

SERFF Tracking Number: ANPC-126522833 State: Arkansas
 First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
 ...
 Company Tracking Number: 03-H-G-10-0232
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
 Project Name/Number: /399008

Filing at a Glance

Companies: American National General Insurance Company, American National Property And Casualty Company
 Product Name: Homeowners SERFF Tr Num: ANPC-126522833 State: Arkansas
 TOI: 04.0 Homeowners SERFF Status: Closed-Filed State Tr Num: EFT \$100
 Sub-TOI: 04.0000 Homeowners Sub-TOI Co Tr Num: 03-H-G-10-0232 State Status: Fees verified and received
 Combinations
 Filing Type: Rate/Rule Reviewer(s): Becky Harrington, Betty Montesi
 Author: Rebecca Rast Disposition Date: 08/30/2010
 Date Submitted: 07/13/2010 Disposition Status: Filed
 Effective Date Requested (New): 09/28/2010 Effective Date (New): 09/28/2010
 Effective Date Requested (Renewal): 09/28/2010 Effective Date (Renewal): 09/28/2010

State Filing Description:

General Information

Project Name: Status of Filing in Domicile:
 Project Number: 399008 Domicile Status Comments:
 Reference Organization: Reference Number:
 Reference Title: Advisory Org. Circular:
 Filing Status Changed: 08/30/2010
 State Status Changed: 07/14/2010 Deemer Date:
 Created By: Kelly Bennett Submitted By: Rebecca Rast
 Corresponding Filing Tracking Number: 03-H-G-10-0234
 Filing Description:
 American National Property And Casualty Company hereby files the following for use with our Homeowners Insurance Program:

Pages Filed Edition
 GR-5 and GR-7 (6-10)
 H-Z-1 and H-Z-2 (6-10)
 HR-1.001 through HR-1.014 (6-10)
 HR-2.001 through HR-2.004 (6-10)

SERFF Tracking Number: ANPC-126522833 State: Arkansas
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HR-3.001 through HR-3.008 (6-10)
HSP-1.001 and HSP-1.002 (6-10)
H-P-Index (6-10)
H-P-1 through H-P-26 (6-10)

These pages replace the following pages currently on file with your department:

Pages Replaced Edition

GR-5 and GR-7 (3-09)
H-Z-1 (7-04)
HR-1.001 through HR-1.014 (3-09)
HR-2.001 through HR-2.004 (3-09)
HR-3.001 through HR-3.006 (3-09)
HSP-1.001 and HSP-1.002 (3-09)
H-P-Index (3-09)
H-P-1 through H-P-27 (3-09)

American National General Insurance Company hereby files the following for use with our Homeowners Insurance Program:

Pages Filed Edition

GR-4 through GR-6 (6-10)
H-Z-1 and H-Z-2 (6-10)
HR-1.001 through HR-1.009 (6-10)
HR-2.001 through HR-2.003 (6-10)
HR-3.001 through HR-3.005 (6-10)
H-P-Index (6-10)
H-P-1 through H-P-25 (6-10)

These pages replace the following pages currently on file with your department:

Pages Replaced Edition

GR-4 through GR-6 (3-09)
H-Z-1 (7-04)
HR-1.001 through HR-1.009 (3-09)
HR-2.001 through HR-2.003 (3-09)
HR-3.001 through HR-3.004 (3-09)

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H-P-Index (3-09)
H-P-1 through H-P-26 (3-09)

The purpose of this filing is to implement various changes in our Homeowners Program in Arkansas. Please see accompanying actuarial memorandum and exhibits for more detail on the rate change.

Homeowner General Rule Page Revisions

Rule XIV, Premium Determination, has been revised. The Equipment Breakdown endorsement and the Stolen Identity Package endorsement will be calculated after discounts are applied (similar to the current calculation of the Earthquake endorsement).

Rule XVI, Minimum Premium has been revised. Similar to the Earthquake endorsement premium, premium for Equipment Breakdown Coverage and the Stolen Identity Package will now also be excluded when calculating the minimum premium.

Territorial Zone Definitions Revisions

Numerous revisions were made to the Territorial Zone pages. Zones 1 through Zone 8, Zone 10, Zone 12, and Zone 26 were revised in relation to the titles and counties within that zone. Zone 38 through Zone 44 have been added to these pages. Please refer to the HZ pages for complete details.

Miscellaneous Rate and Endorsement Page Revisions

Along with revisions to some endorsement rates and minor editorial changes, the following revisions were made:

With this filing we are introducing new 0.5% Deductible options. The 0.5% All Peril, \$1,000/0.5% Wind/Hail, and \$2,000/0.5% Wind/Hail Deductible options will now be available for new business and renewal business.

Endorsement Rules were modified to include the new deductible options.

Rule C, Claim Free Plus, has been revised with regard to risk scores. In the past, the risk score utilized in determining the Claim Free Plus Discount was not changed unless the score improved. This means that the discount percentage could only increase or stay the same as a result of changes in the account risk score. With this change, we will begin applying the current account risk score at each renewal, and adjusting the discount accordingly. This means that the Claim Free Plus Discount percentage may increase or decrease at each renewal as a result of changes to the account risk score.

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Additionally, we have made two editorial revisions to Rule C. Claim Free Plus to allow for future flexibility. First, we have revised the rule to indicate that account risk scores will be updated periodically. Second, we have removed the reference to Attract Risk Score and replaced it with account risk score. No changes were made to the frequency with which we are currently ordering reports or the risk score model we are currently using.

Rating factors in Rule D, Utilities/Roof Rating Plan, were revised.

The Tri-Line Client discount has been renamed TLC Tri-Line CoverageSM Discount in our manual pages to match the registered service mark for this discount. The TLC Discount has also been editorially revised to remove reference to Earthquake Coverage premium being excluded from receiving the TLC discount. Since this detail is explained in the premium determination rule, we removed this reference within the TLC rule. Additionally, TLC has been revised to provide further clarification of the types of permanent life insurance policies that will qualify a Home for the TLC Discount. We have clarified by adding Whole Life with term rider as a qualifying permanent life insurance policy. This revision was made for clarification purposes only, and does not change any of the current TLC life qualification requirements.

We have added a note to the Earthquake Endorsements, SH-9878 and SH-91260, that these endorsements are only available for renewals that currently have this endorsement.

Loss Assessment Coverage for Earthquake, SH-6877, is being withdrawn as we do not have any policyholders with this endorsement and we no longer wish to offer this coverage.

The rule for Equipment Breakdown Coverage, SH-91909, was revised to increase the premium amounts and to reflect the increase in the deductible amount for each occurrence from \$500 to \$1,000.

We propose this filing become effective September 28, 2010, for new business and renewals. Please note that we have made a corresponding rental owners rate and rule filing in American National Property And Casualty Company with the same effective dates.

If you have any questions regarding this filing, please contact me at 417-887-0220, extension #2057, fax number 417-877-5014, or via my E-mail address listed below.

Please acknowledge receipt and approval in your usual manner.

Sincerely,

SERFF Tracking Number: ANPC-126522833 State: Arkansas
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 Product Name: Homeowners
 Project Name/Number: /399008

Rebecca Rast
 Regulatory Compliance Analyst II
 E-mail: rrast@anpac.com

Company and Contact

Filing Contact Information

Kelly Bennett, Regulatory Compliance Analyst II kbennett@anpac.com
 American National Corporate Centre 417-887-4990 [Phone] 2009 [Ext]
 1949 E. Sunshine 417-877-5014 [FAX]
 Springfield, MO 65899-0251

Filing Company Information

American National General Insurance Company	CoCode: 39942	State of Domicile: Missouri
American National Corporate Centre	Group Code: 408	Company Type: Property and Casualty
1949 East Sunshine	Group Name:	State ID Number:
Springfield, MO 65899-0251	FEIN Number: 43-1223793	
(417) 887-4990 ext. [Phone]		

American National Property And Casualty Company	CoCode: 28401	State of Domicile: Missouri
American National Corporate Centre	Group Code: 408	Company Type: Property And Casualty
1949 East Sunshine	Group Name:	State ID Number:
Springfield, MO 65899-0251	FEIN Number: 43-1010895	
(417) 887-4990 ext. [Phone]		

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? No
 Fee Explanation: Rate Filing= \$100
 Per Company: No

SERFF Tracking Number: ANPC-126522833 State: Arkansas
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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American National General Insurance Company	\$0.00	07/13/2010	
American National Property And Casualty Company	\$100.00	07/13/2010	37921443

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 Product Name: Homeowners
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Becky Harrington	08/30/2010	08/30/2010

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	08/06/2010	08/06/2010	Rebecca Rast	08/27/2010	08/27/2010
Pending Industry Response	Becky Harrington	07/14/2010	07/14/2010	Rebecca Rast	07/21/2010	07/21/2010

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Rate	ANPAC and ANG Territorial Zone Pages	Rebecca Rast	07/28/2010	07/28/2010

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 Company Tracking Number: 03-H-G-10-0232
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 Product Name: Homeowners
 Project Name/Number: /399008

Disposition

Disposition Date: 08/30/2010
 Effective Date (New): 09/28/2010
 Effective Date (Renewal): 09/28/2010
 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):
American National General Insurance Company	25.500%	0.400%	\$899	324	\$207,187	20.000%	-39.400%
American National Property And Casualty Company	25.500%	2.200%	\$98,029	4,931	\$4,484,631	20.000%	-58.200%

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	25.500%
Overall Percentage Rate Impact For This Filing	2.100%
Effect of Rate Filing-Written Premium Change For This Program	\$98,928

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Effect of Rate Filing - Number of Policyholders Affected 5,255

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 Product Name: Homeowners
 Project Name/Number: /399008

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 (revised)	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC loss cost data entry document		Yes
Supporting Document	NAIC loss cost data entry document		Yes
Supporting Document	Actuarial Memorandum	Filed	Yes
Supporting Document	Exhibits	Filed	Yes
Supporting Document	Supplemental Exhibit 7-21-10	Filed	Yes
Supporting Document	Supplemental Exhibit 8-27-10	Filed	Yes
Rate	ANPAC General Rules	Filed	Yes
Rate (revised)	ANPAC and ANG Territorial Zone Pages	Filed	Yes
Rate	ANPAC and ANG Territorial Zone Pages		Yes
Rate (revised)	ANPAC Rate Pages	Filed	Yes
Rate	ANPAC Rate Pages		Yes
Rate	ANPAC Special Exception Rate Pages	Filed	Yes
Rate	ANPAC Miscellaneous and Endorsement Coverages Pages	Filed	Yes
Rate	ANG General Rule Pages	Filed	Yes
Rate (revised)	ANG Rate Pages	Filed	Yes
Rate	ANG Rate Pages		Yes
Rate	ANG Miscellaneous and Endorsement Coverages Pages	Filed	Yes
Rate (revised)	Revised SERFF Rate Data	Filed	Yes
Rate	Revised SERFF Rate Data		Yes

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Company Tracking Number: 03-H-G-10-0232
TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
Product Name: Homeowners
Project Name/Number: /399008

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 08/06/2010
Submitted Date 08/06/2010

Respond By Date

Dear Kelly Bennett,

This will acknowledge receipt of the recent response.

Please amend the overall increase to 6% (individual increases capped at 20%) per Commissioner Bradford.

Objection 1

No Objections

Comment: Please confirm that the change in determining the claim free plus discount will not be considered a change in the risk characteristics of the insured.

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

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Product Name: Homeowners
Project Name/Number: /399008

Response Letter

Response Letter Status Submitted to State
Response Letter Date 08/27/2010
Submitted Date 08/27/2010

Dear Becky Harrington,

Comments:

We are evenly reducing the base rates to comply with the overall increase prescribed by the Commissioner. We will continue to apply a 20% cap on rate increases at renewal. Pages 3-7 of Revised Exhibit IX display the new proposed base rate information. The capped increase is +2.1% with a revenue impact of \$98,928. The overall uncapped percent change is +5.8% with a revenue impact of \$272,065. We currently have a post submission pending with you, so I am not able to send a second post submission update to revise the SERFF Rate Data figures. As a result, I have just attached an new SERFF Rate Data Pdf for your records.

Response 1

Comments: Any decrease in Claim Free Plus discount due to this rule change will not be considered a change in the risk characteristics of the insured. Any increase in premium due to this change will be subject to capping.

Related Objection 1

Comment:

Please confirm that the change in determining the claim free plus discount will not be considered a change in the risk characteristics of the insured.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: NAIC loss cost data entry document

Comment:

Satisfied -Name: Supplemental Exhibit 8-27-10

Comment:

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

SERFF Tracking Number: ANPC-126522833 State: Arkansas
 First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
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 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
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Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
ANPAC Rate Pages	HR-1.001 to HR-1.014 (8-10), Replacement HR-2.001 to HR-3.008 (6-10)		
Previous Version			
ANPAC Rate Pages	HR-1.001 to HR-3.008 (6-10)	Replacement	
ANG Rate Pages	HR-1.001 to HR-1.009 (8-10), Replacement HR-2.001 to HR-3.005 (6-10)		
Previous Version			
ANG Rate Pages	HR-1.001 to HR-3.005 (6-10)	Replacement	
Revised SERFF Rate Data		Replacement	
Previous Version			
Revised SERFF Rate Data		Replacement	
Thank you for your time.			

Sincerely,
 Rebecca Rast

SERFF Tracking Number: ANPC-126522833 State: Arkansas
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Company Tracking Number: 03-H-G-10-0232
TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
Product Name: Homeowners
Project Name/Number: /399008

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 07/14/2010

Submitted Date 07/14/2010

Respond By Date

Dear Kelly Bennett,

This will acknowledge receipt of the captioned filing.

Objection 1

- Exhibits (Supporting Document)

Comment: The maximum increase amounts are excessive and unacceptable. Please revise the filing so that no insured receives more than a 20% increase.

Objection 2

- Actuarial Memorandum (Supporting Document)

- Exhibits (Supporting Document)

Comment: Arkansas is not allowing the use of wind/hail or CAT models. Please amend the indications by using historical AR data.

The overall rate change amount will be subject to Commissioner Bradford's review.

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

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Response Letter

Response Letter Status Submitted to State
 Response Letter Date 07/21/2010
 Submitted Date 07/21/2010

Dear Becky Harrington,

Comments:

Please see our responses below to your objection on July 14, 2010.

Response 1

Comments: We will apply a 20% cap on rate increases at renewal. This capping procedure will not apply to changes in coverage or to changes in risk characteristics of the insured. In other words, some policyholders may see premium increases in excess of 20% of last year's premium. The capped increase is +12.1% with a revenue impact of \$566,529. The overall uncapped percent change remains +24.7% with a revenue impact of \$1,157,231.

