

SERFF Tracking Number: TRVA-126459228 State: Arkansas  
 First Filing Company: The Automobile Insurance Company of Hartford, State Tracking Number: EFT \$100  
 Connecticut, ...  
 Company Tracking Number: 2010-01-0073  
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations  
 Product Name: Legacy Homeowners  
 Project Name/Number: /

## Filing at a Glance

Companies: The Automobile Insurance Company of Hartford, Connecticut, The Standard Fire Insurance Company, The Travelers Indemnity Company of America

Product Name: Legacy Homeowners	SERFF Tr Num: TRVA-126459228	State: Arkansas
TOI: 04.0 Homeowners	SERFF Status: Closed-Filed	State Tr Num: EFT \$100
Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations	Co Tr Num: 2010-01-0073	State Status: Fees verified and received
Filing Type: Rate/Rule		Reviewer(s): Becky Harrington, Betty Montesi
	Authors: Stephen Fisher, Bill Dutcher	Disposition Date: 02/01/2010
	Date Submitted: 01/22/2010	Disposition Status: Filed
Effective Date Requested (New):		Effective Date (New):
Effective Date Requested (Renewal): 06/07/2010		Effective Date (Renewal): 06/07/2010

State Filing Description:

## General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 02/01/2010	
State Status Changed: 01/27/2010	Deemer Date:
Created By: Bill Dutcher	Submitted By: Bill Dutcher
Corresponding Filing Tracking Number:	
Filing Description:	
Dwelling Form Base rate adjustment and update to Loss Free Credit rule	

## Company and Contact

### Filing Contact Information

Bill Dutcher, [WDUTCHER@Travelers.com](mailto:WDUTCHER@Travelers.com)

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 Product Name: Legacy Homeowners  
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One Tower Square 5PB 860-277-5549 [Phone]  
 Hartford, CT 06183 860-277-5204 [FAX]

**Filing Company Information**

The Automobile Insurance Company of Hartford, Connecticut CoCode: 19062 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type: Property/Casualty  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-7395 ext. [Phone] FEIN Number: 06-0848755

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 The Standard Fire Insurance Company CoCode: 19070 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type: Property/Casualty  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-7395 ext. [Phone] FEIN Number: 06-6033509

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 The Travelers Indemnity Company of America CoCode: 25666 State of Domicile: Connecticut  
 One Tower Square Group Code: 3548 Company Type: Property/Casualty  
 Hartford, CT 06183 Group Name: State ID Number:  
 (860) 277-7395 ext. [Phone] FEIN Number: 58-6020487

**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation: \$100 per rate filing  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Automobile Insurance Company of Hartford, Connecticut	\$100.00	01/22/2010	33709108
The Standard Fire Insurance Company	\$0.00	01/22/2010	
The Travelers Indemnity Company of America	\$0.00	01/22/2010	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	02/01/2010	02/01/2010

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Becky Harrington	01/27/2010	01/27/2010	Bill Dutcher	02/01/2010	02/01/2010

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## Disposition

Disposition Date: 02/01/2010  
 Effective Date (New):  
 Effective Date (Renewal): 06/07/2010  
 Status: Filed  
 Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
The Automobile Insurance Company of Hartford, Connecticut	40.840%	4.310%	\$8,592	151	\$199,355	15.000%	%
The Standard Fire Insurance Company	40.840%	4.150%	\$410,786	8,398	\$9,898,462	15.000%	%
The Travelers Indemnity Company of America	40.840%	5.530%	\$2,464	33	\$44,566	15.000%	%

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing 40.840%  
 Overall Percentage Rate Impact For This Filing 4.160%

SERFF Tracking Number: TRVA-126459228 State: Arkansas  
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TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations  
Product Name: Legacy Homeowners  
Project Name/Number: /

**Effect of Rate Filing-Written Premium Change For This Program** \$421,842  
**Effect of Rate Filing - Number of Policyholders Affected** 8,582

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Form RF-2 Loss Costs Only (not for workers' compensation)		Yes
Supporting Document	H-1 Homeowners Abstract	Filed	Yes
Supporting Document	HPCS-Homeowners Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	Filing Package	Filed	Yes
Supporting Document	Objection response	Filed	Yes
Rate	base rates	Filed	Yes
Rate	rule 414 Loss Free Credit	Filed	Yes

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Connecticut, ...  
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TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations  
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Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 01/27/2010  
Submitted Date 01/27/2010

Respond By Date

Dear Bill Dutcher,

This will acknowledge receipt of the captioned filing.

Objection 1

- Filing Package (Supporting Document)

Comment: Verify that the hurricane losses in Exhibit are losses that occurred in AR.

Objection 2

No Objections

Comment: Please provide revised manual pages under the rate/rule schedule tab. Do not include the actuarial data under the rate/rule schedule tab.

Please feel free to contact me if you have questions.

In accordance with Regulation 23, Section 7.A., this filing may not be implemented until 20 days after the requested amendment(s) and/or information is received.

Sincerely,

Becky Harrington

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 02/01/2010  
Submitted Date 02/01/2010

Dear Becky Harrington,

### Comments:

Please see the information below

## Response 1

SERFF Tracking Number: TRVA-126459228 State: Arkansas  
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 Project Name/Number: /

Comments: Please see the attached.

**Related Objection 1**

Applies To:

- Filing Package (Supporting Document)

Comment:

Verify that the hurricane losses in Exhibit are losses that occurred in AR.

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: Objection response

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Response 2**

Comments: Please see the attached documents.

**Related Objection 1**

Comment:

Please provide revised manual pages under the rate/rule schedule tab. Do not include the actuarial data under the rate/rule schedule tab.

**Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

**Rate/Rule Schedule Item Changes**

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
base rates	ARRA1 - ARRA6	Replacement	
rule 414 Loss Free Credit	ARGR 400-7	Replacement	



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## Rate Information

Rate data applies to filing.

**Filing Method:** File and Use  
**Rate Change Type:** Increase  
**Overall Percentage of Last Rate Revision:** 19.930%  
**Effective Date of Last Rate Revision:** 06/20/2009  
**Filing Method of Last Filing:** File and Use

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
The Automobile Insurance Company of Hartford, Connecticut	%	4.310%	\$8,592	151	\$199,355	%	%
The Standard Fire Insurance Company	%	4.150%	\$410,786	8,398	\$9,898,462	%	%
The Travelers Indemnity Company of America	%	5.530%	\$2,464	33	\$44,566	%	%

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Product Name: Legacy Homeowners  
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**Overall % Rate Indicated:** 40.840%  
**Overall Percentage Rate Impact For This Filing:** 4.160%  
**Effect of Rate Filing - Written Premium Change For This Program:** \$421,842  
**Effect of Rate Filing - Number of Policyholders Affected:** 8582

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## Rate/Rule Schedule

Schedule Item	Exhibit Name:	Rule # or Page	Rate Action	Previous State Filing Attachments
Status:		#:		Number:
Filed 02/01/2010	base rates	ARRA1 - ARRA6	Replacement	Base rates.pdf
Filed 02/01/2010	rule 414 Loss Free Credit	ARGR 400-7	Replacement	Rule 414 final.pdf

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HO-3

Territory	Super Preferred	Preferred	Regular	Near Standard
1	820	1,074	1,299	1,949
2	843	1,105	1,361	2,042
3	798	1,046	1,264	1,897
4	515	674	829	1,245
5	821	1,076	1,324	1,988
6	579	759	935	1,403
7	579	759	935	1,403
8	821	1,076	1,324	1,988
9	820	1,074	1,299	1,949
10	859	1,125	1,423	2,134
11	820	1,074	1,299	1,949
12	836	1,092	1,346	2,020
13	843	1,105	1,361	2,042
14	876	1,145	1,449	2,175
15	609	797	981	1,473
16	1,048	1,370	1,657	2,485
17	859	1,125	1,423	2,134
18	927	1,214	1,466	2,201
19	820	1,074	1,299	1,949
20	843	1,105	1,361	2,042
21	701	918	1,110	1,666
22	584	765	924	1,389
23	609	797	981	1,473
24	843	1,105	1,361	2,042
25	820	1,074	1,299	1,949
26	625	820	1,008	1,515
27	816	1,069	1,318	1,977
28	844	1,104	1,332	2,001
29	859	1,125	1,423	2,134
33	853	1,115	1,410	2,116
37	820	1,074	1,299	1,949
38	820	1,074	1,299	1,949
39	828	1,086	1,314	1,969
40	941	1,230	1,555	2,333
44	941	1,230	1,555	2,333
45	898	1,174	1,420	2,130
46	820	1,074	1,299	1,949
47	887	1,159	1,466	2,201
48	859	1,125	1,423	2,134
49	843	1,105	1,361	2,042
50	669	876	1,058	1,589
51	821	1,076	1,324	1,988
52	821	1,076	1,324	1,988
53	859	1,125	1,423	2,134
54	990	1,298	1,569	2,353

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HO-3

Territory	Super Preferred	Preferred	Regular	Near Standard
55	820	1,074	1,299	1,949
56	843	1,105	1,361	2,042
57	859	1,125	1,423	2,134
58	843	1,105	1,361	2,042
59	570	747	943	1,415
60	620	812	1,000	1,502
61	827	1,085	1,311	1,966
62	859	1,125	1,423	2,134
63	820	1,074	1,299	1,949
64	813	1,065	1,311	1,968
65	843	1,105	1,361	2,042
66	820	1,074	1,299	1,949
67	657	860	1,058	1,587
68	813	1,062	1,285	1,928
69	851	1,113	1,346	2,018
70	593	778	957	1,434
71	836	1,092	1,346	2,020
72	843	1,105	1,361	2,042
73	840	1,099	1,354	2,033
74	859	1,125	1,423	2,134
75	820	1,074	1,299	1,949
76	843	1,105	1,361	2,042
77	590	773	978	1,466
78	696	908	1,120	1,681
79	535	700	886	1,328
80	788	1,031	1,245	1,871
81	820	1,074	1,299	1,949
82	843	1,105	1,361	2,042
83	667	873	1,076	1,613
84	667	873	1,076	1,613

