Made</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>Commercial General Liability</i>		
<i>Project Name/Number:</i>	<i>2009 Multistate Delay/GL AR09126CGF01</i>		

Rate Information

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty

Review Status:

Non-adoption

01/14/2009

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

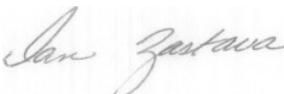
Property & Casualty Transmittal Document

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	Sentry Insurance Group				Group NAIC #	169
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
Sentry Insurance a Mutual Company	WI	24988	39-0333950			
Middlesex Insurance Company	WI	23434	04-1619070			
Sentry Casualty Company	WI	28460	88-0119246			
Sentry Select Insurance Company	WI	21180	36-2674180			

5. Company Tracking Number	GL AR09126CGF01
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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
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				
8. Please print name of authorized filer	Dan Zastava			

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

9. Type of Insurance (TOI)	17.0 Other Liability-Occ/Claims Made
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11. State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12. Company Program Title (Marketing Title)	Commercial General Liability
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: 05/01/2009 Renewal: 05/01/2009
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO
17. Reference Organization # & Title	GL-2008-OFR08: GL Multistate Endorsements Revision
18. Company's Date of Filing	1/14/09
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 #	GL AR09126CGF01
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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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Dan Zastava
 Compliance/Development Analyst
 Sentry Insurance
 715-346-8210

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]				
<table style="width: 100%; border: none;"> <tr> <td style="width: 15%;">Check #:</td> <td>EFT</td> </tr> <tr> <td>Amount:</td> <td>\$20</td> </tr> </table> <p style="margin-top: 10px;">Filing fee is per submission.</p> <p style="text-align: center; margin-top: 20px;">Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>		Check #:	EFT	Amount:	\$20
Check #:	EFT				
Amount:	\$20				

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