Related Objection 1

Applies To:

- Exhibits (Supporting Document)

Comment:

The maximum increase amounts are excessive and unacceptable. Please revise the filing so that no insured receives more than a 20% increase.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: NAIC loss cost data entry document

Comment:

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
Revised SERFF Rate Data		Replacement	

SERFF Tracking Number: ANPC-126522833 State: Arkansas
First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
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Response 2

Comments: With this supplement, we are removing the modeled wind/hail loss provision. Instead, we are including a wind/hail provision based on 16 years of Arkansas wind/hail experience. The catastrophe frequency and severity are calculated for each year from 1/1/94 to 12/31/09. The severities have been developed to ultimate and have been adjusted for inflation using the annual changes in the average policy amount limits. The amended indication of +25.5% is displayed in Supplemental Exhibit A.

Related Objection 1

Applies To:

- Actuarial Memorandum (Supporting Document)
- Exhibits (Supporting Document)

Comment:

Arkansas is not allowing the use of wind/hail or CAT models. Please amend the indications by using historical AR data.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Supplemental Exhibit 7-21-10

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you for your time.

Sincerely,
Rebecca Rast

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Product Name: Homeowners
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Amendment Letter

Submitted Date: 07/28/2010

Comments:

Dear Ms. Harrington,
We are submitting to you our revise Territorial Zone Pages. We have revised our new Zone 40 to remove Hot Springs Village. Please refer to the attached H-Z-2 (6-10B) for this update. This will replace the recently submitted H-Z-2 (6-10).

Thank you for your time.

Sincerely,
Rebecca Rast

Changed Items:

Rate/Rule Schedule Item Changes:

Exhibit Name:	Rule # or Page #:	Rate Action:	Previous State Filing Number:	Attach Document:
ANPAC and ANGH-Z-1 and H-Z-2 (6-10) Territorial Zone Pages	Replacement			AR ANP-ANG HZ 6-10B.pdf

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Post Submission Update Request Processed On 08/30/2010

Status: Disallowed
Created By: Rebecca Rast
Processed By: Becky Harrington
Comments:

Company Rate Information:

Company Name: American National General Insurance Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	25.500%	42.400%
Overall % Rate Impact	12.100%	24.900%
Written Premium Change for this Program	\$543346	\$1116375
Maximum %Change (where required)	20.000%	166.500%

Company Name: American National Property And Casualty Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	25.500%	42.400%
Overall % Rate Impact	11.200%	19.700%
Written Premium Change for this Program	\$23183	\$40856
Maximum %Change (where required)	20.000%	76.000%

Overall Rate Information:

Field Name	Requested Change	Prior Value
Overall Percentage Rate Indicated For This Filing	25.500%	42.400%
Overall Percentage Rate Impact For This Filing	12.100%	24.700%

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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: 9.300%
 Effective Date of Last Rate Revision: 06/24/2009
 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):
American National General Insurance Company	42.400%	24.900%	\$1,116,375	4,931	\$4,484,631	166.500%	-50.600%
American National Property And Casualty Company	42.400%	19.700%	\$40,856	324	\$207,187	76.000%	-28.500%

Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated: 42.400%

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Overall Percentage Rate Impact For This Filing: 24.700%
Effect of Rate Filing - Written Premium Change For This Program: \$1,157,231
Effect of Rate Filing - Number of Policyholders Affected: 5255

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Rate/Rule Schedule

Schedule Item	Exhibit Name:	Rule # or Page	Rate Action	Previous State Filing Attachments
Status:		#:		Number:
Filed 08/30/2010	ANPAC General Rules	GR-5 and GR-7	Replacement	AR ANP GR 6-10.pdf
		(6-10)		
Filed 08/30/2010	ANPAC and ANG	H-Z-1 and H-Z-2	Replacement	AR ANP-ANG HZ 6-
	Territorial Zone Pages	(6-10)		10B.pdf
Filed 08/30/2010	ANPAC Rate Pages	HR-1.001 to HR-	Replacement	AR ANP HR-1.001-
		1.014 (8-10),		3.008 8-10.pdf
		HR-2.001 to HR-		
		3.008 (6-10)		
Filed 08/30/2010	ANPAC Special	HSP-1.001 and	Replacement	AR ANP HSP-1.001-
	Exception Rate Pages	HSP-1.002 (6-		1.002 6-10.pdf
		10)		
Filed 08/30/2010	ANPAC Miscellaneous	H-P-Index, H-P-	Replacement	AR ANP HP 6-10.pdf
	and Endorsement	1 to H-P-26 (6-		
	Coverages Pages	10)		
Filed 08/30/2010	ANG General Rule	GR-4 to GR-6	Replacement	AR ANG GR 6-10.pdf
	Pages	(6-10)		
Filed 08/30/2010	ANG Rate Pages	HR-1.001 to HR-	Replacement	AR ANG HR-1.001-
		1.009 (8-10),		3.005 8-10.pdf
		HR-2.001 to HR-		
		3.005 (6-10)		

SERFF Tracking Number: ANPC-126522833 State: Arkansas
First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
...
Company Tracking Number: 03-H-G-10-0232
TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
Product Name: Homeowners
Project Name/Number: /399008

Filed 08/30/2010 ANG Miscellaneous H-P-Index, H-P- Replacement AR ANG HP 6-10.pdf
and Endorsement 1 to H-P-25 (6-
Coverages Pages 10)

Filed 08/30/2010 Revised SERFF Rate Replacement SERFF RATE INFO
Data ANP-ANG Multiple
Company Home 8-27-
10.pdf

XIV. PREMIUM DETERMINATION

A. Calculation of Adjusted Base Premium

In this order, multiply the base rate by the following if the adjustment is applicable. Round each individual adjustment to three decimal places. After all adjustments are applied, round to the nearest whole dollar.

1. Determine base rate from Base Rates table according to zone, protection class, and construction type.
 2. Amount of Insurance factor.
 3. Deductible Adjustment factor.
 4. Utilities/Roof Rating Plan factor (Applies to Policy Forms 3 and 7).
 5. Protective Device Credit factor.
 6. Claim Free Plus factor.
 7. Non-Weather Related Claims factor.
 8. Log Home Surcharge factor (Applies to Policy Forms 3 and 7).
- B. Total all miscellaneous and endorsement premium charges or credits except Earthquake Coverage, Equipment Breakdown Coverage, and the Stolen Identity Package. All miscellaneous and endorsement premiums are rounded to the nearest whole dollar. However, the minimum premium for any one endorsement is \$1.
- C. Subtotal by adding results in A and B.
- D. Multiply Homeowners Advantage Discount by the subtotal obtained in C. Round to the nearest whole dollar.
- E. Multiply TLC Discount by the subtotal obtained in C. Round to the nearest whole dollar.
- F. Final premium is determined by adding to the premium in C the result in D and E above and the cost of Earthquake Coverage, Equipment Breakdown Coverage, and the Stolen Identity Package (rounded to the nearest whole dollar) if it applies.

Rating Example:

(Actual premiums/rates were chosen arbitrarily for illustration purposes only.)

\$120,000 house (\$350 base rate, 1.073 Amount of Insurance factor)
 \$500 deductible (23% charge)
 Less than 1 year old home (Utilities/Roof Rating Plan Discount – 30% credit)
 Endorsement: Contents Replacement Cost coverage (12% of Adjusted Base Premium)
 Homeowners Advantage Discount (10% Credit)
 TLC Discount (15% credit)
 Endorsement: Earthquake coverage (.40/Thousand Charge)

Base Rate		\$350
X Amount of Insurance factor		<u>1.073</u>
		\$375.550
X Deductible Adjustment factor		<u>1.23</u>
		\$461.927
X Utilities/Roof Rating Plan factor		<u>0.70</u>
		\$323.349
Adjusted Base Premium		\$323
Endorsement		
Contents Replacement Coverage	\$323 x .12 =	\$39
Subtotal		\$362
Homeowners Advantage Discount	\$362 x -0.10 =	-\$36
TLC Discount	\$362 x -0.15 =	-\$54
Subtotal		\$272
Earthquake Coverage	120 x .40 =	<u>\$ 48</u>
Total Policy Premium		\$320

Non-Bound Trial Application - No down payment should be collected for non-bound trial applications.

- C. **Renewal Payment** - The renewal premium is due and payable to the Home Office on or before the policy expiration date. The policyholder may elect to pay the renewal premium in two or four installments. Each installment will include a \$5 installment charge as shown on the renewal billing notice. If the amount due is less than \$25, the installment charge will be waived.
- D. **Minimum Premium Rule** - The total annual policy minimum premium for Form 3 and Form 7 is \$150. For Form 4 and Form 6, the total annual policy minimum premium is \$75. The minimum premium requirements exclude premium for the following endorsements: Earthquake, Earthquake Loss Assessment, Equipment Breakdown Coverage, and Stolen Identity Package.

XVII. POLICY CHANGES

If a policy is amended and results in a total amount due of \$5 or less, such adjustment may be waived. For policies with no balance due, a return premium of \$5 or less shall be allowed only at the insured's request.

XVIII. RATE CHANGES

A rate change, meaning any revision of premium, applicable to the Homeowner Program shall be made in accordance with the following procedures:

- A. The effective date of such revision shall be announced.
- B. The revision shall apply to any policy or endorsement in the manner outlined in the announcement of the revision.
- C. An existing Homeowners Policy may not be endorsed during the current policy term to take advantage of an overall rate reduction.
- D. The current forms and endorsements must apply to all items of the policy to which the premium revision applies, unless otherwise provided at the time the premium revision became effective.

XIX. INFLATION COVERAGE

Each year at the policy renewal, the Coverage A - Dwelling amount may be increased depending upon the building cost index for the geographical location for Forms 3 and 7.

For Forms 4 and 6, each year at the policy renewal, the Coverage C - Personal Property amount may be increased depending upon the personal property cost index for the specified area.

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
AMERICAN NATIONAL GENERAL INSURANCE COMPANY**

**Homeowners Insurance
Rental Owners Insurance
Zone Definitions**

- Zone 1** - Counties of:
- | | | | |
|--------|---------|--------|--------|
| Baxter | Carroll | Marion | Searcy |
| Boone | Madison | Newton | |
- Zone 2** - Counties of:
- | | | | |
|----------|--------------|----------|-----------|
| Clay | Greene | Jackson | Sharp |
| Cleburne | Independence | Lawrence | Stone |
| Fulton | Izard | Randolph | Van Buren |
- Zone 3** - Counties of:
- | | | |
|--------|----------|-------------|
| Cross | Phillips | St. Francis |
| Lee | Poinsett | White |
| Monroe | Prairie | Woodruff |
- Zone 4** - Counties of:
- | | | | |
|-----------|--------------|--------|--------|
| Hempstead | Little River | Nevada | Scott |
| Howard | Miller | Pike | Sevier |
| Lafayette | Montgomery | Polk | |
- Zone 5** - Counties of:
- | | |
|----------|-----------|
| Arkansas | Jefferson |
|----------|-----------|
- Zone 6** - Counties of:
- | | | | |
|---------|-----------|----------|-------|
| Bradley | Cleveland | Drew | Union |
| Calhoun | Columbia | Lincoln | |
| Clark | Dallas | Ouachita | |
- Zone 7** - Counties of:
- | | | |
|--------|--------|-------|
| Ashley | Chicot | Desha |
|--------|--------|-------|
- Zone 8** - Remainder of Garland County (Excluding Zone 40)
- Zone 9** - Sebastian County
- Zone 10** - Counties of:
- | | |
|------------|-------------|
| Crittenden | Mississippi |
|------------|-------------|
- Zone 12** - Perry County
- Remainder of Pulaski County (Excluding Zones 41, 42, and 43)
- Remainder of Lonoke County (Excluding Zone 43)
- Zone 17** - Counties of:
- | | |
|--------|------------|
| Benton | Washington |
|--------|------------|
- Zone 24** - Craighead County
- Zone 26** - Remainder of Saline County (Excluding Zones 40 and 44)

- Zone 33 -** Crawford County
- Zone 37 -** Counties of:
 Conway Faulkner Pope
- Zone 38 -** Counties of:
 Franklin Johnson Logan Yell
- Zone 39 -** Counties of:
 Grant Hot Springs
- Zone 40 -** Zip Code 71909 in Garland and Saline Counties
- Zone 41 -** Pulaski Zip Codes:
 72201 72205 72209 72212
 72202 72206 72210 72223
 72204 72207 72211 72227
- Zone 42 -** Pulaski Zip Codes:
 72113 72116 72118 72199
 72114 72117 72120
- Zone 43 -** Pulaski Zip Codes:
 72023 72076 72099
- Lonoke Zip Codes:
 72007 72023 72076 72176
- Zone 44 -** Saline Zip Codes:
 72015 72019 72022

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Frame

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01778	01778	01778	01838	01838	02107	02475	02960	03691	04966
002	01644	01644	01644	01700	01700	01948	02288	02737	03413	04592
003	02989	02989	02989	03091	03091	03542	04161	04977	06205	08348
004	02162	02162	02162	02236	02236	02562	03010	03600	04488	06038
005	02233	02233	02233	02309	02309	02646	03108	03718	04636	06237
006	02173	02173	02173	02247	02247	02575	03025	03618	04511	06069
007	02277	02277	02277	02354	02354	02698	03170	03791	04727	06360
008	02015	02015	02015	02084	02084	02388	02805	03355	04183	05628
009	02115	02115	02115	02187	02187	02506	02944	03521	04391	05907
010	02612	02612	02612	02701	02701	03095	03636	04349	05423	07295
012	02486	02486	02486	02571	02571	02946	03461	04139	05161	06943
017	01772	01772	01772	01832	01832	02100	02467	02950	03679	04949
024	02259	02259	02259	02336	02336	02677	03145	03761	04690	06309
026	02121	02121	02121	02193	02193	02513	02952	03531	04403	05924
033	02312	02312	02312	02391	02391	02740	03218	03849	04800	06457
037	01706	01706	01706	01764	01764	02022	02375	02840	03542	04765
038	01652	01652	01652	01708	01708	01958	02300	02751	03430	04614
039	02230	02230	02230	02306	02306	02643	03104	03713	04629	06228
040	01509	01509	01509	01560	01560	01788	02101	02512	03133	04215
041	02432	02432	02432	02515	02515	02882	03385	04049	05049	06793
042	02268	02268	02268	02345	02345	02688	03157	03776	04708	06335
043	02263	02263	02263	02340	02340	02682	03150	03768	04698	06321
044	02121	02121	02121	02193	02193	02513	02952	03531	04403	05924