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HO-4

Territory	Preferred	Regular	Near Standard
1	146	169	253
2	153	180	268
3	146	169	252
4	141	160	242
5	146	169	252
6	146	169	252
7	146	169	252
8	146	169	252
9	146	169	252
10	146	169	252
11	146	169	252
12	144	167	249
13	146	169	252
14	146	169	252
15	144	167	248
16	158	186	278
17	146	169	252
18	153	179	267
19	146	169	252
20	146	169	252
21	148	169	253
22	146	169	252
23	144	167	248
24	146	169	252
25	146	169	252
26	145	168	250
27	148	169	253
28	146	169	252
29	146	169	252
33	146	169	252
37	142	165	247
38	146	169	252
39	148	170	254
40	149	176	264
44	146	169	252
45	146	169	252
46	146	169	252
47	151	176	263
48	146	169	252
49	146	169	252
50	146	168	252
51	146	169	252
52	146	169	252
53	146	169	252
54	158	186	278

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HO-4

Territory	Preferred	Regular	Near Standard
55	146	169	252
56	146	169	252
57	141	163	243
58	141	163	243
59	141	163	243
60	141	163	243
61	141	163	243
62	141	163	243
63	154	179	267
64	141	163	243
65	141	163	243
66	142	164	245
67	143	163	245
68	141	163	243
69	154	179	267
70	139	160	238
71	141	163	243
72	141	163	243
73	141	163	243
74	141	163	243
75	141	163	243
76	141	163	243
77	141	163	243
78	141	163	243
79	140	159	239
80	140	160	240
81	141	163	243
82	141	163	243
83	141	163	243
84	146	169	252

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HA-6

Territory	Super Preferred	Preffered	Regular	Near Standard
1	104	129	148	222
2	108	135	156	235
3	104	129	148	222
4	100	123	141	212
5	104	129	148	222
6	104	129	148	222
7	104	129	148	222
8	104	129	148	222
9	104	129	148	222
10	104	129	148	222
11	104	129	148	222
12	103	127	146	219
13	104	129	148	222
14	104	129	148	222
15	103	128	146	219
16	112	139	164	246
17	104	129	148	222
18	109	137	156	235
19	104	129	148	222
20	104	129	148	222
21	104	129	148	222
22	104	129	148	222
23	103	128	146	219
24	104	129	148	222
25	104	129	148	222
26	103	128	147	221
27	104	129	148	222
28	104	129	148	222
29	104	129	148	222
33	104	129	148	222
37	102	125	145	216
38	104	129	148	222
39	105	131	149	222
40	105	131	153	230
44	104	129	148	222
45	104	129	148	222
46	104	129	148	222
47	107	134	153	230
48	104	129	148	222
49	104	129	148	222
50	103	129	147	221
51	104	129	148	222
52	104	129	148	222
53	104	129	148	222
54	112	141	164	246

## THE STANDARD FIRE INSURANCE COMPANY

## BASE CLASS PREMIUM TABLE: FORM HA-6

Territory	Super Preferred	Preffered	Regular	Near Standard
55	104	129	148	222
56	104	129	148	222
57	101	125	144	215
58	101	125	144	215
59	101	125	144	215
60	101	125	144	215
61	101	125	144	215
62	101	125	144	215
63	109	137	159	238
64	101	125	144	215
65	101	125	144	215
66	102	127	145	215
67	102	128	144	216
68	101	125	144	215
69	109	137	159	238
70	100	123	142	212
71	101	125	144	215
72	101	125	144	215
73	101	125	144	215
74	101	125	144	215
75	101	125	144	215
76	101	125	144	215
77	101	125	144	215
78	101	125	144	215
79	100	124	141	212
80	100	124	143	213
81	101	125	144	215
82	101	125	144	215
83	101	125	144	215
84	104	129	148	222

#### 414. LOSS FREE CUSTOMER CREDIT

The Loss Free Customer Credit is applicable to all Homeowners policies if the account has been loss free for three or more years. If a claim that has caused the credit to be suspended is closed without payment, the credit will be resumed at renewal. This credit is applicable for both new and renewal business.

For the purposes of this rule, a policy meeting the following conditions in the last three years, at the current or previous residence, would meet the definition of being “loss free”:

a claim where an amount less than \$500 has been paid on the policy, or  
two or more claims where an amount has been paid on the policy, however, the aggregate for these claims is less than \$500

The credit is applied at the new business or renewal date and is only removed at the next applicable policy renewal after a qualifying applicable loss.

The Homeowners account must be “loss free” for three subsequent renewals following an applicable loss. The credit is applied at the time of the fourth policy renewal.

**Note:** When a loss occurs prior to the renewal effective date but after the renewal is issued, the credit is removed for the following three renewal periods.

The premium credit shown below is applied to the TOTAL PREMIUM including all endorsements and upgraded coverage, but not including charges for Personal Liability Umbrella Supplement, Valuable Items -Plus endorsement, Identity Fraud Coverage, Workers Compensation endorsement, or any regulatory or governmental assessments of any type.

**Number of Years**  
Three years or greater

**Loss Free Percentage Credit**  
15%

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> H-1 Homeowners Abstract	Filed	02/01/2010
<b>Comments:</b>		
<b>Attachments:</b>		
AR H1 abstract AAI.pdf		
AR H1 abstract ASF.pdf		
AR H1 abstract TIA.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> HPCS-Homeowners Premium Comparison Survey	Filed	02/01/2010
<b>Comments:</b>		
<b>Attachments:</b>		
AR rating example AICH SPRF.xls		
AR rating example SFI SPRF.xls		
AR rating example TIA SPREF.xls		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> NAIC loss cost data entry document	Filed	02/01/2010
<b>Comments:</b>		
<b>Attachments:</b>		
AAI RF1.pdf		
ASF RF1.pdf		
TIA RF1.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Filing Package	Filed	02/01/2010
<b>Comments:</b>		

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**Attachment:**

TCG Legacy Filing Pkg final NO WH.pdf

	<b>Item Status:</b>	<b>Status</b>
<b>Satisfied - Item:</b> Objection response	Filed	<b>Date:</b> 02/01/2010
<b>Comments:</b>		
<b>Attachment:</b>		
DOI Objection response.pdf		

ARKANSAS INSURANCE DEPARTMENT

FORM H-1 HOMEOWNERS ABSTRACT

INSTRUCTIONS: All questions must be answered. If the answer is "none" or "not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent homeowners rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name The Automobile Insurance Co. of Hartford, CT  
 NAIC # (including group #) 3548-19062

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact.

Travelers sent questionnaires to policholders whose policy was written prior to January 1, 2005 and Coverage A less than \$600,000. Our results were:

- 62% of the policyholders who received questionnaires responded.
- 42% of those repoding were under insured and
- 90 % of those underinsured requested increased coverage.

2. If you use a cost estimator (or similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact.

A Cost estimator is used for new business only to determine appropriate values for new business. It is not possible to estimate the impact of program business because some new homes would have been underinsured and others over insured when issued as new business.

3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used.

100% of the Dwelling Replacement Cost

4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact.

The cost estimating systems furnishes the user with a guide for making general estimates of cost to replace specific types of residential construction. Annual changes are published based on residential cost index for zip codes and territories in Arkansas

5. Specify the percentage given for credit or discounts for the following:

a. Fire Extinguisher		%
b. Burglar Alarm	2	%
c. Smoke Alarm	2	%
d. Insured who has both homeowners and auto with your company	10/0	%
e. Deadbolt Locks	2	%
f. Window or Door Locks	0	%
g. Other (specify)	See Attached	%
Age 50 and Retired (Prime Time) Credit	10	%
New Home Credit 0% to 31%	Max 31	%
Loss free Credit	15	
Home Buyer Credit 0% - 5%	Max 5	

6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? If so, state the areas and explain reason for not writing.

No

7. Specify the form(s) utilized in writing homeowners insurance. Indicate the Arkansas premium volume for each form.

Form

Premium Volume

HO-3	200,194
HO-4	2,951
HO-6	4,807

8. Do you write homeowner risks which have aluminum, steel, or vinyl siding?     Yes     No
9. Is there a surcharge on risks with wood heat?    No  
If yes, state the surcharge    N/A  
Does the surcharge apply to conventional fire places?    No  
If yes, state the surcharge    N/A

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

Bill Dutcher  
Signature  
Bill Dutcher  
Printed Name  
Senior Regulatory Analyst  
Title  
(860) 277-5549  
Telephone Number  
wdutcher@travelers.com  
Email Address

ARKANSAS INSURANCE DEPARTMENT

FORM H-1 HOMEOWNERS ABSTRACT

INSTRUCTIONS: All questions must be answered. If the answer is "none" or "not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent homeowners rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name The Standard Fire Insurance Company  
 NAIC # (including group #) 3548-19070

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact.

Travelers sent questionnaires to policholders whose policy was written prior to January 1, 2005 and Coverage A less than \$600,000. Our results were:

- 62% of the policyholders who received questionnaires responded.
- 42% of those reponding were under insured and
- 90 % of those underinsured requesed increased coverage

2. If you use a cost estimator (or similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact.

A Cost estimator is used for new business only to determine appropriate values for new business. It is not possible to estimate the impact of program business because some new homes would have been underinsured and others over insured when issued as new business.