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Veneer

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01481	01481	01481	01579	01579	01790	02356	02594	03465	04468
002	01369	01369	01369	01460	01460	01656	02178	02399	03204	04131
003	02490	02490	02490	02654	02654	03010	03960	04361	05826	07511
004	01801	01801	01801	01920	01920	02177	02865	03154	04214	05433
005	01860	01860	01860	01983	01983	02249	02959	03258	04352	05612
006	01810	01810	01810	01930	01930	02188	02879	03170	04235	05461
007	01897	01897	01897	02022	02022	02293	03017	03322	04438	05722
008	01678	01678	01678	01789	01789	02029	02670	02940	03927	05064
009	01762	01762	01762	01878	01878	02130	02802	03086	04122	05315
010	02176	02176	02176	02319	02319	02630	03461	03811	05091	06564
012	02071	02071	02071	02208	02208	02503	03294	03627	04845	06247
017	01476	01476	01476	01574	01574	01784	02348	02585	03454	04453
024	01882	01882	01882	02006	02006	02275	02993	03296	04403	05677
026	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330
033	01926	01926	01926	02053	02053	02328	03063	03373	04506	05810
037	01421	01421	01421	01515	01515	01718	02260	02489	03325	04287
038	01376	01376	01376	01467	01467	01664	02189	02410	03220	04151
039	01858	01858	01858	01980	01980	02246	02955	03254	04346	05604
040	01257	01257	01257	01340	01340	01520	01999	02202	02941	03792
041	02026	02026	02026	02160	02160	02449	03222	03548	04740	06112
042	01889	01889	01889	02014	02014	02284	03005	03309	04420	05699
043	01885	01885	01885	02010	02010	02279	02998	03302	04411	05687
044	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Brick

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01481	01481	01481	01579	01579	01790	02356	02594	03465	04468
002	01369	01369	01369	01460	01460	01656	02178	02399	03204	04131
003	02490	02490	02490	02654	02654	03010	03960	04361	05826	07511
004	01801	01801	01801	01920	01920	02177	02865	03154	04214	05433
005	01860	01860	01860	01983	01983	02249	02959	03258	04352	05612
006	01810	01810	01810	01930	01930	02188	02879	03170	04235	05461
007	01897	01897	01897	02022	02022	02293	03017	03322	04438	05722
008	01678	01678	01678	01789	01789	02029	02670	02940	03927	05064
009	01762	01762	01762	01878	01878	02130	02802	03086	04122	05315
010	02176	02176	02176	02319	02319	02630	03461	03811	05091	06564
012	02071	02071	02071	02208	02208	02503	03294	03627	04845	06247
017	01476	01476	01476	01574	01574	01784	02348	02585	03454	04453
024	01882	01882	01882	02006	02006	02275	02993	03296	04403	05677
026	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330
033	01926	01926	01926	02053	02053	02328	03063	03373	04506	05810
037	01421	01421	01421	01515	01515	01718	02260	02489	03325	04287
038	01376	01376	01376	01467	01467	01664	02189	02410	03220	04151
039	01858	01858	01858	01980	01980	02246	02955	03254	04346	05604
040	01257	01257	01257	01340	01340	01520	01999	02202	02941	03792
041	02026	02026	02026	02160	02160	02449	03222	03548	04740	06112
042	01889	01889	01889	02014	02014	02284	03005	03309	04420	05699
043	01885	01885	01885	02010	02010	02279	02998	03302	04411	05687
044	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Siding

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01778	01778	01778	01838	01838	02107	02475	02960	03691	04966
002	01644	01644	01644	01700	01700	01948	02288	02737	03413	04592
003	02989	02989	02989	03091	03091	03542	04161	04977	06205	08348
004	02162	02162	02162	02236	02236	02562	03010	03600	04488	06038
005	02233	02233	02233	02309	02309	02646	03108	03718	04636	06237
006	02173	02173	02173	02247	02247	02575	03025	03618	04511	06069
007	02277	02277	02277	02354	02354	02698	03170	03791	04727	06360
008	02015	02015	02015	02084	02084	02388	02805	03355	04183	05628
009	02115	02115	02115	02187	02187	02506	02944	03521	04391	05907
010	02612	02612	02612	02701	02701	03095	03636	04349	05423	07295
012	02486	02486	02486	02571	02571	02946	03461	04139	05161	06943
017	01772	01772	01772	01832	01832	02100	02467	02950	03679	04949
024	02259	02259	02259	02336	02336	02677	03145	03761	04690	06309
026	02121	02121	02121	02193	02193	02513	02952	03531	04403	05924
033	02312	02312	02312	02391	02391	02740	03218	03849	04800	06457
037	01706	01706	01706	01764	01764	02022	02375	02840	03542	04765
038	01652	01652	01652	01708	01708	01958	02300	02751	03430	04614
039	02230	02230	02230	02306	02306	02643	03104	03713	04629	06228
040	01509	01509	01509	01560	01560	01788	02101	02512	03133	04215
041	02432	02432	02432	02515	02515	02882	03385	04049	05049	06793
042	02268	02268	02268	02345	02345	02688	03157	03776	04708	06335
043	02263	02263	02263	02340	02340	02682	03150	03768	04698	06321
044	02121	02121	02121	02193	02193	02513	02952	03531	04403	05924

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Fire Resistive

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01481	01481	01481	01579	01579	01790	02356	02594	03465	04468
002	01369	01369	01369	01460	01460	01656	02178	02399	03204	04131
003	02490	02490	02490	02654	02654	03010	03960	04361	05826	07511
004	01801	01801	01801	01920	01920	02177	02865	03154	04214	05433
005	01860	01860	01860	01983	01983	02249	02959	03258	04352	05612
006	01810	01810	01810	01930	01930	02188	02879	03170	04235	05461
007	01897	01897	01897	02022	02022	02293	03017	03322	04438	05722
008	01678	01678	01678	01789	01789	02029	02670	02940	03927	05064
009	01762	01762	01762	01878	01878	02130	02802	03086	04122	05315
010	02176	02176	02176	02319	02319	02630	03461	03811	05091	06564
012	02071	02071	02071	02208	02208	02503	03294	03627	04845	06247
017	01476	01476	01476	01574	01574	01784	02348	02585	03454	04453
024	01882	01882	01882	02006	02006	02275	02993	03296	04403	05677
026	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330
033	01926	01926	01926	02053	02053	02328	03063	03373	04506	05810
037	01421	01421	01421	01515	01515	01718	02260	02489	03325	04287
038	01376	01376	01376	01467	01467	01664	02189	02410	03220	04151
039	01858	01858	01858	01980	01980	02246	02955	03254	04346	05604
040	01257	01257	01257	01340	01340	01520	01999	02202	02941	03792
041	02026	02026	02026	02160	02160	02449	03222	03548	04740	06112
042	01889	01889	01889	02014	02014	02284	03005	03309	04420	05699
043	01885	01885	01885	02010	02010	02279	02998	03302	04411	05687
044	01767	01767	01767	01883	01883	02136	02810	03095	04134	05330

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
002	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
003	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
004	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
005	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
006	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
007	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
008	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
009	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
010	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
012	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
017	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
024	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
026	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
033	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
037	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
038	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
039	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
040	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
041	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
042	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
043	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
044	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

5 - 99 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
002	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
003	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
004	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
005	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
006	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
007	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
008	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
009	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
010	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
012	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
017	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
024	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
026	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
033	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
037	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
038	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
039	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
040	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
041	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
042	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
043	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
044	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
002	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
003	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
004	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
005	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
006	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
007	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
008	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
009	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
010	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
012	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
017	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
024	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
026	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
033	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
037	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
038	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
039	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
040	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
041	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
042	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
043	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
044	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 5 - 99 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
002	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
003	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
004	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
005	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
006	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
007	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
008	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
009	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
010	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
012	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
017	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
024	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
026	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
033	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
037	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
038	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
039	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
040	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
041	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
042	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
043	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
044	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Frame

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02080	02080	02080	02150	02150	02465	02896	03463	04318	05810
002	01923	01923	01923	01989	01989	02279	02677	03202	03993	05373
003	03497	03497	03497	03616	03616	04144	04868	05823	07260	09767
004	02530	02530	02530	02616	02616	02998	03522	04212	05251	07064
005	02613	02613	02613	02702	02702	03096	03636	04350	05424	07297
006	02542	02542	02542	02629	02629	03013	03539	04233	05278	07101
007	02664	02664	02664	02754	02754	03157	03709	04435	05531	07441
008	02358	02358	02358	02438	02438	02794	03282	03925	04894	06585
009	02475	02475	02475	02559	02559	02932	03444	04120	05137	06911
010	03056	03056	03056	03160	03160	03621	04254	05088	06345	08535
012	02909	02909	02909	03008	03008	03447	04049	04843	06038	08123
017	02073	02073	02073	02143	02143	02457	02886	03452	04304	05790
024	02643	02643	02643	02733	02733	03132	03680	04400	05487	07382
026	02482	02482	02482	02566	02566	02940	03454	04131	05152	06931
033	02705	02705	02705	02797	02797	03206	03765	04503	05616	07555
037	01996	01996	01996	02064	02064	02366	02779	03323	04144	05575
038	01933	01933	01933	01998	01998	02291	02691	03219	04013	05398
039	02609	02609	02609	02698	02698	03092	03632	04344	05416	07287
040	01766	01766	01766	01825	01825	02092	02458	02939	03666	04932
041	02845	02845	02845	02943	02943	03372	03960	04737	05907	07948
042	02654	02654	02654	02744	02744	03145	03694	04418	05508	07412
043	02648	02648	02648	02738	02738	03138	03686	04409	05497	07396
044	02482	02482	02482	02566	02566	02940	03454	04131	05152	06931

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Veneer

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01733	01733	01733	01847	01847	02094	02757	03035	04054	05228
002	01602	01602	01602	01708	01708	01938	02548	02807	03749	04833
003	02913	02913	02913	03105	03105	03522	04633	05102	06816	08788
004	02107	02107	02107	02246	02246	02547	03352	03690	04930	06357
005	02176	02176	02176	02320	02320	02631	03462	03812	05092	06566
006	02118	02118	02118	02258	02258	02560	03368	03709	04955	06389
007	02219	02219	02219	02366	02366	02683	03530	03887	05192	06695
008	01963	01963	01963	02093	02093	02374	03124	03440	04595	05925
009	02062	02062	02062	02197	02197	02492	03278	03611	04823	06219
010	02546	02546	02546	02713	02713	03077	04049	04459	05956	07680
012	02423	02423	02423	02583	02583	02929	03854	04244	05669	07309
017	01727	01727	01727	01842	01842	02087	02747	03024	04041	05210
024	02202	02202	02202	02347	02347	02662	03502	03856	05152	06642
026	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236
033	02253	02253	02253	02402	02402	02724	03584	03946	05272	06798
037	01663	01663	01663	01773	01773	02010	02644	02912	03890	05016
038	01610	01610	01610	01716	01716	01947	02561	02820	03767	04857
039	02174	02174	02174	02317	02317	02628	03457	03807	05085	06557
040	01471	01471	01471	01568	01568	01778	02339	02576	03441	04437
041	02370	02370	02370	02527	02527	02865	03770	04151	05546	07151
042	02210	02210	02210	02356	02356	02672	03516	03872	05171	06668
043	02205	02205	02205	02352	02352	02666	03508	03863	05161	06654
044	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Brick

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01733	01733	01733	01847	01847	02094	02757	03035	04054	05228
002	01602	01602	01602	01708	01708	01938	02548	02807	03749	04833
003	02913	02913	02913	03105	03105	03522	04633	05102	06816	08788
004	02107	02107	02107	02246	02246	02547	03352	03690	04930	06357
005	02176	02176	02176	02320	02320	02631	03462	03812	05092	06566
006	02118	02118	02118	02258	02258	02560	03368	03709	04955	06389
007	02219	02219	02219	02366	02366	02683	03530	03887	05192	06695
008	01963	01963	01963	02093	02093	02374	03124	03440	04595	05925
009	02062	02062	02062	02197	02197	02492	03278	03611	04823	06219
010	02546	02546	02546	02713	02713	03077	04049	04459	05956	07680
012	02423	02423	02423	02583	02583	02929	03854	04244	05669	07309
017	01727	01727	01727	01842	01842	02087	02747	03024	04041	05210
024	02202	02202	02202	02347	02347	02662	03502	03856	05152	06642
026	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236
033	02253	02253	02253	02402	02402	02724	03584	03946	05272	06798
037	01663	01663	01663	01773	01773	02010	02644	02912	03890	05016
038	01610	01610	01610	01716	01716	01947	02561	02820	03767	04857
039	02174	02174	02174	02317	02317	02628	03457	03807	05085	06557
040	01471	01471	01471	01568	01568	01778	02339	02576	03441	04437
041	02370	02370	02370	02527	02527	02865	03770	04151	05546	07151
042	02210	02210	02210	02356	02356	02672	03516	03872	05171	06668
043	02205	02205	02205	02352	02352	02666	03508	03863	05161	06654
044	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Siding

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02080	02080	02080	02150	02150	02465	02896	03463	04318	05810
002	01923	01923	01923	01989	01989	02279	02677	03202	03993	05373
003	03497	03497	03497	03616	03616	04144	04868	05823	07260	09767
004	02530	02530	02530	02616	02616	02998	03522	04212	05251	07064
005	02613	02613	02613	02702	02702	03096	03636	04350	05424	07297
006	02542	02542	02542	02629	02629	03013	03539	04233	05278	07101
007	02664	02664	02664	02754	02754	03157	03709	04435	05531	07441
008	02358	02358	02358	02438	02438	02794	03282	03925	04894	06585
009	02475	02475	02475	02559	02559	02932	03444	04120	05137	06911
010	03056	03056	03056	03160	03160	03621	04254	05088	06345	08535
012	02909	02909	02909	03008	03008	03447	04049	04843	06038	08123
017	02073	02073	02073	02143	02143	02457	02886	03452	04304	05790
024	02643	02643	02643	02733	02733	03132	03680	04400	05487	07382
026	02482	02482	02482	02566	02566	02940	03454	04131	05152	06931
033	02705	02705	02705	02797	02797	03206	03765	04503	05616	07555
037	01996	01996	01996	02064	02064	02366	02779	03323	04144	05575
038	01933	01933	01933	01998	01998	02291	02691	03219	04013	05398
039	02609	02609	02609	02698	02698	03092	03632	04344	05416	07287
040	01766	01766	01766	01825	01825	02092	02458	02939	03666	04932
041	02845	02845	02845	02943	02943	03372	03960	04737	05907	07948
042	02654	02654	02654	02744	02744	03145	03694	04418	05508	07412
043	02648	02648	02648	02738	02738	03138	03686	04409	05497	07396
044	02482	02482	02482	02566	02566	02940	03454	04131	05152	06931

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Fire Resistive

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01733	01733	01733	01847	01847	02094	02757	03035	04054	05228
002	01602	01602	01602	01708	01708	01938	02548	02807	03749	04833
003	02913	02913	02913	03105	03105	03522	04633	05102	06816	08788
004	02107	02107	02107	02246	02246	02547	03352	03690	04930	06357
005	02176	02176	02176	02320	02320	02631	03462	03812	05092	06566
006	02118	02118	02118	02258	02258	02560	03368	03709	04955	06389
007	02219	02219	02219	02366	02366	02683	03530	03887	05192	06695
008	01963	01963	01963	02093	02093	02374	03124	03440	04595	05925
009	02062	02062	02062	02197	02197	02492	03278	03611	04823	06219
010	02546	02546	02546	02713	02713	03077	04049	04459	05956	07680
012	02423	02423	02423	02583	02583	02929	03854	04244	05669	07309
017	01727	01727	01727	01842	01842	02087	02747	03024	04041	05210
024	02202	02202	02202	02347	02347	02662	03502	03856	05152	06642
026	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236
033	02253	02253	02253	02402	02402	02724	03584	03946	05272	06798
037	01663	01663	01663	01773	01773	02010	02644	02912	03890	05016
038	01610	01610	01610	01716	01716	01947	02561	02820	03767	04857
039	02174	02174	02174	02317	02317	02628	03457	03807	05085	06557
040	01471	01471	01471	01568	01568	01778	02339	02576	03441	04437
041	02370	02370	02370	02527	02527	02865	03770	04151	05546	07151
042	02210	02210	02210	02356	02356	02672	03516	03872	05171	06668
043	02205	02205	02205	02352	02352	02666	03508	03863	05161	06654
044	02067	02067	02067	02203	02203	02499	03288	03621	04837	06236

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
15,000	0.450	220,000	1.365
20,000	0.469	225,000	1.390
25,000	0.488	230,000	1.414
30,000	0.507	235,000	1.439
35,000	0.525	240,000	1.463
40,000	0.544	245,000	1.485
45,000	0.563	250,000	1.507
50,000	0.582	260,000	1.549
55,000	0.601	270,000	1.591
60,000	0.620	280,000	1.639
65,000	0.639	290,000	1.687
70,000	0.658	300,000	1.721
75,000	0.676	350,000	1.911
80,000	0.695	400,000	2.102
85,000	0.714	450,000	2.294
90,000	0.733	500,000	2.500
95,000	0.751	550,000	2.699
100,000	0.769	600,000	2.897
105,000	0.795	650,000	3.096
110,000	0.821	700,000	3.284
115,000	0.839	750,000	3.482
120,000	0.866	800,000	3.680
125,000	0.893	850,000	3.877
130,000	0.910	900,000	4.075
135,000	0.937	950,000	4.273
140,000	0.955	1,000,000	4.470
145,000	0.982	1,100,000	4.865
150,000	1.000	1,200,000	5.261
155,000	1.028	1,300,000	5.656
160,000	1.054	1,400,000	6.029
165,000	1.081	1,500,000	6.423
170,000	1.107	1,600,000	6.816
175,000	1.134	1,700,000	7.211
180,000	1.161	1,800,000	7.605
185,000	1.187	1,900,000	7.999
190,000	1.213	2,000,000	8.394
195,000	1.239	2,100,000	8.788
200,000	1.265	2,200,000	9.183
205,000	1.290	2,300,000	9.578
210,000	1.315	2,400,000	9.974
215,000	1.340	2,500,000	10.369
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
60,000	0.620	245,000	1.485
65,000	0.639	250,000	1.507
70,000	0.658	260,000	1.549
75,000	0.676	270,000	1.591
80,000	0.695	280,000	1.639
85,000	0.714	290,000	1.687
90,000	0.733	300,000	1.721
95,000	0.751	350,000	1.911
100,000	0.769	400,000	2.102
105,000	0.795	450,000	2.294
110,000	0.821	500,000	2.500
115,000	0.839	550,000	2.699
120,000	0.866	600,000	2.897
125,000	0.893	650,000	3.096
130,000	0.910	700,000	3.284
135,000	0.937	750,000	3.482
140,000	0.955	800,000	3.680
145,000	0.982	850,000	3.877
150,000	1.000	900,000	4.075
155,000	1.028	950,000	4.273
160,000	1.054	1,000,000	4.470
165,000	1.081	1,100,000	4.865
170,000	1.107	1,200,000	5.261
175,000	1.134	1,300,000	5.656
180,000	1.161	1,400,000	6.029
185,000	1.187	1,500,000	6.423
190,000	1.213	1,600,000	6.816
195,000	1.239	1,700,000	7.211
200,000	1.265	1,800,000	7.605
205,000	1.290	1,900,000	7.999
210,000	1.315	2,000,000	8.394
215,000	1.340	2,100,000	8.788
220,000	1.365	2,200,000	9.183
225,000	1.390	2,300,000	9.578
230,000	1.414	2,400,000	9.974
235,000	1.439	2,500,000	10.369
240,000	1.463		
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34

MINIMUM DEDUCT \$1000 \$1000 \$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail							
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

	\$500	\$1000	\$2000	\$3000	\$5000
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All Peril	0.33	0.00	-0.15	-0.25	-0.35
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MAX PREM ADJ			\$75	\$150	\$300
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ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34

MINIMUM DEDUCT \$1000 \$1000 \$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail							
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLES - SPECIAL EXCEPTIONS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF
COVERAGE

\$500
All Peril

15,000 & UNDER	0.12
20,000	0.12
25,000	0.12
30,000	0.11
35,000	0.11
40,000	0.11
45,000	0.11
50,000	0.11
55,000	0.11
60,000	0.11
65,000	0.11
70,000	0.11
75,000	0.11
80,000	0.11
85,000	0.10
90,000	0.10
95,000	0.10
100,000	0.10
105,000	0.10
110,000	0.10
115,000	0.10
120,000	0.10
125,000	0.10
130,000	0.09
135,000	0.09
140,000	0.09
145,000	0.09
150,000	0.09
155,000	0.09
160,000	0.09
165,000	0.08
170,000	0.08
175,000	0.08
200,000	0.08
250,000	0.07
300,000	0.07
350,000	0.07
400,000	0.06
500,000	0.05
600,000	0.05
750,000	0.05
1,000,000	0.05
1,500,000	0.05
2,000,000	0.05
2,500,000 & OVER	0.05

MINIMUM DEDUCT

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

THIS OPTION IS AVAILABLE ONLY FOR RENEWALS THAT ALREADY HAVE THIS DEDUCTIBLE

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLES - SPECIAL EXCEPTIONS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF
COVERAGE

\$500
All Peril

15,000 & UNDER	0.12
20,000	0.12
25,000	0.12
30,000	0.11
35,000	0.11
40,000	0.11
45,000	0.11
50,000	0.11
55,000	0.11
60,000	0.11
65,000	0.11
70,000	0.11
75,000	0.11
80,000	0.11
85,000	0.10
90,000	0.10
95,000	0.10
100,000	0.10
105,000	0.10
110,000	0.10
115,000	0.10
120,000	0.10
125,000	0.10
130,000	0.09
135,000	0.09
140,000	0.09
145,000	0.09
150,000	0.09
155,000	0.09
160,000	0.09
165,000	0.08
170,000	0.08
175,000	0.08
200,000	0.08
250,000	0.07
300,000	0.07
350,000	0.07
400,000	0.06
500,000	0.05
600,000	0.05
750,000	0.05
1,000,000	0.05
1,500,000	0.05
2,000,000	0.05
2,500,000 & OVER	0.05

MINIMUM DEDUCT

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

THIS OPTION IS AVAILABLE ONLY FOR RENEWALS THAT ALREADY HAVE THIS DEDUCTIBLE

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
MISCELLANEOUS AND ENDORSEMENT COVERAGES INDEX**

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AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY

I. Miscellaneous Coverages, Credits, and Charges

A. CA\$HBACK FROM ANPAC®

For policies written in American National Property And Casualty Company and enrolled in CA\$HBACK FROM ANPAC® prior to May 14, 2008, the eligibility requirements and refund conditions are as follows:

Insureds who remain claim free on all automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies for the three-year period after their CA\$HBACK FROM ANPAC® enrollment date, will receive a 25% refund of their combined automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowners premiums from the third prior year subject to the eligibility requirements as outlined below. Earthquake, Secure I.D. from ANPAC® and Equipment Breakdown endorsement premiums will not be included in the homeowner premium.

Enrollment eligibility requirements include:

- 1) Insureds who have at least one automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and one homeowner policy written in American National Property And Casualty Company or an affiliated company will be enrolled in the CA\$HBACK program. If any new policy is written in American National General Insurance Company on or after Month, Day, Year, then the account will no longer qualify for CA\$HBACK FROM ANPAC®.
- 2) All automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies are eligible for enrollment in this program. In addition, at least one vehicle must have both Comprehensive and Collision Coverages.
- 3) All automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies under the same account will be required to be enrolled in the plan. An account is made up of individuals living at the same residence, as a family. Dependents of the named insured, temporarily living away from home, can also be included.
- 4) All CA\$HBACK policies must be written in a state where the CA\$HBACK program is available.

The first refund will be made 60 days after the three-year anniversary of the CA\$HBACK enrollment date provided:

- A) there have been no paid claims of any type including not-at-fault claims under any automobile, motor home, camping/travel trailer, motorcycle, recreational vehicle, or homeowner policy during this time period other than automobile Towing and Labor Claims, homeowner Earthquake Claims, Secure I.D. from ANPAC® claims and/or Equipment Breakdown claims; and
- B) the insured maintains continuous coverage (no policy is out of force for more than 45 days) on at least one automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and one homeowner policy; and
- C) the CA\$HBACK policies are in a state where the CA\$HBACK program is available.

Subsequent refunds will be made each year 60 days after the enrollment date anniversary provided all eligibility requirements, as listed above, are met. The refund is 25% of the combined automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner written premiums from the third prior year.

Refund Conditions and Procedures:

- 1) The CA\$HBACK enrollment date will be used to determine when a refund will be made. This may or may not coincide with the renewal dates of any policies under the program.
- 2) The written premium from each CA\$HBACK policy will be used to calculate the refund amount. For policies already in force at the time of enrollment, the written premium of the first renewal after the program enrollment date will be used in the refund amount calculation. Premiums for the Earthquake, Secure I.D. from ANPAC®, and Equipment Breakdown endorsements will not be included in the calculation of the refund amount.

- 3) A paid claim occurring on or after the insured is a member of the CA\$HBACK program, under any policy that is part of a CA\$HBACK account, voids a refund only for the next three-year period. Subsequent refunds will be made after the account is claim free again for three years on all CA\$HBACK policies.
- 4) If a claim is paid, the three-year time period will begin again starting at the first enrollment anniversary date after the first payment has been made. Exception: If a claim occurs prior to the anniversary date and first payment is made after the anniversary date, but before 60 days after the anniversary date, then the three-year time period begins on the most recent anniversary date.
- 5) The date of the first payment of a claim will be considered the claim date when determining the three-year claim free period for refund eligibility. If a payment is made on a claim in two different years, the insured would again be eligible for a refund at the first enrollment anniversary date three years after the first claim payment was made.
- 6) If a CA\$HBACK refund is not made due to a paid claim, but later the Company successfully subrogates 100% of the claim, then the amount that should have been refunded to the insured will be refunded.
- 7) All incurred claims must be reported immediately or as soon as reasonably possible.
- 8) If membership into the CA\$HBACK program is terminated, reinstatement may be allowed, unless the termination is due to a new policy on the account being written in American National General Insurance Company on or after May 14, 2008. If reinstatement is allowed, the insured's CA\$HBACK enrollment anniversary date will change.
- 9) Policy lapses of 45 days or less will not affect eligibility. If a policy lapse of more than 45 days occurs, the insured's CA\$HBACK enrollment anniversary date will change.

For policies written in American National Property And Casualty Company and enrolled in CA\$HBACK FROM ANPAC® on or after May 14, 2008, the eligibility requirements and refund conditions are as follows:

Insureds who remain claim free on all automobile, motor home, camping/travel trailer, motorcycle or recreational vehicle and homeowner policies written in American National Property And Casualty Company for the three-year period after their CA\$HBACK FROM ANPAC® enrollment date, will receive a 25% refund of their combined automobile, motor home, camping/travel trailer, motorcycle or recreational vehicle and homeowner premiums from the third prior year subject to the eligibility requirements as outlined below. Earthquake, Secure I.D. from ANPAC®, and Equipment Breakdown endorsement premiums will not be included in the homeowner premium.

Enrollment eligibility requirements include:

- 1) Insureds who have at least one automobile, motor home, camping/travel trailer, motorcycle or recreational vehicle and one homeowner policy written in American National Property And Casualty Company will be enrolled in the CA\$HBACK program. If any new policy is written in American National General Insurance Company on or after May 14, 2008, then the account will no longer qualify for CA\$HBACK FROM ANPAC®.
- 2) All automobile, motor home, camping/travel trailer, motorcycle or recreational vehicle and homeowner policies written in American National Property And Casualty Company are eligible for enrollment in this program. In addition, at least one vehicle must have both Comprehensive and Collision Coverages.
- 3) All automobile, motor home, camping/travel trailer, motorcycle or recreational vehicle and homeowner policies written in American National Property And Casualty Company under the same account will be required to be enrolled in the plan. An account is made up of individuals living at the same residence, as a family. Dependents of the named insured, temporarily living away from home, can also be included.
- 4) All CA\$HBACK policies must be written in a state where the CA\$HBACK program is available.

The first refund will be made 60 days after the three-year anniversary of the CA\$HBACK enrollment date provided:

- A) there have been no paid claims of any type including not-at-fault claims under any automobile, motor home, camping/travel trailer, motorcycle, recreational vehicle or homeowner policy written in American National Property And Casualty Company during this time period other than automobile Towing and Labor claims, homeowner Earthquake claims, Secure I.D. from ANPAC® claims, and/or Equipment Breakdown claims; and
- B) the insured maintains continuous coverage (no policy is out of force for more than 45 days) on at least one automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and one homeowner policy written in American National Property And Casualty Company; and
- C) the CA\$HBACK policies are in a state where the CA\$HBACK program is available.

Subsequent refunds will be made each year 60 days after the enrollment date anniversary provided all eligibility requirements, as listed above, are met. The refund is 25% of the combined automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner written premiums in American National Property And Casualty Company from the third prior year.

Refund Conditions and Procedures:

- 1) The CA\$HBACK enrollment date will be used to determine when a refund will be made. This may or may not coincide with the renewal dates of any policies under the program.
- 2) The written premium from each CA\$HBACK policy will be used to calculate the refund amount. For policies already in force at the time of enrollment, the written premium of the first renewal after the program enrollment date will be used in the refund amount calculation. Premiums for the Earthquake, Secure I.D. from ANPAC®, and Equipment Breakdown endorsements will not be included in the calculation of the refund amount.
- 3) A paid claim occurring on or after the insured is a member of the CA\$HBACK program, under any policy that is part of a CA\$HBACK account, voids a refund only for the next three-year period. Subsequent refunds will be made after the account is claim free again for three years on all CA\$HBACK policies.
- 4) If a claim is paid, the three-year time period will begin again starting at the first enrollment anniversary date after the first payment has been made. Exception: If a claim occurs prior to the anniversary date and first payment is made after the anniversary date but before 60 days after the anniversary date, then the three-year time period begins on the most recent anniversary date.
- 5) The date of the first payment of a claim will be considered the claim date when determining the three-year claim free period for refund eligibility. If a payment is made on a claim in two different years, the insured would again be eligible for a refund at the first enrollment anniversary date three years after the first claim payment was made.
- 6) If a CA\$HBACK refund is not made due to a paid claim, but later the Company successfully subrogates 100% of the claim, then the amount that should have been refunded to the insured will be refunded.
- 7) All incurred claims must be reported immediately or as soon as reasonably possible.
- 8) If membership into the CA\$HBACK program is terminated, reinstatement may be allowed, unless the termination is due to any new policy on the account being written in American National General Insurance Company on or after May 14, 2008. If reinstatement is allowed, the insured's CA\$HBACK enrollment anniversary date will change.
- 9) Policy lapses of 45 days or less will not affect eligibility. If a policy lapse of more than 45 days occurs, the insured's CA\$HBACK enrollment anniversary date will change.