3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used.

100% of the Dwelling Replacement Cost

4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact.

The cost estimating systems furnishes the user with a guide for making general estimates of cost to replace specific types of residential construction. Annual changes are published based on residential cost index for zip codes and territories in Arkansas

5. Specify the percentage given for credit or discounts for the following:

a. Fire Extinguisher		%
b. Burglar Alarm	2	%
c. Smoke Alarm	2	%
d. Insured who has both homeowners and auto with your company	10/0	%
e. Deadbolt Locks	2	%
f. Window or Door Locks	0	%
g. Other (specify)	See Attached	%
Age 50 and Retired (Prime Time) Credit	10	%
New Home Credit 0% to 31%	Max 31	%
Loss free Credit	15	
Home Buyer Credit 0% - 5%	Max 5	

6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? If so, state the areas and explain reason for not writing.

No

7. Specify the form(s) utilized in writing homeowners insurance. Indicate the Arkansas premium volume for each form.

Form

Premium Volume

HO-3	10,142,098
HO-4	92,782
HO-6	74,620

8. Do you write homeowner risks which have aluminum, steel, or vinyl siding?     Yes     No
9. Is there a surcharge on risks with wood heat?    No  
If yes, state the surcharge    N/A  
Does the surcharge apply to conventional fire places?    No  
If yes, state the surcharge    N/A

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

Bill Dutcher  
Signature  
Bill Dutcher  
Printed Name  
Senior Regulatory Analyst  
Title  
(860) 277-5549  
Telephone Number  
wdutcher@travelers.com  
Email Address

ARKANSAS INSURANCE DEPARTMENT

FORM H-1 HOMEOWNERS ABSTRACT

INSTRUCTIONS: All questions must be answered. If the answer is "none" or "not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent homeowners rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name The Travelers Indemnity Company of America  
 NAIC # (including group #) 3548-25666

1. If you have had an insurance to value campaign during the experience filing period, describe the campaign and estimate its impact.

Travelers sent questionnaires to policholders whose policy was written prior to January 1, 2005 and Coverage A less than \$600,000. Our results were:

- 62% of the policyholders who received questionnaires responded.
- 42% of those repoding were under insured and
- 90 % of those underinsured requested increased coverage

2. If you use a cost estimator (or similar method) in order to make sure that dwellings (or contents) are insured at their value, state when this program was started in Arkansas and estimate its impact.

A Cost estimator is used for new business only to determine appropriate values for new business. It is not possible to estimate the impact of program business because some new homes would have been underinsured and others over insured when issued as new business.

3. If you require a minimum relationship between the amount of insurance to be written and the replacement value of the dwelling (contents) in order to purchase insurance, describe the procedures that are used.

100% of the Dwelling Replacement Cost

4. If you use an Inflation Guard form or similar type of coverage, describe the coverage(s) and estimate the impact.

The cost estimating systems furnishes the user with a guide for making general estimates of cost to replace specific types of residential construction. Annual changes are published based on residential cost index for zip codes and territories in Arkansas

5. Specify the percentage given for credit or discounts for the following:

a. Fire Extinguisher		%
b. Burglar Alarm	2	%
c. Smoke Alarm	2	%
d. Insured who has both homeowners and auto with your company	10/0	%
e. Deadbolt Locks	2	%
f. Window or Door Locks	0	%
g. Other (specify)	See Attached	%
Age 50 and Retired (Prime Time) Credit	10	%
New Home Credit 0% to 31%	Max 31	%
Loss free Credit	15	
Home Buyer Credit 0% - 5%	Max 5	

6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance? If so, state the areas and explain reason for not writing.

No

7. Specify the form(s) utilized in writing homeowners insurance. Indicate the Arkansas premium volume for each form.

Form

Premium Volume

HO-3	45,780
HO-4	1,249
HO-6	0

8. Do you write homeowner risks which have aluminum, steel, or vinyl siding?     Yes     No
9. Is there a surcharge on risks with wood heat?    Yes  
If yes, state the surcharge    Varies By Peril  
Does the surcharge apply to conventional fire places?    No  
If yes, state the surcharge    N/A

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

Bill Dutcher  
Signature  
Bill Dutcher  
Printed Name  
Senior Regulatory Analyst  
Title  
(860) 277-5549  
Telephone Number  
wdutcher@travelers.com  
Email Address

NAIC Number: 19062  
 Company Name: The Automobile Insurance Company of Hartford, CT 6/7/2010  
 Contact Person: Bill Dutcher  
 Telephone No.: 860-277-5549  
 Email Address: wdutcher@travelers.com  
 Effective Date: 6/7/2010

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

Submit to: Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
 Telephone: 501-371-2800  
 Email as an attachment to insurance.pnc@arkansas.gov  
 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE  
 BLANK**

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$450	\$509	\$667	\$752	\$872	\$984	\$710	\$802	\$587	\$661	\$497	\$560	\$717	\$808	\$701	\$791	\$551	\$621
	\$120,000	\$562	\$635	\$832	\$940	\$1,091	\$1,230	\$888	\$1,003	\$734	\$827	\$619	\$698	\$896	\$1,011	\$876	\$989	\$687	\$776
	\$160,000	\$666	\$751	\$988	\$1,115	\$1,294	\$1,461	\$1,053	\$1,189	\$869	\$980	\$733	\$828	\$1,063	\$1,199	\$1,039	\$1,173	\$816	\$920
6	\$80,000	\$543	\$640	\$805	\$949	\$1,054	\$1,242	\$857	\$1,011	\$709	\$834	\$598	\$705	\$865	\$1,020	\$845	\$998	\$664	\$783
	\$120,000	\$678	\$799	\$1,006	\$1,187	\$1,317	\$1,555	\$1,072	\$1,265	\$884	\$1,043	\$746	\$881	\$1,081	\$1,277	\$1,057	\$1,248	\$830	\$980
	\$160,000	\$804	\$948	\$1,193	\$1,407	\$1,562	\$1,846	\$1,271	\$1,501	\$1,049	\$1,238	\$885	\$1,044	\$1,283	\$1,514	\$1,255	\$1,481	\$984	\$1,162
9	\$80,000	\$1,330	\$1,770	\$1,978	\$2,634	\$2,595	\$3,455	\$2,108	\$2,809	\$1,739	\$2,316	\$1,466	\$1,950	\$2,129	\$2,835	\$2,081	\$2,772	\$1,630	\$2,171
	\$120,000	\$1,665	\$2,216	\$2,477	\$3,300	\$3,250	\$4,329	\$2,641	\$3,517	\$2,178	\$2,900	\$1,834	\$2,442	\$2,665	\$3,551	\$2,607	\$3,473	\$2,041	\$2,718
	\$160,000	\$1,975	\$2,630	\$2,942	\$3,918	\$3,860	\$5,142	\$3,136	\$4,178	\$2,584	\$3,443	\$2,177	\$2,900	\$3,166	\$4,216	\$3,095	\$4,124	\$2,423	\$3,227

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	<input type="text"/>	%	Deadbolt Lock	<input type="text"/>	%
Burglar Alarm	<input type="text"/>	%	Window Locks	<input type="text"/>	%
Smoke Alarm	<input type="text"/>	%	\$1,000 Deductible	<input type="text"/>	%
	<input type="text"/>	%	Other (specify)	<input type="text"/>	%
	<input type="text"/>	%	Maximum Credit Allowed	<input type="text"/>	%

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?	<input type="text"/>	(yes or no)	
WHAT IS YOUR PERCENTAGE DEDUCTIBLE?	<input type="text"/>	%	
WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?	Zone	Brick	Frame
	Highest Risk	\$ <input type="text"/>	\$ <input type="text"/>
	Lowest Risk	\$ <input type="text"/>	\$ <input type="text"/>

NAIC Number: 19070  
 Company Name: The Standard Fire Insurance Company 6/7/2010  
 Contact Person: Bill Dutcher  
 Telephone No.: 860-277-5549  
 Email Address: wdutcher@travelers.com  
 Effective Date: 6/7/2010

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE  
 BLANK**

Submit to: Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
 Telephone: 501-371-2800  
 Email as an attachment to insurance.pnc@arkansas.gov  
 You may also attach to a SERFF filing or submit on a cdr disk

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$484	\$547	\$717	\$809	\$938	\$1,058	\$763	\$862	\$631	\$711	\$534	\$602	\$771	\$869	\$754	\$851	\$592	\$668
	\$120,000	\$604	\$683	\$895	\$1,011	\$1,173	\$1,323	\$955	\$1,078	\$789	\$889	\$666	\$750	\$963	\$1,087	\$942	\$1,063	\$739	\$834
	\$160,000	\$716	\$808	\$1,062	\$1,199	\$1,391	\$1,571	\$1,132	\$1,278	\$934	\$1,054	\$788	\$890	\$1,143	\$1,289	\$1,117	\$1,261	\$877	\$989
6	\$80,000	\$584	\$688	\$866	\$1,020	\$1,133	\$1,336	\$922	\$1,087	\$762	\$897	\$643	\$758	\$930	\$1,097	\$909	\$1,073	\$714	\$842
	\$120,000	\$729	\$859	\$1,082	\$1,276	\$1,416	\$1,672	\$1,153	\$1,360	\$951	\$1,121	\$802	\$947	\$1,162	\$1,373	\$1,137	\$1,342	\$893	\$1,054
	\$160,000	\$864	\$1,019	\$1,283	\$1,513	\$1,680	\$1,985	\$1,367	\$1,614	\$1,128	\$1,331	\$952	\$1,123	\$1,380	\$1,628	\$1,349	\$1,592	\$1,058	\$1,249
9	\$80,000	\$1,430	\$1,903	\$2,127	\$2,832	\$2,790	\$3,715	\$2,267	\$3,020	\$1,870	\$2,490	\$1,576	\$2,097	\$2,289	\$3,048	\$2,238	\$2,981	\$1,753	\$2,334
	\$120,000	\$1,790	\$2,383	\$2,663	\$3,548	\$3,495	\$4,655	\$2,840	\$3,782	\$2,342	\$3,118	\$1,972	\$2,626	\$2,866	\$3,818	\$2,803	\$3,734	\$2,195	\$2,923
	\$160,000	\$2,124	\$2,828	\$3,163	\$4,213	\$4,150	\$5,529	\$3,372	\$4,492	\$2,779	\$3,702	\$2,341	\$3,118	\$3,404	\$4,533	\$3,328	\$4,434	\$2,605	\$3,470

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	<input type="text"/>	%	Deadbolt Lock	<input type="text"/>	%
Burglar Alarm	<input type="text"/>	%	Window Locks	<input type="text"/>	%
Smoke Alarm	<input type="text"/>	%	\$1,000 Deductible	<input type="text"/>	%
			Other (specify)	<input type="text"/>	%

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?  (yes or no)

WHAT IS YOUR PERCENTAGE DEDUCTIBLE?  %

WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?

Zone	Brick	Frame
Highest Risk	\$ <input type="text"/>	\$ <input type="text"/>

NAIC Number: 25666  
 Company Name: The Travelers Indemnity Company of America  
 Contact Person: Bill Dutcher  
 Telephone No.: 860-277-5549  
 Email Address: wdutcher@travelers.com  
 Effective Date: 6/7/2010

**Homeowners Premium Comparison Survey Form  
 FORM HPCS - last modified August, 2005**

Submit to: Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
 Telephone: 501-371-2800  
 Email as an attachment to insurance.pnc@arkansas.gov  
 You may also attach to a SERFF filing or submit on a cdr disk

**USE THE APPROPRIATE FORM BELOW - IF NOT APPLICABLE, LEAVE  
 BLANK**

**Survey Form for HO3 (Homeowners) - Use \$500 Flat Deductible (Covers risk of direct physical loss for dwelling and other structures; named perils for personal property, replacement cost on dwelling, actual cash value on personal property)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Desha		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000	\$484	\$547	\$717	\$809	\$938	\$1,058	\$763	\$862	\$631	\$711	\$534	\$602	\$771	\$869	\$754	\$851	\$592	\$668
	\$120,000	\$604	\$683	\$895	\$1,011	\$1,173	\$1,323	\$955	\$1,078	\$789	\$889	\$666	\$750	\$963	\$1,087	\$942	\$1,063	\$739	\$834
	\$160,000	\$716	\$808	\$1,062	\$1,199	\$1,391	\$1,571	\$1,132	\$1,278	\$934	\$1,054	\$788	\$890	\$1,143	\$1,289	\$1,117	\$1,261	\$877	\$989
6	\$80,000	\$584	\$688	\$866	\$1,020	\$1,133	\$1,336	\$922	\$1,087	\$762	\$897	\$643	\$758	\$930	\$1,097	\$909	\$1,073	\$714	\$842
	\$120,000	\$729	\$859	\$1,082	\$1,276	\$1,416	\$1,672	\$1,153	\$1,360	\$951	\$1,121	\$802	\$947	\$1,162	\$1,373	\$1,137	\$1,342	\$893	\$1,054
	\$160,000	\$864	\$1,019	\$1,283	\$1,513	\$1,680	\$1,985	\$1,367	\$1,614	\$1,128	\$1,331	\$952	\$1,123	\$1,380	\$1,628	\$1,349	\$1,592	\$1,058	\$1,249
9	\$80,000	\$1,430	\$1,903	\$2,127	\$2,832	\$2,790	\$3,715	\$2,267	\$3,020	\$1,870	\$2,490	\$1,576	\$2,097	\$2,289	\$3,048	\$2,238	\$2,981	\$1,753	\$2,334
	\$120,000	\$1,790	\$2,383	\$2,663	\$3,548	\$3,495	\$4,655	\$2,840	\$3,782	\$2,342	\$3,118	\$1,972	\$2,626	\$2,866	\$3,818	\$2,803	\$3,734	\$2,195	\$2,923
	\$160,000	\$2,124	\$2,828	\$3,163	\$4,213	\$4,150	\$5,529	\$3,372	\$4,492	\$2,779	\$3,702	\$2,341	\$3,118	\$3,404	\$4,533	\$3,328	\$4,434	\$2,605	\$3,470

**Survey Form for HO4 (Renters) - Use \$500 Flat Deductible (Named perils for personal property, actual cash value for loss, liability and medical payments for others included)**

Public Protection Class	Property Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$5,000																		
	\$15,000																		
	\$25,000																		
6	\$5,000																		
	\$15,000																		
	\$25,000																		
9	\$5,000																		
	\$15,000																		
	\$25,000																		

**Survey Form for DP-2 (Dwelling/Fire) - Use \$500 Flat Deductible (Named perils for dwelling and personal property; replacement cost for dwelling, actual cash value for personal property, no liability coverage)**

Public Protection Class	Dwelling Value	Washington		Baxter		Craighead		St. Francis		Arkansas		Union		Miller		Sebastian		Pulaski	
		Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame	Brick	Frame
3	\$80,000																		
	\$120,000																		
	\$160,000																		
6	\$80,000																		
	\$120,000																		
	\$160,000																		
9	\$80,000																		
	\$120,000																		
	\$160,000																		

**SPECIFY THE PERCENTAGE GIVEN FOR CREDITS OR DISCOUNTS FOR THE FOLLOWING:**

**HO3 and HO4 only**

Fire Extinguisher	<input type="text"/>	%	Deadbolt Lock	<input type="text"/>	%
Burglar Alarm	<input type="text"/>	%	Window Locks	<input type="text"/>	%
Smoke Alarm	<input type="text"/>	%	\$1,000 Deductible	<input type="text"/>	%
	<input type="text"/>	%	Other (specify)	<input type="text"/>	%
	<input type="text"/>	%	Maximum Credit Allowed	<input type="text"/>	%

**EARTHQUAKE INSURANCE**

**IMPORTANT, homeowners insurance does NOT automatically cover losses from earthquakes. Ask your agent about this co**

ARE YOU CURRENTLY WRITING EARTHQUAKE COVERAGE IN ARKANSAS?	<input type="text"/>	(yes or no)	
WHAT IS YOUR PERCENTAGE DEDUCTIBLE?	<input type="text"/>	%	
WHAT IS YOUR PRICE PER \$1,000 OF COVERAGE?	Zone	Brick	Frame
	Highest Risk	\$ <input type="text"/>	\$ <input type="text"/>
	Lowest Risk	\$ <input type="text"/>	\$ <input type="text"/>

**FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT**

1. This filing transmittal is part of Company Tracking # 2010-01-0073

2. If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number

		Company Name	Company NAIC Number
3.	A.	The Automobile Insurance Company of Hartford, Connecticut	B. 3548-19062

		Product Coding Matrix Line of Business (i.e., Type of Insurance)	Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.		B.

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Dwelling Forms	40.84%	4.31%					
<b>TOTAL OVERALL EFFECT</b>		4.16%					

6. 5 Year History			Rate Change History				7.		
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio	Expense Constants	Selected Provisions
2009	151	19.9%	6/20/2009	221	306	1.385	0.387	A. Total Production Expense	22.70%
2008	232	4.7%	2/17/2008	266	524	1.971	0.347	B. General Expense	10.40%
2007	330	7.4%	2/18/2007	339	74	0.219	0.316	C. Taxes, License & Fees	2.67%
2006	384			368	141	0.382	0.346	D. Underwriting Profit & Contingencies	13.00%
2005	434	2.4%	11/12/2005	396	101	0.256	0.331	E. Other (explain)	
								F. TOTAL	48.77%

8.     N     Apply Loss Cost Factors to Future Filings? (Y or N)

9.   15.0%   Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):           53          

10.   -2.0%   Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):           50

**FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT**

1. This filing transmittal is part of Company Tracking # 2010-01-0073

2. If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number

		Company Name		Company NAIC Number
3.	A.	The Standard Fire Insurance Company	B.	3548-19070

		Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.		B.	

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Dwelling Forms	40.84%	4.15%					
<b>TOTAL OVERALL EFFECT</b>		4.16%					

6. 5 Year History			Rate Change History					7.		
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio	Expense Constants		Selected Provisions
2009	8,398	19.9%	6/20/2009	10,836	7,763	0.716	0.417	A. Total Production Expense		22.70%
2008	12,452	4.7%	2/17/2008	12,376	16,718	1.351	0.393	B. General Expense		10.40%
2007	17,524	7.4%	2/18/2007	14,732	6,838	0.464	0.312	C. Taxes, License & Fees		2.67%
2006	17,166			13,536	9,692	0.716	0.337	D. Underwriting Profit & Contingencies		13.00%
2005	14,791	2.4%	11/12/2005	11,015	6,636	0.602	0.326	E. Other (explain)		
								F. TOTAL		48.77%

8.   N   Apply Loss Cost Factors to Future Filings? (Y or N)

9. 15.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): Multiple

10. -2.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): Multiple

**FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT**

1. This filing transmittal is part of Company Tracking # 2010-01-0073

2. If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number

		Company Name	Company NAIC Number
3.	A.	The Travelers Indemnity Company of America	B. 3548-25666

		Product Coding Matrix Line of Business (i.e., Type of Insurance)	Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.		B.