B. PROTECTIVE DEVICE CREDITS

A premium credit may be applied for the protective devices listed below. A full description of each protective device must be shown on the application.

The following premium credits apply for each of the following devices which are properly installed and maintained:

- | | | |
|----|--|-----|
| 1. | Local burglar alarm covering all windows and exterior doors. | 5% |
| 2. | Burglar alarm as in 1, above, reporting to central station or police department. | 10% |
| 3. | Fire alarm reporting to central station or fire department. | 10% |

Any combination of the above credits is allowed but maximum total credit cannot exceed 15%.

Applicable to All Policy Forms.

C. CLAIM FREE PLUS

An insured will receive a Claim Free Plus discount on his/her homeowners policy based upon the length of time the insured has been claim free and his/her account Risk Score. The length of time is calculated as the number of years since the date of the last claim and the effective date of the policy or the effective date of reinstatement for a policy with a lapse in coverage. If a claim exists with an established reserve, the insured is considered claim free as long as no payment has been made on the claim. Equipment Breakdown claims will not be considered. The appropriate Claim Free Plus discount shall be applied according to the schedule below:

Risk Score	Number of Years Claim Free		
	0-2	3-5	6+
619 and below	0%	10%	15%
620 – 674	22%	30%	34%
675 – 729	26%	33%	37%
730 – 769	32%	40%	43%
770 – 809	35%	41%	46%
810 – 854	39%	44%	49%
855 – 899	42%	47%	51%
900 – 949	45%	50%	54%
950 and above	48%	53%	56%
No Hit/No Score	35%	41%	46%

Periodically, account Risk Scores will be updated. If such update results in a change in risk score range, the discount level will be adjusted accordingly. Additionally, under certain circumstances when necessary, such as changing the Risk Score model or receiving a calculated Risk Score for a prior No Match or No Score, a change in discount level can result and will be applied.

D. UTILITIES/ROOF RATING PLAN

A premium adjustment will be made on all Homeowners Dwelling forms depending on the age of the home and the calendar year that any of the following components have been newly installed or completely upgraded:

Heating

Complete replacement of the entire heating system, not including the ductwork or floor/ceiling registers.

All systems must be installed by a qualified contractor to meet or exceed local building codes.

Cooling

Complete replacement of the entire cooling system, not including the ductwork or floor/ceiling registers.

All systems must be installed by a qualified contractor to meet or exceed local building codes.

Roof

- A. To determine age of roof - Complete replacement or overlay of the entire roof by a qualified contractor and installed to meet or exceed local building codes.

B. Roof Construction Rating Factors

1. A credit (as listed below) applies to roofs constructed of concrete tile, clay tile, slate, or composite wood fiber/cement.
2. A surcharge (as listed below) applies to roofs constructed of wood shake, wood shingle, or a composition overlay to a wood shake roof.
3. Roof coverings meeting the impact resistance of the Underwriters' Laboratories testing criteria of U. L. Standard 2218 are eligible for a credit, as listed below. Note: The credit is not available when wind and hail coverage is excluded from the policy.

The applicable adjustments are added together to determine the total premium adjustments for the rating plan. The different adjustments depend on the number of years since the home was built or since the heating unit, cooling unit, or roof was newly installed. The maximum discount allowed is 78%.

PREMIUM ADJUSTMENTS										
Home Completed Or Utilities/ Roof Updated	Age of Home	Heating	Cooling	Roof	UL1	UL2	UL3	UL4	Concrete/ Clay Tile, Slate, or Composite Wood Fiber/ Cement	Wood Shake or Shingle
Current Year	-26%	-4%	-1%	-35%	0	0	-6%	-9%	-12%	+10%
1 st Preceding	-25%	-4%	-1%	-33%	0	0	-6%	-9%	-12%	+11%
2 nd Preceding	-24%	-3%	-1%	-32%	0	0	-6%	-9%	-12%	+12%
3 rd Preceding	-23%	-3%	-1%	-30%	0	0	-6%	-9%	-12%	+13%
4 th Preceding	-22%	-3%	-1%	-28%	0	0	-6%	-9%	-12%	+14%
5 th Preceding	-20%	-3%	-1%	-26%	0	0	-5%	-8%	-12%	+15%
6 th Preceding	-19%	-2%	-1%	-23%	0	0	-5%	-7%	-11%	+16%
7 th Preceding	-17%	-2%	-1%	-21%	0	0	-5%	-7%	-11%	+17%
8 th Preceding	-15%	-2%	-1%	-18%	0	0	-4%	-6%	-11%	+18%
9 th Preceding	-13%	-1%	-1%	-15%	0	0	-3%	-5%	-11%	+19%
10 th Preceding	-11%	-1%	-1%	-11%	0	0	-3%	-5%	-10%	+20%
11 th Preceding	-10%	-1%	0	-7%	0	0	-2%	-4%	-10%	+21%
12 th Preceding	-9%	-1%	0	-3%	0	0	-2%	-4%	-10%	+22%
13 th Preceding	-8%	-1%	0	0	0	0	-2%	-4%	-9%	+23%
14 th Preceding	-8%	-1%	0	0	0	0	-1%	-3%	-9%	+24%
15 th Preceding	-7%	0	0	0	0	0	-1%	-3%	-9%	+25%
16 th Preceding	-6%	0	0	0	0	0	0	-2%	-8%	+26%
17 th Preceding	-4%	0	0	0	0	0	0	-2%	-8%	+27%
18 th Preceding	-3%	0	0	0	0	0	0	-1%	-8%	+28%
19 th Preceding	-2%	0	0	0	0	0	0	-1%	-7%	+29%
20 th Preceding	0	0	0	0	0	0	0	0	-7%	+30%
21 st Preceding	0	0	0	0	0	0	0	0	-7%	+32%
22 nd Preceding	0	0	0	0	0	0	0	0	-6%	+34%
23 rd Preceding	0	0	0	0	0	0	0	0	-6%	+36%
24 th Preceding	0	0	0	0	0	0	0	0	-6%	+38%
25 th Preceding	0	0	0	0	0	0	0	0	-5%	+40%
26 th Preceding	0	0	0	0	0	0	0	0	-5%	+42%
27 th Preceding	0	0	0	0	0	0	0	0	-5%	+44%
28 th Preceding	0	0	0	0	0	0	0	0	-4%	+46%
29 th Preceding	0	0	0	0	0	0	0	0	-4%	+48%
30 th Preceding	0	0	0	0	0	0	0	0	-4%	+50%
31 st Preceding	0	0	0	0	0	0	0	0	-3%	+52%
32 nd Preceding	0	0	0	0	0	0	0	0	-3%	+54%
33 rd Preceding	0	0	0	0	0	0	0	0	-3%	+56%
34 th Preceding	0	0	0	0	0	0	0	0	-2%	+58%
35 th Preceding	0	0	0	0	0	0	0	0	-2%	+60%
36 th Preceding	0	0	0	0	0	0	0	0	-2%	+62%
37 th Preceding	0	0	0	0	0	0	0	0	-1%	+64%
38 th Preceding	0	0	0	0	0	0	0	0	-1%	+66%
39 th Preceding	0	0	0	0	0	0	0	0	-1%	+68%
40 th and all additional Preceding	0	0	0	0	0	0	0	0	0	+70%

If the year the dwelling was occupied is different from the year it was completed, the later year shall apply.

Applicable to Policy Form 3 and Form 7 Only

E. NON-WEATHER RELATED CLAIMS RATING PLAN

The appropriate surcharge shall be applied according to the schedule below:

Number of Qualified Paid Claims in the last 3 years			
0 or 1	2	3	4+
0%	20%	45%	75%

The number of paid claims will be determined by the number of qualified paid claims the policyholder has had in the last 3 years. The length of time is calculated as the 36 months prior to the effective date of the policy or the effective date of reinstatement for a policy with a lapse in coverage. A qualified claim is any non-catastrophe or non-weather related claim which results in a net paid loss during the 3 year period. Losses which have payments under Medical Coverage only, and Equipment Breakdown claims are not considered to be qualified claims.

F. TLC TRI-LINE COVERAGESM DISCOUNT

A 15% TLC Discount will be applied when the appropriate homeowner/Special Farm Package[®], automobile, and life insurance or annuity conditions, as outlined below, have been met by the account.

- The named insured or a member of the named insured's immediate family who resides in the same household, must have an active automobile or motorcycle policy written in American National Property And Casualty Company or an affiliated company.
- Camping/travel trailers, utility trailers, recreational vehicles, and Named Non-Owner auto policies may not be used to qualify a homeowner policy for the TLC Discount.
- The automobile or motorcycle policy must be in force anytime during the 15 days prior to the effective date of the homeowner/Special Farm Package[®] policy; or the qualifying new business automobile or motorcycle policy effective date may not be greater than 90 days after the homeowner/Special Farm Package[®] policy's effective date.
- There must be an active permanent life insurance policy or an annuity policy on the account owner and/or spouse with American National Insurance Company or American National Life Insurance Company of Texas, or Farm Family Life Insurance Company subject to the conditions described herein. Whole Life, Whole Life with term rider, Universal Life, and Variable Universal Life policies are eligible permanent life insurance policies.

One of the following permanent life insurance/annuity conditions must be met in order to qualify for the discount:

1. The amount of such permanent life policy or the sum of the amounts of all such permanent life policies on the account owner and/or spouse must be:
 - Equal to or greater than the Coverage A amount for the Homeowner Dwelling form.
 - Equal to or greater than the Coverage C amount for the Condominium form.
 - Equal to or greater than the maximum of the Coverage C amount or \$100,000 for the Tenant form.
 - Equal to or greater than the Coverage A amount under Division I of the Special Farm Package[®] policy.

This relationship between the amount of permanent life insurance on the account owner and/or spouse and the Coverage A or C amounts must only be met at the inception date of the discount on the account as long as the homeowner/Special Farm Package[®] and life policies remain in force.

If more than one homeowner/Special Farm Package[®] policy exists on the account, the highest Coverage A or C amount at the time of qualification will apply.

If the account changes from a Tenant policy to a Homeowner Dwelling form or Condominium form, the relationship between the amount of life insurance on the account owner and/or spouse and the Coverage A or C amounts must requalify in order for the discount to apply. However, if an account qualifies for the TLC Discount and then subsequently moves their homeowner policy to a Tenant policy, the Tenant policy will count as a qualifying homeowner policy, regardless of the relationship between the Coverage C amount and the life insurance/annuity amount.

2. The amount of such permanent life policy, or the sum of the amounts of all such permanent life policies on the account owner and/or spouse is equal to or greater than \$500,000.
3. The annualized premium for any individual permanent life insurance policy or the sum of the annualized premium amounts of all such permanent life policies on the account owner and/or spouse, is greater than or equal to \$1,200.
4. If the annuity method is selected, the annuity policies on the account owner and/or spouse must have a cash value equal to or greater than \$100,000 at the inception date of the discount.

The TLC Discount may be applied to or deleted from a homeowner policy at the evaluation date. Policies will be evaluated when a new business, corrected new business, renewal, corrected renewal or reinstatement with a lapse transaction is processed. All new business policies will be reviewed 90 days after issue to see if all discount requirements have been met. If not, the discount will be removed from the policy retroactively. All renewal business policies will be reviewed during the 90 days following the renewal effective date to see if all discount requirements have been met. If so, the discount will be applied retroactively to the renewal effective date.

Applicable to All Policy Forms.

G. HOMEOWNERS ADVANTAGE DISCOUNT

For each Homeowner Dwelling form, Tenant Form, and Condominium Form written in American National Property And Casualty Company on the account, a 10% discount applies when the appropriate homeowner and automobile policy conditions, as outlined below, have been met by the account.

- A qualifying automobile policy must be written in American National Property And Casualty Company.
- Camping/travel trailers, utility trailers, motor homes, motorcycles, recreational vehicles, and Named Non-Owner auto policies do not qualify a homeowner policy for the Homeowners Advantage Discount.
- The automobile policy must be in force anytime during the 15 days prior to the effective date of the homeowner policy; or the qualifying new business automobile policy effective date may not be greater than 90 days after the homeowner policy's effective date.

The Homeowners Advantage Discount may be applied to or deleted from a homeowner policy at the evaluation date. Policies will be evaluated when a new business, corrected new business, renewal, corrected renewal or reinstatement with a lapse transaction is processed. All new business policies will be reviewed 90 days after issue to see if all discount requirements have been met. If not, the discount will be removed from the policy retroactively. All renewal business policies will be reviewed during the 90 days following the renewal effective date to see if all discount requirements have been met. If so, the discount will be applied retroactively to the renewal effective date.

Applicable to All Policy Forms.

H. OPTIONAL LIABILITY LIMITS

The premium pages include Coverages E and F coverage limits of \$100,000/\$1,000 for Forms 4 and 6, and \$300,000/\$2,000 for Forms 3 and 7. If other limits are desired, the premium is adjusted according to the table below. In all cases, the limits for Coverages E and F must be the same for all exposures covered under the policy. Coverage F limits are "each person" limits.

Coverage E – Personal <u>Liability Limits</u>	Premium Adjustment			Add'l. Residence Premises Occupied by Insured <u>1 or 2 Fam. Dwelling</u>
	Form 3 Described <u>Residence</u>	Forms 4 & 6 Described <u>Residence</u>	Form 7 Described <u>Residence</u>	
\$ 25,000	\$-12	\$-2	N/A	\$+1
50,000	-11	-1	N/A	+2
100,000	-10	Base	\$-10	+3
200,000	-5	+5	-5	+4
300,000	Base	+10	Base	+5
500,000	+7	+17	+7	+7
1,000,000	+25	+35	+25	+12

Coverage F – Medical <u>Payments Limits</u>	Premium Adjustment			Add'l. Residence Premises Occupied by Insured <u>1 or 2 Fam. Dwelling</u>
	Form 3 Described <u>Residence</u>	Forms 4 & 6 Described <u>Residence</u>	Form 7 Described <u>Residence</u>	
\$ 1,000	\$-3	Base	\$-3	\$+2
2,000	Base	\$+3	Base	+3
5,000	+6	+9	+6	+6

I. PERSONAL PROPERTY

1. Increased Limits

When the limit of liability for Coverage C is increased, the additional premium shall be \$0.45 per \$1,000 of insurance.