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Dwelling Forms	40.84%	5.53%					
<b>TOTAL OVERALL EFFECT</b>		4.16%					

6. 5 Year History			Rate Change History				7.		
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio	Expense Constants	Selected Provisions
2009	33	19.9%	6/20/2009	44	3	0.077	0.519	A. Total Production Expense	22.70%
2008	44	4.7%	2/17/2008	44	73	1.670	0.451	B. General Expense	10.40%
2007	65	7.4%	2/18/2007	54	22	0.401	0.317	C. Taxes, License & Fees	2.67%
2006	67			52	383	7.321	0.327	D. Underwriting Profit & Contingencies	13.00%
2005	54	2.4%	11/12/2005	43	72	1.676	0.344	E. Other (explain)	
								F. TOTAL	48.77%

8.   N   Apply Loss Cost Factors to Future Filings? (Y or N)

9. 15.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): 17

10. -2.0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): Multiple

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

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ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Explanatory Memorandum

This memorandum presents a proposed rate level change of +4.16% for all Arkansas Homeowners policies. This change applies to all policies processed on or after 04/18/2010 and effective on or after 06/07/2010. This change includes revisions to our dwelling territory base rates and loss free credit.

Policy Form	Overall Change
Dwelling	4.24%
Total	4.16%

## ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
 THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
 THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Dwelling Policy Forms  
 Indication

## All Price Tracks Combined

AY Ending 09/30	Earned House Years (1)	Trended EPCR (2)	Ultimate Trended L & LAE (3)	Incurred Claim Count (4)	AY Weights (5)	Rate Level Loss Ratio (6)=(3)/(2)
2005	14,325	19,128,404	10,730,993	852	0.20	0.561
2006	16,447	21,200,657	15,003,609	1,080	0.20	0.708
2007	16,760	21,747,237	10,255,164	843	0.20	0.472
2008	13,214	17,298,157	13,143,292	658	0.20	0.760
2009	10,409	13,774,966	6,363,432	758	0.20	0.462
(7) Weighted Rate Level Loss Ratio						0.592
(8) Non-Hurricane Cat. Adjusted Loss Ratio = (7) x WCLM						0.722
(9) Permissible Loss Ratio						0.512
(10) Indicated Rate Level Change = (8)/(9)-1						40.84%
(11) State Credibility						1.00
(12) Trended Permissible Loss Ratio						0.533
(13) Credibility Weighted Rate Level Loss Ratio						0.722
(14) Total Cat. Adjusted Loss Ratio = (13)						0.722
(15) Credibility Weighted Indicated Rate Level change = (14)/(9)-1						40.84%
(16) Proposed Premium Level Change						4.24%

## ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

## Development of Permissible Loss Ratio

Commissions	22.7%
General & Other Acquisition	10.4%
Taxes, Licenses & Fees	2.7%
Profit Provision	13.0%
Subtotal	48.8%
Permissible Loss Ratio	51.2%
Total	100.0%

## ARKANSAS HOMEOWNERS

## Credibility Table

<u>Claims Count</u>	<u>Credibility</u>
0	0
3	0.05
11	0.1
43	0.2
97	0.3
173	0.4
271	0.5
390	0.6
530	0.7
692	0.8
876	0.9
1,082	1





## ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

## Unallocated Loss Adjustment Expense

Calendar Year	ULAE	Incurred Losses & ALAE	Ratio
2005	\$113,165,040	\$636,067,737	0.178
2006	\$163,486,696	\$719,448,914	0.227
2007	\$169,880,762	\$1,029,327,958	0.165
Mean			0.187
Selected			0.178

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Dwelling Policy Forms  
Frequency Trend  
Exponential Fit

Calendar Year Ending	Travelers Statewide				Calendar Year Ending	Industry Fastrack Statewide			
	Actual	20 PT	12 PT	6 PT		Actual	20 PT	12 PT	6 PT
12/31/2004	5.15	5.86			09/30/2004	5.54	5.15		
03/31/2005	5.10	5.84			12/31/2004	5.32	5.18		
06/30/2005	5.39	5.82			03/31/2005	5.26	5.20		
09/30/2005	5.72	5.79			06/30/2005	5.23	5.23		
12/31/2005	5.85	5.77			09/30/2005	5.16	5.26		
03/31/2006	6.22	5.75			12/31/2005	5.17	5.28		
06/30/2006	6.01	5.73			03/31/2006	5.23	5.31		
09/30/2006	6.29	5.71			06/30/2006	5.43	5.34		
12/31/2006	6.26	5.69	6.37		09/30/2006	5.48	5.36	5.12	
03/31/2007	5.98	5.67	6.23		12/31/2006	5.37	5.39	5.18	
06/30/2007	6.02	5.65	6.09		03/31/2007	5.44	5.42	5.25	
09/30/2007	5.45	5.63	5.96		06/30/2007	5.20	5.44	5.31	
12/31/2007	5.24	5.61	5.83		09/30/2007	5.04	5.47	5.38	
03/31/2008	5.35	5.59	5.70		12/31/2007	5.05	5.50	5.45	
06/30/2008	6.71	5.57	5.57	7.53	03/31/2008	5.07	5.53	5.51	5.21
09/30/2008	7.22	5.55	5.45	6.67	06/30/2008	5.45	5.55	5.58	5.40
12/31/2008	7.48	5.53	5.33	5.91	09/30/2008	5.76	5.58	5.65	5.60
03/31/2009	5.04	5.51	5.21	5.24	12/31/2008	5.80	5.61	5.72	5.81
06/30/2009	3.18	5.49	5.09	4.64	03/31/2009	6.11	5.64	5.80	6.03
09/30/2009	5.09	5.47	4.98	4.11	06/30/2009	6.11	5.67	5.87	6.26
Annual Rate of Change		-1.4%	-8.6%	-38.3%			2.0%	5.1%	15.8%
Coefficient of Determination (R <sup>2</sup> )		1.5%	13.1%	49.2%			26.6%	42.3%	91.4%
Selected Annual Rate of Change				0.0%					
Projected Average Date of Loss for the Period the Proposed Rates will be in Effect				04/18/2011					

Factors To Adjust Data Based on a 04/18/2010 Effective Date

Experience Period	Midpoint of Experience Period	Prospective Trend Period (months)	Frequency Factor From Midpoint to 04/18/2011
09/30/2005	03/31/2005	72.7	1.000
09/30/2006	03/31/2006	60.7	1.000
09/30/2007	03/31/2007	48.7	1.000
09/30/2008	03/31/2008	36.6	1.000
09/30/2009	03/31/2009	24.6	1.000

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Dwelling Policy Forms  
Severity Trend  
Exponential Fit

Calendar Year Ending	Travelers Statewide				Calendar Year Ending	Industry Fastrack Statewide			
	Actual	20 PT	12 PT	6 PT		Actual	20 PT	12 PT	6 PT
12/31/2004	5,287	6,129			09/30/2004	4,795	4,797		
03/31/2005	5,892	6,340			12/31/2004	4,805	4,918		
06/30/2005	7,327	6,558			03/31/2005	5,064	5,042		
09/30/2005	6,637	6,784			06/30/2005	5,146	5,170		
12/31/2005	6,747	7,018			09/30/2005	5,297	5,301		
03/31/2006	7,184	7,259			12/31/2005	5,612	5,435		
06/30/2006	6,738	7,509			03/31/2006	5,692	5,572		
09/30/2006	7,804	7,768			06/30/2006	5,803	5,713		
12/31/2006	9,676	8,035	9,276		09/30/2006	5,809	5,858	5,784	
03/31/2007	10,393	8,312	9,389		12/31/2006	5,978	6,006	5,940	
06/30/2007	10,940	8,598	9,503		03/31/2007	6,083	6,158	6,100	
09/30/2007	10,955	8,894	9,618		06/30/2007	6,263	6,313	6,264	
12/31/2007	9,009	9,201	9,735		09/30/2007	6,597	6,473	6,433	
03/31/2008	8,161	9,517	9,853		12/31/2007	6,602	6,637	6,607	
06/30/2008	7,480	9,845	9,973	7,583	03/31/2008	6,647	6,805	6,785	6,581
09/30/2008	7,582	10,184	10,094	8,480	06/30/2008	6,814	6,977	6,968	6,827
12/31/2008	9,380	10,535	10,217	9,482	09/30/2008	6,934	7,153	7,156	7,082
03/31/2009	12,434	10,897	10,341	10,603	12/31/2008	7,455	7,334	7,349	7,347
06/30/2009	14,912	11,273	10,467	11,857	03/31/2009	7,564	7,520	7,547	7,621
09/30/2009	10,302	11,661	10,594	13,258	06/30/2009	7,954	7,710	7,751	7,906
Annual Rate of Change		14.5%	4.9%	56.4%			10.5%	11.2%	15.8%
Coefficient of Determination (R <sup>2</sup> )		58.1%	4.7%	58.6%			98.5%	96.7%	96.5%
Selected Annual Rate of Change				5.0%					
Projected Average Date of Loss for the Period the Proposed Rates will be in Effect				04/18/2011					

Factors To Adjust Data Based on a 04/18/2010 Effective Date

Experience Period	Midpoint of Experience Period	Prospective Trend Period (months)	Severity Factor From Midpoint to 04/18/2011	Frequency x Severity Factor
09/30/2005	03/31/2005	72.7	1.344	1.344
09/30/2006	03/31/2006	60.7	1.280	1.280
09/30/2007	03/31/2007	48.7	1.219	1.219
09/30/2008	03/31/2008	36.6	1.160	1.160
09/30/2009	03/31/2009	24.6	1.105	1.105

## ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
 THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
 THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Dwelling Policy Forms  
 Average Premium Trend