Applicable to Form 3 and Form 7 Only.

2. Reduction in Limit

The limit of liability for Coverage C may be reduced to an amount not less than 40% of the limit for Coverage A at a credit of \$0.63 per \$1,000 of insurance. Reduction in the limit of liability for Coverage C is not permitted when Endorsement SH-9042 – Office, Professional, Private School, or Studio Use or SH-31263 – Special Protection Package (Silver), SH-31796 – Enhanced Protection Package (Gold), or the SH-91801 - Supreme Protection Package (Platinum) is requested. Form 7 Coverage C may not be reduced.

Applicable to Form 3 Only.

J. OTHER STRUCTURES - Increased Limits

The basic policy provides a 10% of Coverage A extension applicable to Coverage B, Other Structures, located on the residence premises. The structure must be identified and the specific amount of additional coverage must be shown.

When the limit of liability for Coverage B is increased, the additional premium shall be \$2.10 per \$1,000 of insurance.

Applicable to Form 3 and Form 7 Only.

K. BUILDING ADDITIONS AND ALTERATIONS

When the basic limit of \$1,000 is increased, the applicable premium is \$4.45 for each additional \$1,000 of Coverage A.

Applicable to Form 6 Only.

L. LOG HOME SURCHARGE

For homes constructed of full logs, an 75% surcharge applies. The surcharge does not apply to homes with log siding.

Applicable to Form 3 and Form 7 Only.

II. Optional Endorsement Coverages and Credits

A. Section I - Property Damage Coverages and Credits

1. SH-9291 - CONTENTS REPLACEMENT COST COVERAGE

Coverage for personal property may be extended to include the full cost of repair or replacement without deduction for depreciation, subject to the terms of the contents replacement cost endorsement.

When this coverage is provided on a Form 3 policy without Modified Replacement Cost Coverage, Coverage A must be 100% of the dwelling replacement cost.

The additional annual premium for this coverage is determined as follows:

Form 3 - Multiply the total adjusted base premium by 10% (round to the nearest dollar).

Form 4 - Multiply the total adjusted base premium by 30% (round to nearest dollar).

<u>Policy</u>	<u>Minimum Additional Premium</u>
Form 3	\$22
Form 4	24

Applicable to Policy Form 3 and Form 4 Only.
 Coverage required with the Special Protection Package (Silver),
 and the Enhanced Protection Package (Gold).
 Coverage automatically provided with the Supreme Protection Package (Platinum).

2. SH-31161 - MODIFIED REPLACEMENT COST

When a home's market value is 80% or less of its replacement cost, then Modified Replacement Cost will apply. This endorsement revises the Loss Settlement provision for Coverage A allowing us to repair and replace damage to a dwelling with commonly used construction materials and methods. The additional premium is determined by multiplying the total adjusted base premium by the following:

$$\begin{array}{r}
 \text{Replacement Cost Policy} \\
 \text{Amount Factor} \\
 \div \\
 \text{Desired Coverage Policy} \\
 \text{Amount Factor}
 \end{array}
 \times
 \begin{array}{r}
 \text{Replacement Cost Deductible} \\
 \text{Amount Factor} \\
 \div \\
 \text{Desired Coverage Deductible} \\
 \text{Amount Factor}
 \end{array}
 \times
 \begin{array}{r}
 \text{MRC} \\
 \text{Credit} \\
 \text{Factor}
 \end{array}
 = 1$$

MRC Credit Factors for Coverage A Amounts Above \$150,000

>70% but ≤ 80%	0.89
>60% but ≤ 70%	0.87
>50% but ≤ 60%	0.85
>40% but ≤ 50%	0.82
>30% but ≤ 40%	0.79
>20% but ≤ 30%	0.75
≤ 20%	0.70

MRC Credit Factors for Coverage A Amounts At or Below \$150,000

>70% but ≤ 80%	0.96
>60% but ≤ 70%	0.93
>50% but ≤ 60%	0.90
>40% but ≤ 50%	0.87
>30% but ≤ 40%	0.85
>20% but ≤ 30%	0.82
≤ 20%	0.79

Applicable to Policy Form 3 Only.

3. **SH-9292 - DWELLING UNDER CONSTRUCTION**

A Homeowner policy may be issued to cover a dwelling under construction if the construction will be completed and the dwelling occupied within one year from the date construction begins. The effective date of the policy must be the date construction is actually started. If a home has a basement, however, the effective date must be the date construction begins above the level of the lowest basement floor. The amount of coverage provided is provisional.

Upon occupancy or completion, whichever is sooner, the home office must be notified and the policy will be amended to reflect any adjustments. (Refer to further requirements under eligibility section of manual.)

To determine the Dwelling Under Construction credit, multiply the adjusted base premium by 66%.

The Utilities/Roof Rating Plan and Protective Device Credit do not apply to a policy that receives the Dwelling Under Construction credit.

The following endorsements are not available to homes receiving the Dwelling Under Construction Credit: the Special Protection Package (Silver), the Enhanced Protection Package (Gold), and the Supreme Protection Package (Platinum).

Applicable to Policy Form 3 and Form 7 Only.

4. **SH-9781 - THEFT COVERAGE ON DWELLING UNDER CONSTRUCTION**

For an additional premium, theft coverage in or to a newly constructed dwelling prior to occupancy is available if the dwelling is fully enclosed and capable of being locked.

Upon occupancy or completion, whichever is sooner, the home office must be notified and the policy will be amended to reflect any adjustments.

The Dwelling Under Construction Endorsement, SH-9292, must be present in order to add endorsement.

The premium will not be refunded if this endorsement is cancelled.

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$12
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	11
0.5% of Coverage A	10
1% of Coverage A	9
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	8
\$3,000	7
2% of Coverage A	6
\$5,000	4

Applicable to Policy Form 3 and Form 7 Only.

5. **SH-9766 - SCHEDULED PERSONAL PROPERTY COVERAGE**

This endorsement provides specific coverage for certain eligible classes of personal property. Refer to underwriting section for description of eligible classes. Each item must be listed separately and a premium charged accordingly. The amount of coverage shown for each item will be the maximum limit of coverage provided by the Company. Each item must be scheduled for 100% of its current value.

The additional premium for this coverage is:

LIMIT CODE	ELIGIBLE CLASSES	ANNUAL RATES PER \$100 OF INSURANCE DEDUCTIBLE	
		ACV	10%
01	Jewelry	\$ 1.05	\$1.00
02	Furs	0.53	0.50
03	Cameras and Equipment (Noncommercial)	1.50	1.43
04	Musical Instruments* (Nonprofessional Only)	0.63	0.60
05	Silverware	0.30	0.29
06	Sporting Equipment	1.74	1.65
07	Fine Arts	0.39	0.37
08	Stamps	0.74	0.70
09	Coins	1.68	1.60
10	Tools	1.80	1.71
11	Collectibles	0.90	0.86
12	Guns	1.74	1.65
13	Pets		
	First \$200	9.00	8.55
	Each Additional \$100	4.50	4.28

* A professional is a person who receives any remuneration during the term of the policy for playing a musical instrument.

Applicable to All Policy Forms.

6. SH-9542 - JEWELRY, WATCHES, AND FURS INCREASED COVERAGE

This endorsement may be attached to the policy to increase the individual limit for any one such item to \$2,500, with an aggregate total limit of \$5,000 per occurrence, for all perils other than theft. The aggregate limit for theft is the greater of \$5,000 or 1% of Coverage A.

In addition, the endorsement increases the limit of liability for Coverage C by \$5,000 for all perils other than the named perils listed in the policy.

The annual premium for these increased limits is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$21
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	19
0.5% of Coverage A	18
1% of Coverage A	17
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	16
\$3,000	14
2% of Coverage A	13
\$5,000	8

Applicable to Policy Form 7 Only.

Not applicable with the Supreme Protection Package (Platinum).

7. SH-9381 - BROADENED JEWELRY, WATCHES, AND FURS COVERAGE

This endorsement may be attached providing coverage for such items when the loss is caused by direct, physical loss or damage other than any named peril listed in the policy with an individual limit per item of \$1,000 and a total limit of \$2,500 per occurrence.

The Special Limits of Liability under Coverage C – Personal Property, for loss by theft are as follows:

- The greater of \$2,500 or ½ of 1% of Coverage A for all Property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-3.
- The greater of \$2,500 or 1% of Coverage C for all property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-4.
- The greater of \$2,500 or 2% of Coverage C for all property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-6.

The limit of liability shown in the Declarations for Coverage C is increased \$2,500 for covered perils other than the named perils listed in the policy.

The additional premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$8
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	7
0.5% of Coverage A	6
1% of Coverage A	5
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	4
\$3,000	3
2% of Coverage A	2
\$5,000	1

Applicable to Policy Form 3, Form 4, and Form 6 Only for their respective deductible options.
Not applicable with the Supreme Protection Package (Platinum)

8. **SH-91281 - BROADENED JEWELRY, WATCHES, AND FURS COVERAGE – INCREASED LIMIT**

This endorsement may be attached providing coverage for such items when the loss is caused by direct physical loss or damage other than any named peril listed in the policy, with an individual limit per item of \$2,500 and a total limit of \$5,000 per occurrence.

The Special Limits of Liability under Coverage C – Personal Property for losses by theft are as follows:

- a. The greater of \$5,000 or ½ of 1% of Coverage A for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-3.
- b. The greater of \$5,000 or 1% of Coverage C for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-4.
- c. The greater of \$5,000 or 2% of Coverage C for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-6.

The limit of liability shown in the Declarations for Coverage C is increased by \$5,000 for covered perils other than the named perils listed in the policy.

The additional premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$28
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	24
0.5% of Coverage A	23
1% of Coverage A	22
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	20
\$3,000	17
2% of Coverage A	15
\$5,000	9

Applicable to Policy Form 3, Form 4, and Form 6 Only for their respective deductible options.
Not applicable with the Supreme Protection Package (Platinum)

9. **SH-91044 - INCREASED COVERAGE FOR GUNS**

The basic Form 3 and Form 7 policy forms provide theft coverage for guns and related equipment, with a total limit of the greater of \$3,000 or 1% of Coverage A per occurrence.

The basic Form 4 policy form provides theft coverage for guns and related equipment, with a total limit of the greater of \$2,500 or 2% of Coverage C per occurrence.

The basic Form 6 policy form provides theft coverage for guns and related equipment, with a total limit of the greater of \$3,000 or 2% of Coverage C per occurrence.

This endorsement may be attached to these policies to increase the limit to the greater of \$5,000 or 1% of Coverage A (Forms 3 and 7) OR the greater of \$5,000 or 2% of Coverage C (Forms 4 and 6) per occurrence, for loss by theft.

The annual premium for this increased limit is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$8
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	7
0.5% of Coverage A	6
1% of Coverage A	5
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	4
\$3,000	3
2% of Coverage A	2
\$5,000	1

Applicable to All Policy Forms for their respective deductible options. Coverage is automatically provided in Forms 3 and 7 with the Supreme Protection Package (Platinum).

10. SH-91045 - INCREASED COVERAGE FOR SERVICE SETS

The basic Form 3 and Form 7 policy forms provide theft coverage for silverware, goldware, and other service sets with a total limit of the greater of \$2,500 or 1% of Coverage A per occurrence.

The basic Form 4 and Form 6 policy forms provide theft coverage for silverware, goldware, and other service sets with a total limit of the greater of \$2,500 or 2% of Coverage C per occurrence.

This endorsement may be attached to these policies to increase the limit to the greater of \$5,000 or 1% of Coverage A (Forms 3 and 7) OR the greater of \$5,000 or 2% of Coverage C (Forms 4 and 6) per occurrence, for loss by theft.

The annual premium for this increased limit is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$10
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	9
0.5% of Coverage A	8
1% of Coverage A	7
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	6
\$3,000	5
2% of Coverage A	4
\$5,000	3

Applicable to All Policy Forms for their respective deductible options. Coverage is automatically provided in Forms 3 and 7 with the Supreme Protection Package (Platinum).

11. SH-91794 – INCREASED LIMITS FOR HOME COMPUTER HARDWARE AND SOFTWARE

This endorsement provides increased coverage for computer hardware and software whether used for personal or business reasons. For Forms 3 and 7, the basic policy limits for computer hardware and software may be increased up to \$20,000, OR 1% of Coverage A, whichever is greater. For Forms 4 and 6, the basic policy limits for computer hardware and software may be increased up to \$20,000, OR 2% of Coverage C, whichever is greater.

The premium for increased limits for computer hardware and software is \$4 per thousand.

Applicable to All Policy Forms.

12. **SH-9050 - INCREASED LIMITS FOR PERSONAL PROPERTY AT OTHER RESIDENCES**

The basic policy provides a 10% extension of Coverage C for personal property normally located at additional residences away from the residence premises. This endorsement may be attached to provide increased coverage for personal property usually located at any insured's residence other than the residence premises.

The premium for these increased limits is \$5 per thousand.

Applicable to All Policy Forms.

13. **SH-9878 - EARTHQUAKE COVERAGE (10% Deductible)**

NOTE: This endorsement is available only for renewals that currently have this endorsement.

This endorsement amends the policy to include coverage for direct physical loss to property described in Coverages A, B, and C caused by earthquake. When earthquake coverage is provided, it does not increase the limits of liability stated in the policy and does not include the costs of filling land.

The deductible for loss covered under this earthquake endorsement is the amount determined by applying the deductible percentage of **10%** separately to each of the following:

- (a) the limit as shown on the Declarations for Coverage A - Dwelling;
- (b) the limit as shown on the Declarations for Coverage B - Other Structures;
- (c) the limit as shown on the Declarations for Coverage C - Personal Property plus the limit of coverage provided under any Scheduled Personal Property Endorsements.

In addition, the minimum deductible amount for any one covered loss under Coverages A, B, or C shall be \$500 for each coverage that applies to the loss.

NOTE: SPECIAL BINDING AUTHORITY RESTRICTIONS FOR THIS ENDORSEMENT (new or renewal business)

For a period of 30 days, coverage may not be bound on any house within 100 miles of the epicenter of an earthquake measuring 5.0 or greater on the Richter Scale.

The exclusion applying to exterior masonry veneer may be deleted for the additional premium shown below under the All Others category.