## All Price Tracks Combined

Experience Period Ending:	Average Premium	Fitted Average Premium (Straight Line)
09/30/2005	1,131.08	1,110.37
09/30/2006	1,127.52	1,146.59
09/30/2007	1,170.83	1,182.82
09/30/2008	1,217.41	1,219.05
09/30/2009	1,267.28	1,255.28
(1) Average Historical Annual Increment of Change:		36.23
(2) Average Annual Increment of Change Tempered 0.75:		27.17
(3) Selected Annual Increment of Change:		27.17
Current Annual Rate =	2.2%	
(4) Average Earned Date Underlying Proposed Rates: (Effective Date = 04/18/2010)		04/18/2011
(5) Prospective Trend Period (months) (Midpoint of Experience Period to Average Earned Date)		24.5
(6) Increment to Bring 09/30/2009 Average Premium to 04/18/2011: [(3) * [(5) / 12]]		55.56
(7) Projected Average Premium at 04/18/2011:		1,310.84

## CALCULATION OF PREMIUM TREND FACTORS

Experience Period Ending:	Midpoint of Experience Period	Fitted Average Premium	Premium Trend Factors
09/30/2005	03/31/2005	1,110.37	1.181
09/30/2006	03/31/2006	1,146.59	1.143
09/30/2007	03/31/2007	1,182.82	1.108
09/30/2008	03/31/2008	1,219.05	1.075
09/30/2009	03/31/2009	1,255.28	1.044

## ARKANSAS HOMEOWNERS

### Catastrophe Losses

#### Explanation of Catastrophe Losses

In an effort to avoid sharp fluctuations in our rate level adjustments and maintain a degree of stability, we have given catastrophe losses a special treatment in the ratemaking process.

#### Non-Hurricane Catastrophe Losses:

The industry defines a catastrophe as an occurrence such as a hailstorm, windstorm, tornado, hurricane, etc., which results in property losses of \$25,000,000 or more.<sup>1</sup> Each catastrophe is accorded a serial number by the Insurance Services Office for identification purposes. This identification makes it possible for each insurance company to summarize the losses due to these types of occurrences in a particular year. One of our underlying assumptions in ratemaking is that past loss experience can be utilized as an indication of the future loss experience. While this is a reasonable assumption for regular property losses, we believe catastrophe losses are extraordinary events that will probably not re-occur with the same degree of frequency as regular losses. Therefore, we give such catastrophe losses special treatment.

We first eliminate all catastrophe losses from the five-year experience period leaving only non-cat losses in the experience. We develop the five-year indicated non-cat loss ratio by considering only these losses. To this non-cat loss ratio, the Catastrophe Loss Factor is applied to produce the indicated loss ratio including catastrophes.

Since catastrophes are rare events, it is necessary that the computation of the catastrophe loading be based upon a long period of experience. In determining the Catastrophe Loss Factor, we have utilized all of the Homeowners experience from 1966 - 2008. The Catastrophe Loss Factor is calculated by relating the catastrophe losses to the non-cat losses. Page 2 of this exhibit sets forth the actual calculation.

1. \$25,000,000 of property losses as the definition of catastrophe has been in effect since January 1, 1997. The previous definition of \$5,000,000 of property losses was in use from January 1, 1982 to December 31, 1996. All previous catastrophes are defined as \$1,000,000 or more of property losses.

ARKANSAS HOMEOWNERS

ALL COMPANIES COMBINED

Catastrophe Losses  
Dwelling, Tenant & Condominium Policy Forms  
Development of Weighted Catastrophe Loss Multiplier

Calendar Year Ending 12/31	Total Incurred Losses (2)+(3)+(4)+(5)	Hurricane Losses	Earthquake Losses	Other Cat. Losses	Non-Cat. Incurred Losses
	(1)	(2)	(3)	(4)	(5)
1966	210,715	0	0	3,913	206,802
1967	267,765	0	0	20,977	246,788
1968	281,720	0	0	101,427	180,293
1969	286,716	0	0	-404	287,120
1970	376,425	0	0	12,503	363,922
1971	415,374	0	0	24,141	391,233
1972	676,316	0	0	191,152	485,164
1973	578,880	0	0	182,109	396,771
1974	686,097	0	0	43,078	643,019
1975	1,090,266	0	0	354,884	735,382
1976	655,264	0	0	254,326	400,938
1977	628,267	0	0	12,435	615,832
1978	526,587	0	0	51,049	475,538
1979	549,086	0	0	64,241	484,845
1980	546,537	0	0	212,233	334,304
1981	867,611	0	0	95,268	772,343
1982	1,133,784	0	0	140,261	993,523
1983	1,729,237	0	0	247,317	1,481,920
1984	2,831,410	0	0	326,349	2,505,061
1985	4,459,262	0	0	134,592	4,324,670
1986	7,814,946	0	0	535,735	7,279,211
1987	6,636,713	0	0	341,826	6,294,887
1988	2,922,580	0	0	407,400	2,515,180
1989	3,399,560	0	0	1,055,941	2,343,619
1990	2,172,456	0	0	323,004	1,849,452

ARKANSAS HOMEOWNERS

ALL COMPANIES COMBINED

Catastrophe Losses  
Dwelling, Tenant & Condominium Policy Forms  
Development of Weighted Catastrophe Loss Multiplier

Calendar Year Ending 12/31	Total Incurred Losses (2)+(3)+(4)+(5)	Hurricane Losses	Earthquake Losses	Other Cat. Losses	Non-Cat. Incurred Losses
	(1)	(2)	(3)	(4)	(5)
1991	803,043	0	0	148,362	654,681
1992	297,724	0	0	11,533	286,191
1993	18,152	0	0	0	18,152
1994	33,681	0	0	0	33,681
1995	45,350	0	0	0	45,350
1996	16,622	0	0	3,250	13,372
1997	94,083	0	0	3,376	90,707
1998	140,013	0	0	21,130	118,883
1999	1,226,638	0	0	247,702	978,936
2000	667,848	0	0	85,139	582,709
2001	928,813	0	0	260,322	668,491
2002	1,322,681	0	0	120,703	1,201,978
2003	2,845,528	0	0	159,373	2,686,155
2004	4,007,483	0	0	301,816	3,705,667
2005	7,590,058	357,668	0	235,707	6,996,683
2006	12,961,298	127,285	0	1,737,918	11,096,095
2007	9,496,630	0	0	607,031	8,889,599
2008	29,256,103	1,756,392	0	10,830,292	16,669,419
Total	113,495,322	2,241,345	0	19,909,411	91,344,566
(6)	Ratio of Total "Other Cat." Losses to Total "Non-Cat." Losses:				0.218
(7)	Weighted Catastrophe Loss Multiplier [WCLM = 1 + (6)]:				1.218

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Calculation of Investment Income Adjustment Factors  
Estimated Investment Earnings

A.	<u>Unearned Premium Reserve</u>	<u>Homeowners</u>
	1. Direct Earned Premium	14,657,794
	2. Direct Mean Unearned Premium Reserve ( <i>See Page 3</i> )	7,685,955
	3. Deduction for Prepaid Expenses	
	(A) Commissions	0.2270
	(B) Taxes, Licenses, and Fees	0.0267
	(C) Other Acquisition (50%)	0.0188
	(D) General (50%)	0.0332
	(E) Total	0.3057
	4. Deduction for Federal Taxes ( <i>See Page 3</i> )	(74,098)
	5. Deduction for Prepaid Expenses in dollars ( <i>See Page 3</i> )	2,349,553
	6. Net Subject to Investment ( <i>See Page 3</i> )	5,410,500
B.	<u>Delayed Remission of Premium</u>	
	1. Average Agent's Balance ( <i>See Page 3</i> )	28.2%
	2. Amount of Deduction ( <i>See Page 3</i> )	4,133,498
C.	<u>Loss + LAE Reserve</u>	
	1. Direct Earned Premium (A1)	14,657,794
	2. Permissible Incurred Loss + LAE ( <i>See Page 4</i> )	
	0.5123 x (1)	7,509,326
	3. Expected Mean Loss + LAE Reserve ( <i>See Page 4</i> )	
	0.6733 x (2)	5,056,303
	4. Deduction for Federal Taxes ( <i>See Page 5</i> )	139,062
	5. Loss & Reserve Subject to Investment	4,917,241
D.	<u>Policyholders' Surplus</u> ( <i>See Page 6</i> )	14,465,000
E.	<u>Net Subject to Investment</u> ( <i>See Page 4</i> )	20,659,243
	(A6) - (B2) + (C5) + (D)	
F.	<u>Average Rate of Return</u> ( <i>See Page 6</i> )	4.8%

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Calculation of Investment Income Adjustment Factors  
Estimated Investment Earnings

	<u>Homeowners</u>
G. <u>Projected Investment Earnings</u>	991,644
H. <u>Before Tax Return on Earned Premium</u>	6.8%
I. <u>Federal Income Tax Provision</u> (See Page 6)	24.9%
J. <u>After-Tax Return on Earned Premium</u>	5.1%
K. <u>After-Tax Target Return on Earned Premium</u> (See Page 6)	14.8%
L. <u>After-Tax Target Underwriting Profit (% of EP)</u>	9.7%
M. <u>Before-Tax Target Underwriting Profit (% of EP)</u> (Assuming a tax rate of 35%)	14.9%
N. <u>Selected Before-Tax Target Underwriting Profit</u>	<u>13.0%</u>

The Surplus Allocation exhibit requires a 14.8% return on earned premium from underwriting and investment activities.

Since the after-tax return on homeowners earned premium from investment income is 5.1%, the difference of 9.7% is the projected underwriting after-tax gain. Assuming a tax rate of 35%, the before-tax underwriting profit is 14.9% as a percentage of earned premium.