The premium for this coverage is:

ZONE	PREMIUM PER \$1,000								APPLIED TO
	FRAME								
	1	2	3	4	5	6	7	8	
FORMS 3 and 7	\$3.58	\$1.69	\$1.69	\$.90	\$.90	\$.53	\$.47	\$.31	Coverage A Limit of Liability
FORMS 4 and 6	.68	.34	.26	.22	.19	.16	.14	.12	Coverage C Limit of Liability
FORMS 3 and 7	.34	.17	.13	.11	.10	.08	.07	.06	Amount of Increase Only
Coverage C Increased Limits									
ALL FORMS	3.58	1.69	1.69	.90	.90	.53	.47	.31	Amount Increased or Added
Appurtenant Structures									

ZONE	PREMIUM PER \$1,000								APPLIED TO
	ALL OTHERS								
	1	2	3	4	5	6	7	8	
FORMS 3 and 7	\$5.34	\$2.52	\$2.52	\$1.35	\$1.35	\$.79	\$.70	\$.47	Coverage A Limit of Liability
FORMS 4 and 6	.68	.34	.26	.22	.19	.16	.14	.12	Coverage C Limit of Liability
FORMS 3 and 7	.34	.17	.13	.11	.10	.08	.07	.06	Amount of Increase Only
Coverage C Increased Limits									
ALL FORMS	5.34	2.52	2.52	1.35	1.35	.79	.70	.47	Amount Increased or Added
Appurtenant Structures									

Zone Definitions

Counties of:

- | | | | |
|----|--|---------------------------------------|----------------------------|
| 1. | Mississippi | Poinsett | |
| 2. | Craighead | Crittenden | Cross |
| 3. | Clay
Greene | Jackson | St. Francis |
| 4. | Independence
Lawrence
Lee | Monroe
Prairie
Randolph | White
Woodruff |
| 5. | Arkansas | Lonoke | Phillips |
| 6. | Chicot
Cleveland
Dallas
Desha | Drew
Grant
Jefferson
Lincoln | Pulaski
Saline
Sharp |
| 7. | Ashley
Bradley
Calhoun | Cleburne
Conway
Faulkner | Izard
Perry |
| 8. | Remainder of State | | |

Applicable to All Policy Forms.

14. **SH-91260 - EARTHQUAKE COVERAGE (15% Deductible)**

NOTE: This endorsement is available only for renewals that currently have this endorsement.

This endorsement amends the policy to include coverage for direct physical loss to property described in Coverages A, B, and C caused by earthquake. When earthquake coverage is provided, it does not increase the limits of liability stated in the policy and does not include the costs of filling land.

The deductible for loss covered under this earthquake endorsement is the amount determined by applying the deductible percentage of **15%** separately to each of the following:

- (a) the limit as shown on the Declarations for Coverage A - Dwelling;
- (b) the limit as shown on the Declarations for Coverage B - Other Structures;
- (c) the limit as shown on the Declarations for Coverage C - Personal Property plus the limit of coverage provided under any Scheduled Personal Property Endorsements.

In addition, the minimum deductible amount for any one covered loss under Coverages A, B, or C shall be \$750 for each coverage that applies to the loss.

NOTE: SPECIAL BINDING AUTHORITY RESTRICTIONS FOR THIS ENDORSEMENT (new or renewal business)

For a period of 30 days, coverage may not be bound on any house within 100 miles of the epicenter of an earthquake measuring 5.0 or greater on the Richter Scale.

The exclusion applying to exterior masonry veneer may be deleted for the additional premium shown below under the All Others category.

The premium for this coverage is:

ZONE	PREMIUM PER \$1,000								APPLIED TO
	1	2	3	4	5	6	7	8	
FORMS 3 and 7	\$2.51	\$1.18	\$1.18	\$.63	\$.63	\$.37	\$.33	\$.22	Coverage A Limit of Liability
FORMS 4 and 6	.48	.24	.18	.15	.13	.11	.10	.08	Coverage C Limit of Liability
FORMS 3 and 7	.24	.12	.09	.08	.07	.06	.05	.04	Amount of Increase Only
Coverage C Increased Limits									
ALL FORMS	2.51	1.18	1.18	.63	.63	.37	.33	.22	Amount Increased or Added
Appurtenant Structures									

ZONE	PREMIUM PER \$1,000								APPLIED TO
	1	2	3	ALL OTHERS		6	7	8	
FORMS 3 and 7	\$3.74	\$1.76	\$1.76	\$.95	\$.95	\$.55	\$.49	\$.33	Coverage A Limit of Liability
FORMS 4 and 6	.48	.24	.18	.15	.13	.11	.10	.08	Coverage C Limit of Liability
FORMS 3 and 7 Coverage C Increased Limits	.24	.12	.09	.08	.07	.06	.05	.04	Amount of Increase Only
ALL FORMS Appurtenant Structures	3.74	1.76	1.76	.95	.95	.55	.49	.33	Amount Increased or Added

*See Endorsement SH-9878 for zone descriptions.

Applicable to All Policy Forms.

15. SH-6035 - LOSS ASSESSMENT COVERAGE

When the policy is extended to cover loss assessment for which the insured may be liable, excluding Earthquake, the premiums listed shall apply:

<u>Limit of Liability</u>	<u>Premium Per \$1,000 Coverage</u>
First \$5,000	\$.50
Next \$20,000	.25
Above \$25,000	.10

Applicable to Policy Form 6 Only.

16. SH-9401 - BUSINESS MERCHANDISE COVERAGE

The policy excludes from Section I Coverage any loss to merchandise held as samples or for sale after delivery. This endorsement may be attached to provide \$5,000 coverage for this exposure.

The premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$13
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	12
0.5% of Coverage A	11
1% of Coverage A	10
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	9
\$3,000	8
2% of Coverage A	7
\$5,000	5

Applicable to All Policy Forms for their respective deductible options.

17. SH-9833 - OTHER STRUCTURE RESTRICTION

This endorsement allows homes to be insured that have other structures on the residence premises which are in poor condition. These structures are specifically identified on the endorsement and coverage is excluded.

A photograph of each excluded other structure is required.

No additional premium or discount is applicable to this endorsement.

Applicable to Policy Form 3 and Form 7 Only.

18. SH-9818 - OFF PREMISES STRUCTURES

With this endorsement, Coverage B - Other Structures may be extended to include structures which are located off premises. Coverage will be provided on an actual cash value basis for accidental direct physical loss. Coverage will not apply to:

- 1) Off premises dwellings, whether or not owner-occupied;
- 2) Buildings used in whole or in part for business purposes; or
- 3) Buildings which are rented or held for rental unless used solely as a private garage.

This endorsement does not increase the amount of coverage applying to Coverage B. The additional coverage provided by this endorsement applies only to the Off Premises Structure insured.

The additional premium shall be \$2.75 per \$1,000 of insurance.

Applicable to Policy Form 3 and Form 7 Only.

19. **SH-91227 - BROADENED WATER BACKUP OF SEWERS AND DRAINS**

The policy excludes from Section I Coverage any loss that is caused by water which backs up through sewers or drains. This endorsement may be attached to provide coverage for direct physical loss caused by water which backs up through sewers or drains, sump pumps, sump pump wells, or any device for the removal of ground water.

There is no coverage provided if the loss is caused by the insured's negligence.

The policy deductible or \$1,000, whichever is greater, will be deducted for each backup of sewer or drain loss covered by this endorsement.

The premium for this endorsement is listed below by amount of coverage provided per year.

<u>Amount of Coverage</u>	<u>Premium</u>
\$ 5,000	\$ 124
10,000	165

Applicable to Policy Form 3, Form 6, and Form 7 Only.
Not Available with the Supreme Protection Package (Platinum).

20. **SH-9661 - WATER BACKUP OF SEWERS AND DRAINS**

The policy excludes from Section I Coverage any loss that is caused by water which backs up through sewers or drains. This endorsement may be attached to provide up to \$2,500 of coverage per year for direct physical loss caused by water which backs up through sewers or drains, sump pumps, sump pump wells, or any device for the removal of ground water.

There is no coverage provided if the loss is caused by the insured's negligence, or for the replacement value, actual cash value, or actual replacement of basement flooring materials.

The policy deductible or \$1,000, whichever is greater, will be deducted for each backup of sewer or drain loss covered by this endorsement.

The premium for this coverage is \$83.

Applicable to Policy Form 3, Form 6, and Form 7 Only.
Not Available with the Supreme Protection Package (Platinum).

21. **SH-9304 - FIRE DEPARTMENT SERVICE CHARGE**

The limit of \$500 provided under the Homeowner policy may be increased at an additional rate of \$2 per \$500 of coverage.

Applicable to All Policy Forms.

22. **SH-9053 - CREDIT CARD, FUND TRANSFER CARD, FORGERY, AND COUNTERFEIT MONEY COVERAGE**

This endorsement provides increased limits for these types of property.

The premiums for this additional coverage are as follows:

<u>Additional Coverage Amount</u>	<u>Premium</u>
\$ 1,000	\$ 2
2,000	4
3,000	6
4,000	8
5,000	10

Applicable to All Policy Forms.

23. **SH-9807 - VACANCY COVERAGE**

Forms 3, 6, and 7 restrict coverage for vandalism and glass breakage if the dwelling has been vacant for more than 30 consecutive days. For an additional premium, this limitation may be deleted.

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$45
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	38
0.5% of Coverage A	37
1% of Coverage A	36
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	33
\$3,000	29
2% of Coverage A	28
\$5,000	17

Applicable to Policy Form 3, Form 6, and Form 7 Only for their respective deductible options.

24. **SH-6033 - CONDOMINIUM UNIT-OWNERS RENTAL TO OTHERS**

When the policy is extended to include coverage for unscheduled personal property when the premises is rented to others, the additional premium shall be the otherwise applicable basic Form 6 premium increased 35%.

Applicable to Policy Form 6 Only.

25. **SH-31263 - SPECIAL PROTECTION PACKAGE – “Silver”**

Coverage may be written to provide a maximum loss payment of 125% of the Coverage A amount for the dwelling. This coverage and Ordinance or Law Coverage shall not increase the total amount the Company pays under Coverage A - Dwelling for the cost of repair or replacement beyond 125% of the limit as shown on the Declarations for Coverage A.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost, and
2. Purchase Replacement Cost Coverage on contents.
3. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this Special Package increases the limit of Coverage C - Personal Property to 75% of Coverage A - Dwelling, and increases the limit of Coverage D - Loss of Use to 25% of Coverage A.

Annual Premium - \$10

Applicable to Policy Form 3 Only.
Not Applicable With Modified Replacement Cost Coverage,
Enhanced Protection Package (Gold),
or Supreme Protection Package (Platinum).

26. **SH-31796 - ENHANCED PROTECTION PACKAGE – “Gold”**

Coverage may be written to provide loss payment of the Coverage A amount for the amount to repair or replace the dwelling up to 125% of the Coverage A amount shown on the policy Declarations. This endorsement also provides the following coverage enhancements:

1. Ordinance or Law Coverage: Up to 25% of the Coverage A limit.
2. Dwelling Lock Replacement Coverage: Up to \$500.
3. Land Coverage: Up to \$10,000 for costs to replace, rebuild, stabilize or otherwise restore the land necessary to support that part of the dwelling sustaining a covered loss.
4. Additional Living Expense and Fair Rental Value: Time period extended to 36 months.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost, and
2. Purchase Replacement Cost Coverage on contents.
3. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling, which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this Enhanced Protection Package increases the limit of Coverage C – Personal Property to 75% of Coverage A – Dwelling, and increases the limit of Coverage D – Loss of Use to 25% of Coverage A.

The additional premium is determined by applying the following schedule:

Zone 1

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	1% X Adjusted Base Premium + \$35
First Preceding Year	3% X Adjusted Base Premium + \$35
Second Preceding Year	4% X Adjusted Base Premium + \$35
Third Preceding Year	6% X Adjusted Base Premium + \$35
Fourth Preceding Year	7% X Adjusted Base Premium + \$35
Fifth and All Additional Preceding Years	9% X Adjusted Base Premium + \$35

Zone 2

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	1% X Adjusted Base Premium + \$35
First Preceding Year	4% X Adjusted Base Premium + \$35
Second Preceding Year	7% X Adjusted Base Premium + \$35
Third Preceding Year	10% X Adjusted Base Premium + \$35
Fourth Preceding Year	13% X Adjusted Base Premium + \$35
Fifth and All Additional Preceding Years	16% X Adjusted Base Premium + \$35

*See Endorsement SH-91407 for Zone definitions.

Applicable to Policy Form 3 Only.

Not Applicable with Modified Replacement Cost Coverage,
Special Protection Package (Silver),
or Supreme Protection Package (Platinum).

27. SH-91801- SUPREME PROTECTION PACKAGE – “Platinum”

Coverage may be written to provide loss payment of the Coverage A amount for the amount to repair or replace the dwelling up to 200% of the Coverage A amount shown on the policy Declarations. This endorsement extends coverage for personal property to include all risk coverage, subject to the terms of the Supreme Protection Package. This endorsement also provides the following coverage enhancements:

1. Ordinance or Law Coverage: Up to 100% of the Coverage A limit.
2. Debris Removal: Increased from \$500 to \$1,000.
3. Trees, Shrubs, and Other Plants: Increased from \$500 to \$1,000.
4. Fire Department Service Charge: Increased from \$500 to \$1,000.
5. Refrigerated Products Coverage: Up to 100% of the Coverage C limit.
6. Dwelling Lock Replacement Coverage: Up to \$500.
7. Limited Fungus Remediation Coverage: Up to \$15,000.
8. Water Backup Coverage: Up to \$20,000.
9. Land Coverage: Up to 10% of the amount of the covered loss to the dwelling or other structure for the excavation, replacement, or stabilization of the land on the residence premises.
10. Additional Living Expense and Fair Rental Value: Time period extended to 36 months.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost;
2. Purchase Stolen Identity Package Endorsement, SH-91465
3. Purchase Equipment Breakdown Coverage Endorsement, SH-91909; and
4. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling, which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this endorsement removes the percent limitation of Coverage D – Loss of Use and provides up to 30 days coverage for prohibited use by civil authority and includes Ordinance or Law Coverage when damage to the dwelling exceeds 10% of the Coverage A amount. The Supreme Protection Package also increases the limit of Coverage B to 20% of Coverage A, and increases the limit of Coverage C to 75% of Coverage A. Furthermore, this Supreme Protection Package provides increased special limits of liability for several items, as detailed in the endorsement.

The additional premium is determined by applying the following schedule:

Zone 1

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	23% X Adjusted Base Premium + \$315
First Preceding Year	25% X Adjusted Base Premium + \$315
Second Preceding Year	26% X Adjusted Base Premium + \$315
Third Preceding Year	28% X Adjusted Base Premium + \$315
Fourth Preceding Year	29% X Adjusted Base Premium + \$315
Fifth and All Additional Preceding Years	31% X Adjusted Base Premium + \$315

Zone 2

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	23% X Adjusted Base Premium + \$315
First Preceding Year	26% X Adjusted Base Premium + \$315
Second Preceding Year	29% X Adjusted Base Premium + \$315
Third Preceding Year	32% X Adjusted Base Premium + \$315
Fourth Preceding Year	34% X Adjusted Base Premium + \$315
Fifth and All Additional Preceding Years	37% X Adjusted Base Premium + \$315

*See Endorsement SH-91407 for Zone definitions.

Applicable to Policy Form 3 and Form 7 Only.

Not Applicable with Modified Replacement Cost Coverage,
Special Protection Package (Silver),
or Enhanced Protection Package (Gold).