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Calculation of Investment Income Adjustment Factors  
Explanatory Notes of Calculation of Investment Income Adjustment Factors

A. Unearned Premium Reserve

1. Direct Earned Premium from page 14 of the annual statement for the calendar-year 2007.

2. Direct Mean Unearned Premium Reserve	<u>Homeowners</u>
a. Direct unearned premium reserve as of 12/06	8,215,225
b. Direct unearned premium reserve as of 12/07	7,156,684
c. Direct mean unearned premium reserve (a + b)/2	7,685,955

3. Deduction for Prepaid Expenses: Production costs and a large part of the other company expenses in connection with the writing and handling of insurance policies, exclusive of claim adjustment expense, are incurred when the policy is written and before the premium is paid. Therefore, the deduction for these expenses is determined by use of the provisions for expenses used in our ratemaking procedures, as shown.

4. Revenue Offset: The Internal Revenue Code allows only 80% of the change in unearned premium reserve as a deduction. The limitation of the deduction is accomplished through an adjustment to statutory income whereby 20% of the unearned premium reserve change is added to statutory income for tax purposes.

a. Homeowners:  $.35 \times .20 \times (7156684 - 8215225) =$  (74,098)

5. Line (2) x (3E)

6. Net Subject to Investment (2)-(4)-(5)

B. Delayed Remission of Premium

1. Average Uncollected Balance: The ratio used is the countrywide mean premium and agents' balance in the course of collection as a percentage of earned premium. (Source: Annual Statement)

	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>Total</u>
Premiums & agents' balance	1,139,045,538	1,187,699,182	1,171,517,035	3,498,261,755
Premiums, agents' balances, & installments booked but deferred and not yet due	4,388,886,339	4,561,569,509	4,261,991,089	13,212,446,937
Total	5,527,931,877	5,749,268,691	5,433,508,124	16,710,708,692
Earned Premium	19,306,241,118	19,699,572,370	20,319,183,986	59,324,997,474
Ratio	28.6%	29.2%	26.7%	28.2%

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Calculation of Investment Income Adjustment Factors  
Explanatory Notes of Calculation of Investment Income Adjustment Factors

C. Loss + LAE Reserve: Determined by multiplying the expected incurred Loss + LAE by the ratio of the direct mean Loss + LAE reserve to the direct incurred Loss + LAE. This countrywide ratio is determined as follows: (See Page 6)

1. Direct Earned Premium from Page 14 of the Annual Statement.
2. Permissible Incurred Loss + LAE = Expected Loss Ratio x Line C1 by line
3. Expected Mean Loss + LAE = ((Direct Mean Loss + LAE) / Direct Incurred Loss + LAE) x C2

	<u>Homeowners</u>
a. Direct Paid Loss + LAE for 2007	1,142,152,119
b. Direct Loss + LAE Reserve as of 12/06	781,286,947
c. Direct Loss + LAE Reserve as of 12/07	851,867,793
d. Direct Incurred Loss + LAE = a - b + c	1,212,732,964
e. Direct Mean Loss + LAE Reserve = (b + c)/2	816,577,370
f. State Reserve Ratio = e / d	0.6733

4. Deduction for Federal Taxes (See Page 5)
5. Loss Reserve Subject to Investment = C3 - C4

D. Policyholders' Surplus (See Page 6)

E. Net Subject to Investment = A6 - B2 + C5 + D

F. Average Rate of Return (See Page 6)

G. Projected Investment Earnings = E x F

H. Before-Tax Return of Earned Premium = G / A1

I. Federal Income Tax Provision (See Page 6)

J. After-Tax Return on Earned Premium = (G - (G x I)) / Direct Earned Premium

K. After-Tax Target Return on Earned Premium (See Page 6)

L. After-Tax Target Underwriting Profit = K - J

M. Before-Tax Target Underwriting Profit = L / 0.35 (Assuming a tax rate of 35%)

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Calculation of Investment Income Adjustment Factors  
Deduction for Federal Taxes Payable on Loss Reserves

Homeowner's (Countrywide)	Statutory Reserves (Undiscounted)		Tax Reserves (Discounted)	
	2006	2007	2006	2007
<u>Year of Loss</u>				
1996 & Prior	6,850,011	2,066,761	6,420,586	1,995,956
1997	1,868,797	969,850	1,658,286	886,370
1998	1,892,054	1,386,583	1,631,284	1,230,834
1999	2,293,854	517,765	1,948,870	446,504
2000	2,424,524	1,596,555	2,051,586	1,363,369
2001	4,595,996	2,813,249	3,973,183	2,385,984
2002	9,638,008	4,252,386	8,090,549	3,691,220
2003	17,935,425	7,954,199	15,863,507	6,762,183
2004	34,165,548	14,803,018	30,365,348	13,220,250
2005	208,277,800	204,496,172	187,090,533	183,329,591
2006	336,735,600	75,261,827	313,135,149	68,313,053
2007		373,925,948		349,514,566
Total	626,677,617	690,044,314	572,228,881	633,139,880
			<u>2006</u>	<u>2007</u>
			0.9131	0.9175

Ratio of Discounted to Statutory Reserves:

Arkansas Homeowners Liability Loss + ALAE Reserve as of 12/06 x 1.178 = 4,816,014  
Arkansas Homeowners Liability Loss + ALAE Reserve as of 12/07 x 1.178 = 3,856,308

Deduction for Federal Taxes Payable = 139,062  
.35 x [4816014 - 0 - (4816014 x 0.9175) + (0 x 0.9131)] =

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
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Calculation of Investment Income Adjustment Factors  
Surplus Allocation

	<u>2005</u>	<u>2006</u>	<u>2007</u>
1. Year End Property Casualty Policyholder Surplus	17,226,532,794	20,155,707,469	22,182,414,313
2. Net Written Premium	19,289,915,748	20,061,740,575	20,411,528,208
3. Premium to Surplus Ratio	1.12	1.00	0.92
4. Three Year Average			1.01
5. Earned Premium			14,657,794
6. Allocated Equity			14,465,000
7. Target Return on Equity			15.0%
8. Return on Earned Premium			14.8%

The average rate of return is based on the two year average ratio of net investment income to invested assets.  
Source: Annual Statement

	<u>2006</u>	<u>2007</u>	<u>Total</u>
1. Net Investment Income Earned	3,119,291,151	3,470,191,686	6,589,482,837
2. Net Realized Capital Gains	(261,223,519)	(80,577,971)	(341,801,490)
3. Invested Assets	64,560,270,033	66,404,637,019	130,964,907,052
4. Ratio	4.4%	5.1%	4.8%

Federal Income Tax Provision

Detailed below is the calculation of the federal income tax rate on net investment income earned for The Travelers Property Casualty Corp. for 2007

	(In Thousands)
1. Statutory net investment income	4,578,336
2. Tax exempt interest	(1,539,865)
3. 70% Dividends received deduction	(11,877)
4. 42% Dividends received deduction	(2,431)
5. 15% Proration adj. on TEI	232,149
6. Other Adjustments	0
7. Taxable net investment income (1+2+3+4+5+6)	3,256,312
8. Tax on net investment income (7 x .35)	1,139,709
9. FIT rate on NII (8 / 1)	24.9%

## ARKANSAS HOMEOWNERS

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Dwelling Policy Forms  
 Trended Ultimate Losses

All Price Tracks Combined

Accident Year Ending 9/30	2005	2006	2007	2008	2009
(1) Earned Premium	11,175,327	13,605,620	14,728,768	12,849,067	11,151,588
(2) Earned Premium at Current Rates Factor	1.450	1.363	1.332	1.252	1.183
(3) Earned Premium at Current Rates (1) x (2)	16,202,966	18,544,223	19,623,351	16,086,853	13,191,076
(4) Premium Trend Factor	1.181	1.143	1.108	1.075	1.044
(5) Trended Earned Premium at Current Rates (3) x (4)	19,128,404	21,200,657	21,747,237	17,298,157	13,774,966
(6) Incurred Losses & ALAE	6,778,331	9,951,027	7,141,741	9,614,606	4,527,343
(7) Loss Development Factor	1.000	1.000	1.000	1.000	1.080
(8) Ultimate Losses & ALAE (6) x (7)	6,778,331	9,951,027	7,141,741	9,614,606	4,887,740
(9) Unallocated Factor + 1.000	1.178	1.178	1.178	1.178	1.178
(10) Ultimate Losses & LAE (8) x (9)	7,984,874	11,722,310	8,412,971	11,326,006	5,757,758
(11) Loss Trend Factor	1.344	1.280	1.219	1.160	1.105
(12) Trended Ultimate Losses & LAE (10) x (11)	10,730,993	15,003,609	10,255,164	13,143,292	6,363,432

ARKANSAS HOMEOWNERS

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Territory Base Rate Revisions  
Dwelling - Super Preferred

Territory	Current	Territory	Proposed
1	781	1	820
2	781	2	843
3	760	3	798
4	477	4	515
5	760	5	821
6	536	6	579
7	536	7	579
8	760	8	821
9	781	9	820
10	781	10	859
11	781	11	820
12	774	12	836
13	781	13	843
14	796	14	876
15	564	15	609
16	998	16	1,048
17	781	17	859
18	883	18	927
19	781	19	820
20	781	20	843
21	668	21	701
22	556	22	584
23	564	23	609
24	781	24	843
25	781	25	820
26	579	26	625
27	756	27	816
28	804	28	844
29	781	29	859
33	775	33	853
37	781	37	820
38	781	38	820
39	789	39	828
40	855	40	941
44	855	44	941
45	855	45	898
46	781	46	820
47	806	47	887
48	781	48	859
49	781	49	843
50	637	50	669
51	760	51	821

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
THE AUTOMOBILE INSURANCE COMPANY OF HARFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Territory Base Rate Revisions  
Dwelling - Super Preferred

Territory	Current	Territory	Proposed
52	760	52	821
53	781	53	859
54	943	54	990
55	781	55	820
56	781	56	843
57	781	57	859
58	781	58	843
59	518	59	570
60	574	60	620
61	788	61	827
62	781	62	859
63	781	63	820
64	753	64	813
65	781	65	843
66	781	66	820
67	608	67	657
68	774	68	813
69	810	69	851
70	549	70	593
71	774	71	836
72	781	72	843
73	778	73	840
74	781	74	859
75	781	75	820
76	781	76	843
77	536	77	590
78	644	78	696
79	486	79	535
80	750	80	788
81	781	81	820
82	781	82	843
83	618	83	667
84	618	84	667

ARKANSAS HOMEOWNERS

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THE AUTOMOBILE INSURANCE COMPANY OF HARFORD, CONNECTICUT  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Territory Base Rate Revisions  
Dwelling - Preferred

Territory	Current	Territory	Proposed
1	1,023	1	1,074
2	1,023	2	1,105
3	996	3	1,046
4	624	4	674
5	996	5	1,076
6	703	6	759
7	703	7	759
8	996	8	1,076
9	1,023	9	1,074
10	1,023	10	1,125
11	1,023	11	1,074
12	1,011	12	1,092
13	1,023	13	1,105
14	1,041	14	1,145
15	738	15	797
16	1,305	16	1,370
17	1,023	17	1,125
18	1,156	18	1,214
19	1,023	19	1,074
20	1,023	20	1,105
21	874	21	918
22	729	22	765
23	738	23	797
24	1,023	24	1,105
25	1,023	25	1,074
26	759	26	820
27	990	27	1,069
28	1,051	28	1,104
29	1,023	29	1,125
33	1,014	33	1,115
37	1,023	37	1,074
38	1,023	38	1,074
39	1,034	39	1,086
40	1,118	40	1,230
44	1,118	44	1,230
45	1,118	45	1,174
46	1,023	46	1,074
47	1,054	47	1,159
48	1,023	48	1,125
49	1,023	49	1,105
50	834	50	876
51	996	51	1,076

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Territory Base Rate Revisions  
Dwelling - Preferred

Territory	Current	Territory	Proposed
52	996	52	1,076
53	1,023	53	1,125
54	1,236	54	1,298
55	1,023	55	1,074
56	1,023	56	1,105
57	1,023	57	1,125
58	1,023	58	1,105
59	679	59	747
60	752	60	812
61	1,033	61	1,085
62	1,023	62	1,125
63	1,023	63	1,074
64	986	64	1,065
65	1,023	65	1,105
66	1,023	66	1,074
67	796	67	860
68	1,011	68	1,062
69	1,060	69	1,113
70	720	70	778
71	1,011	71	1,092
72	1,023	72	1,105
73	1,018	73	1,099
74	1,023	74	1,125
75	1,023	75	1,074
76	1,023	76	1,105
77	703	77	773
78	841	78	908
79	636	79	700
80	982	80	1,031
81	1,023	81	1,074
82	1,023	82	1,105
83	808	83	873
84	808	84	873

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Territory Base Rate Revisions  
Dwelling - Regular

Territory	Current	Territory	Proposed
1	1,237	1	1,299
2	1,237	2	1,361
3	1,204	3	1,264
4	754	4	829
5	1,204	5	1,324
6	850	6	935
7	850	7	935
8	1,204	8	1,324
9	1,237	9	1,299
10	1,237	10	1,423
11	1,237	11	1,299
12	1,224	12	1,346
13	1,237	13	1,361
14	1,260	14	1,449
15	892	15	981
16	1,578	16	1,657
17	1,237	17	1,423
18	1,396	18	1,466
19	1,237	19	1,299
20	1,237	20	1,361
21	1,057	21	1,110
22	880	22	924
23	892	23	981
24	1,237	24	1,361
25	1,237	25	1,299
26	916	26	1008
27	1,198	27	1,318
28	1,269	28	1,332
29	1,237	29	1,423
33	1,226	33	1,410
37	1,237	37	1,299
38	1,237	38	1,299
39	1,251	39	1,314
40	1,352	40	1,555
44	1,352	44	1,555
45	1,352	45	1,420
46	1,237	46	1,299
47	1,275	47	1,466
48	1,237	48	1,423
49	1,237	49	1,361
50	1,008	50	1,058
51	1,204	51	1,324

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Territory Base Rate Revisions  
Dwelling - Regular

Territory	Current	Territory	Proposed
52	1,204	52	1,324
53	1,237	53	1,423
54	1,494	54	1,569
55	1,237	55	1,299
56	1,237	56	1,361
57	1,237	57	1,423
58	1,237	58	1,361
59	820	59	943
60	909	60	1000
61	1,249	61	1,311
62	1,237	62	1,423
63	1,237	63	1,299
64	1,192	64	1,311
65	1,237	65	1,361
66	1,237	66	1,299
67	962	67	1058
68	1,224	68	1,285
69	1,282	69	1,346
70	870	70	957
71	1,224	71	1,346
72	1,237	72	1,361
73	1,231	73	1,354
74	1,237	74	1,423
75	1,237	75	1,299
76	1,237	76	1,361
77	850	77	978
78	1,018	78	1,120
79	770	79	886
80	1,186	80	1,245
81	1,237	81	1,299
82	1,237	82	1,361
83	978	83	1076
84	978	84	1076

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Territory Base Rate Revisions  
Dwelling - Near Standard

Territory	Current	Territory	Proposed
1	1,856	1	1,949
2	1,856	2	2,042
3	1,807	3	1,897
4	1,132	4	1,245
5	1,807	5	1,988
6	1,275	6	1,403
7	1,275	7	1,403
8	1,807	8	1,988
9	1,856	9	1,949
10	1,856	10	2,134
11	1,856	11	1,949
12	1,836	12	2,020
13	1,856	13	2,042
14	1,891	14	2,175
15	1,339	15	1,473
16	2,367	16	2,485
17	1,856	17	2,134
18	2,096	18	2,201
19	1,856	19	1,949
20	1,856	20	2,042
21	1,587	21	1,666
22	1,323	22	1,389
23	1,339	23	1,473
24	1,856	24	2,042
25	1,856	25	1,949
26	1,377	26	1,515
27	1,797	27	1,977
28	1,906	28	2,001
29	1,856	29	2,134
33	1,840	33	2,116
37	1,856	37	1,949
38	1,856	38	1,949
39	1,875	39	1,969
40	2,029	40	2,333
44	2,029	44	2,333
45	2,029	45	2,130
46	1,856	46	1,949
47	1,914	47	2,201
48	1,856	48	2,134
49	1,856	49	2,042
50	1,513	50	1,589
51	1,807	51	1,988

ARKANSAS HOMEOWNERS

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Territory Base Rate Revisions  
Dwelling - Near Standard

Territory	Current	Territory	Proposed
52	1,807	52	1,988
53	1,856	53	2,134
54	2,241	54	2,353
55	1,856	55	1,949
56	1,856	56	2,042
57	1,856	57	2,134
58	1,856	58	2,042
59	1,230	59	1,415
60	1,365	60	1,502
61	1,872	61	1,966
62	1,856	62	2,134
63	1,856	63	1,949
64	1,789	64	1,968
65	1,856	65	2,042
66	1,856	66	1,949
67	1,443	67	1,587
68	1,836	68	1,928
69	1,922	69	2,018
70	1,304	70	1,434
71	1,836	71	2,020
72	1,856	72	2,042
73	1,848	73	2,033
74	1,856	74	2,134
75	1,856	75	1,949
76	1,856	76	2,042
77	1,275	77	1,466
78	1,528	78	1,681
79	1,155	79	1,328
80	1,782	80	1,871
81	1,856	81	1,949
82	1,856	82	2,042
83	1,466	83	1,613
84	1,466	84	1,613

ARKANSAS HOMEOWNERS

THE STANDARD FIRE INSURANCE COMPANY  
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 THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Rule 414 – Loss Free Customer Credit

**414. LOSS FREE CUSTOMER CREDIT**

The Loss Free Customer Credit is applicable to all Homeowners policies if the account has been loss free for three or more years. If a claim that has caused the credit to be suspended is closed without payment, the credit will be resumed at renewal. This credit is applicable for both new and renewal business. For the purposes of this rule, a policy meeting the following conditions in the last three years, at the current or previous residence, would meet the definition of being “loss free”:

a claim where an amount less than \$500 has been paid on the policy, or two or more claims where an amount has been paid on the policy, however, the aggregate for these claims is less than \$500

The credit is applied at the new business or renewal date and is only removed at the next applicable policy renewal after a qualifying applicable loss.

The Homeowners account must be “loss free” for three subsequent renewals following an applicable loss. The credit is applied at the time of the fourth policy renewal.

**Note:** When a loss occurs prior to the renewal effective date but after the renewal is issued, the credit is removed for the following three renewal periods.

The premium credit shown below is applied to the TOTAL PREMIUM including all endorsements and upgraded coverage, but not including charges for Personal Liability Umbrella Supplement, Valuable Items -Plus endorsement, Identity Fraud Coverage, Workers Compensation endorsement, or any regulatory or governmental assessments of any type.

Number of Years	Loss Free Percentage Credit	
Three years or greater	<del>10%</del>	15%

Objection 1

- Filing Package (Supporting Document)

Comment: Verify that the hurricane losses in Exhibit are losses that occurred in AR.

Response

The hurricane losses in Exhibit 8, page 3 are Arkansas specific losses, pulled as of November 2009.