28. SH-71261 – EXCESS DWELLING COVERAGE

Coverage may be written to provide a maximum loss payment of 125% of the Coverage A amount for the dwelling. To qualify for this coverage, the insured must agree to:

- 1) Insure the dwelling for 100% Replacement Cost; and
- 2) Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling which will increase the value of the dwelling by \$5,000 or more and pay any resulting premium.

Applicable to Policy Form 7 Only.

Not Applicable with the Supreme Protection Package (Platinum).

29. **SH-91407 - ORDINANCE OR LAW COVERAGE**

For the additional premium, covered losses that are at least 50% or more of the Coverage A limit for Policy Forms 3 and 7 will be settled on the basis of any ordinance or law that regulates the construction, repair or demolition of the property. The amount of coverage provided by this endorsement is 25% of the Coverage A limit.

For Form 3 policies, this coverage and Special Protection Package (Silver) Coverage shall not increase the total amount the Company will pay under Coverage A - Dwelling for the cost of repair or replacement beyond 125% of the Coverage A limit as shown on the Declarations.

For Form 7 policies, this coverage and Excess Dwelling Coverage shall not increase the total amount the Company will pay under Coverage A - Dwelling for the cost of repair or replacement beyond 125% of the Coverage A limit as shown on the Declarations.

The additional premium is determined by multiplying the adjusted base premium by the following applicable percentage:

<u>Home Completed and First Occupied</u>	<u>Adjustment to Base Premium</u>	
	<u>Zone 1</u>	<u>Zone 2</u>
Current Calendar Year	0%	0%
First Preceding Year	2%	3%
Second Preceding Year	3%	6%
Third Preceding Year	5%	9%
Fourth Preceding Year	6%	12%
Fifth and All Preceding Years	8%	15%

Zone 1 – Remainder of State

Zone 2 – Clay, Craighead, Crittenden, Greene, Mississippi, Poinsett Counties

Applicable to Policy Form 3 and Form 7 Only.

Equivalent or better coverage automatically provided with the Enhanced Protection Package (Gold); and Supreme Protection Package (Platinum).

30. **SH-91465 - STOLEN IDENTITY PACKAGE “Secure I.D. from ANPAC®”**

For an additional premium, this endorsement may be added to the policy to provide up to \$50,000 for reasonable and necessary expenses incurred by an insured as the result of any one stolen identity occurrence during the policy period. Aggregate coverage for multiple stolen identity occurrences shall not exceed \$100,000 per policy period. Income Replacement coverage of up to \$200 per day for a maximum of 25 days or \$5,000 for lost wages when having to take time from work to rectify records as a result of a stolen identity occurrence. No deductible applies to the loss for each stolen identity occurrence.

The premium for this coverage is \$90. (A minimum premium of \$35 shall be earned in full.)

Applicable to All Policy Forms.

Required with the Supreme Protection Package (Platinum).

31. **SH-91909 – EQUIPMENT BREAKDOWN COVERAGE**

For an additional premium, this endorsement may be added to provide up to \$50,000 in repair or replacement coverage arising from any one accident caused by sudden and accidental breakdown of mechanical or electrical equipment such as central air conditioning unit, heating unit, hot water heater and other basic electrical services in the home (central vacuums, chair lifts/elevators, well pumps, generators, electric power panels, permanently installed appliances, etc.).

Coverage is also provided for spoilage of refrigerated property (\$500), and loss of use (\$200 per day/\$1,000 aggregate) as a result of a covered loss. Loss due to electrical power surge or brownout is not covered. Electronic entertainment or component equipment is not covered. The coverage provided under this endorsement does not increase any limit of liability under Section I. A \$1,000 deductible applies for each covered occurrence.

The premium for this coverage is as follows:

Coverage A Value Range	0-\$250,000	\$250,001 to \$500,000	\$500,001 to \$1,000,000	\$1,000,001 to \$5,000,000
Base Rate	\$73	\$109	\$137	\$150

Applicable to Policy Forms 3, 6 and 7
Required with the Supreme Protection Package (Platinum).

32. **SH-9819 - CONTRACTORS' INTEREST**

The contractor's interest in the building only is covered with this endorsement. No additional premium is applicable for this coverage.

Applicable to Form 3 and Form 7 Only.

B. **Section II - Liability Coverages**

1. **SH-9072 - INCIDENTAL FARM AND ANIMAL LIABILITY COVERAGE**

This endorsement provides Section II coverage for incidental farming operations conducted on the residence premises or caused by animals on or adjacent to the residence premises. "Incidental" would include instances where the insured has livestock or plant crops used only for personal consumption.

It should be noted this is not a farmers comprehensive personal liability coverage. This form has no provision for covering employer's liability or extended liability for farming operations conducted away from the residence premises.

As farming operations create unique exposures, careful attention to underwriting must be given. Underwriting considerations for this incidental coverage include the number of acres, number of animals, and the size and condition of any outbuildings.

The additional premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Farm and Animal</u>
\$ 25,000	\$ 5
50,000	6
100,000	7
200,000	9
300,000	11
500,000	15
1,000,000	25

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Farm and Animal</u>
\$ 1,000	\$4
2,000	5
5,000	7

Applicable to Policy Form 3 and Form 7 Only.

2. **SH-9071 - INCIDENTAL BUSINESS PURSUITS**

This endorsement may be attached to provide Section II coverages for liability of the insured arising out of incidental business activities; however, this coverage does not apply to products liability. Only the occupations listed below are eligible for this coverage.

NOTE: This coverage may not be provided for any insured in connection with a business partnership of which the insured is a partner or member. The limits of liability for this coverage must be the same as in the basic policy.

Classifications:

- A. Clerical Office Employees - Defined as those employees whose duties are confined to keeping the books or records, conducting correspondence, or who are engaged wholly in office work where such books or records are kept or where such correspondence is conducted, having no other duty of any nature in or about the employer's premises.
- B. Salespersons, collectors, or messengers.
- C. Teachers - For all teachers, including corporal punishment of pupils.

The premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Classifications A, B, and C</u>
\$ 25,000	\$ 3
50,000	4
100,000	5
200,000	6
300,000	7
500,000	8
1,000,000	11

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Classifications A, B, and C</u>
\$ 1,000	\$2
2,000	3
5,000	4

Applicable to All Policy Forms.

3. SH-9380 - HOME DAY-CARE COVERAGE

When the insured provides day-care or babysitting services in the insured dwelling or other structures located on the residence premises, this endorsement may be attached to provide Section II Coverages. The form is designed for incidental exposures only. The insured may provide day-care services for one to three children in the home at any one time. The limits shown for Coverage E and Coverage F are annual aggregate limitations, regardless of the number of occurrences, insureds, claims made, suits brought, or persons injured.

The additional premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Exposures</u>
\$ 25,000	\$30
50,000	35
100,000	40
200,000	47
300,000	55
500,000	60
1,000,000	75

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Exposures</u>
\$ 1,000	\$10
2,000	15
5,000	20

Applicable to All Policy Forms.

4. SH-9695 - CHILD CARE COVERAGE

NOTE: Coverage is available on an exception basis and must be submitted to the Home Office for approval prior to binding coverage

When the insured provides day-care or babysitting services in the insured dwelling or other structures located on the residence premises, this endorsement may be attached to provide Section II Coverages. The form is designed for incidental exposures only. The insured may provide day-care services for up to six children in the home at any one time. The limits shown for Coverage E and Coverage F are annual aggregate limitations, regardless of the number of occurrences, insureds, claims made, suits brought, or persons injured.

The rates shown apply to all Coverage F - Medical Payment limits.

<u>Coverage E – Personal Liability Limits</u>	<u>Adjustment to Premium Incidental Exposures</u>
\$ 100,000	\$ 200
200,000	250
300,000	300
500,000	400
1,000,000	650

Applicable to All Policy Forms

5. **SH-9082 - PERSONAL INJURY COVERAGE**

This endorsement broadens the definition of bodily injury under Coverage E - Personal Liability, to include personal injury to others. This coverage includes areas such as false arrest, libel, or invasion of privacy, subject to limitations found in the endorsement itself.

Special underwriting considerations apply to the use of this endorsement. Generally, individuals in the following types of occupations would not be eligible for this endorsement:

1. Law Enforcement Officer, Private Investigator, Bail Bondsman
2. Internet Service, Internet Service Provider or related support personnel, backbone personnel, Installer or Consultant
3. Network Application Provider or related support personnel, Installer or Consultant
4. Director or Officer of Publicly Held Corporation
5. Judge / Politician
6. Labor Negotiator
7. Professional or Semi-Professional Athlete / Coach
8. Professional Actor, Entertainer / Author / Public Lecturer / Broadcaster /Telecaster / Newspaper Reporter / Editor / Publisher / Advertiser

Any questions regarding a specific case should be directed to your underwriter.

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment</u>
\$ 100,000	\$10
200,000	12
300,000	13
500,000	16
1,000,000	24

Applicable to All Policy Forms.

6. **SH-4780 - TENANTS WATERBED LIABILITY**

A Form 4 policy may be endorsed to pay up to the Coverage E limit of liability, all sums for which the insured is legally liable to pay for damage to property of others, caused by or arising out of the ownership, maintenance or use of the owned waterbed on the residence premises. The premium for this endorsement is \$20.

Applicable to Policy Form 4 Only.

7. **SH-4074 - THREE- OR FOUR-FAMILY DWELLING PREMISES LIABILITY**

The following tables show the premium when Coverages E and F are provided for the indicated exposures.

Coverage E – Personal <u>Liability Limits</u>	Premium Adjustment	
	Form 4 Only <u>3 Family Dwelling</u>	Form 4 Only <u>4 Family Dwelling</u>
\$ 25,000	\$ 9	\$11
50,000	10	12
100,000	11	13
200,000	12	14
300,000	13	15
500,000	15	17
1,000,000	20	22

Coverage F – Medical <u>Payments Limits</u>	Premium Adjustment	
	Form 4 Only <u>3 Family Dwelling</u>	Form 4 Only <u>4 Family Dwelling</u>
\$ 1,000	\$ 7	\$ 8
2,000	8	9
5,000	10	11

Applicable to Policy Form 4 Only.

C. **Section I and II**

1. **SH-9207 - ADDITIONAL RESIDENCE PREMISES - RENTED TO OTHERS**

This endorsement provides liability and medical payments coverages for any exposure arising out of any one- to four-family dwelling which is rented from or held for rental to others by the insured. The rental property may be, but is not required to be, a part of or attached to the residence premises.

This endorsement also amends Coverage B - Other Structures to provide coverage when the structure is used for the business purpose of renting to others as a resident premises.

The additional premium is developed from the tables below:

Coverage E – Personal <u>Liability Limits</u>	Adjustment to Premium			
	Rented to Others <u>1 Family</u>	Rented to Others <u>2 Family</u>	Rented to Others <u>3 Family</u>	Rented to Others <u>4 Family</u>
\$ 25,000	\$ 6	\$10	\$14	\$18
50,000	8	12	16	20
100,000	10	14	18	22
200,000	12	16	20	24
300,000	14	18	22	28
500,000	18	22	26	34
1,000,000	28	32	36	50

Coverage F –Medical <u>Payments Limits</u>	Adjustment to Premium			
	Rented to Others <u>1 Family</u>	Rented to Others <u>2 Family</u>	Rented to Others <u>3 Family</u>	Rented to Others <u>4 Family</u>
\$ 1,000	\$ 6	\$ 8	\$12	\$14
2,000	8	10	14	16
5,000	12	14	18	20

Applicable to All Policy Forms.

2. **SH-9041 - ADDITIONAL INSURED RESIDENCE PREMISES**

(Other than Contractors)

This endorsement extends the definition of "insured" to include the person or persons named on the endorsement with respect to Coverages A - Dwelling, B - Other Structures, E - Personal Liability, and F - Medical Payments To Others. No additional premium is applicable for this coverage.

Applicable to All Policy Forms.

3. **SH-9042 - OFFICE, PROFESSIONAL, PRIVATE SCHOOL OR STUDIO USE**

When a permitted incidental occupancy is conducted on the residence premises, this endorsement must be attached. This form provides both Section I and II coverages to reflect a business exposure actually conducted on the residence premises.

Under Section I, the basic policy provides limited coverage on property actually used in business. If a higher limit is desired, the options listed below are available. Note--property for sale or held for resale is not covered under this form.

The premium for increased coverage on business property (does not include electronic Data Processing equipment or the recording or storage media used with the equipment) is:

<u>Limit</u>	<u>Premium</u>
\$5,000	\$5
7,500	7
10,000	10

A charge must be included for Section II coverages in all cases. The premium for the Section II exposure is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Occupancy on Premises</u>
\$ 25,000	\$ 8
50,000	9
100,000	10
200,000	11
300,000	12
500,000	14
1,000,000	18

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Occupancy on Premises</u>
\$ 1,000	\$4
2,000	6
5,000	8

Applicable to All Policy Forms.

4. **438BFU - LENDER'S LOSS PAYABLE ENDORSEMENT**

This endorsement protects the mortgagee's interest and rights and should only be added when requested by the mortgagee. No additional premium is applicable for this endorsement.

Applicable to All Policy Forms.

Exception: At the insured's request, existing policies in effect not more than 45 days prior to the effective date of the protection class change may be adjusted on a pro rata basis to the new premium on or after the effective date.

X. POLICY TERM

The Homeowners Policy is a continuous renewal policy written for a term of one year. Short term policies may be written for purposes of obtaining a policy expiration date at the request of the mortgagee. All premiums contained in the premium section of this manual are annual premiums. The premium for a policy term of less than one year shall be pro rata of the annual premium.

The policy is extended for successive policy terms by payment of the required continuation premium for each successive policy term based upon the premiums in effect on the renewal date. The Company shall, on each renewal date, furnish the named insured any form revisions applicable to the coverages to be continued in force.

XI. CHANGES IN LIMITS OR COVERAGES

The limits of liability may be increased or decreased or coverages may be added during the term of the policy. The adjusted premium is computed on a pro rata basis subject to all the manual rules.

Any policy change that takes place during the term of the policy will be shown by an Amended Declaration.

XII. TRANSFER OR ASSIGNMENT

Subject to all rules of this manual and any necessary adjustment of premium, an existing Homeowner Policy may be amended to reflect:

- A. Transfer to another location within the same state; or
- B. Assignment from one insured to another in the event of transfer of title of the dwelling. An application on the new owner must be submitted to the Home Office and approved by the Underwriting Department prior to the assignment being valid.

XIII. CANCELLATIONS

It shall not be permissible to cancel any of the mandatory coverages in the policy unless the entire policy is cancelled.

All cancellations shall be computed using the standard annual pro rata table.

If cancellation of the policy results in a return premium of \$5 or less, no refund will be made except at the request of the insured, in which case the actual return premium shall be allowed.

XIV. PREMIUM DETERMINATION

A. Calculation of Adjusted Base Premium

In this order, multiply the base rate by the following if the adjustment is applicable. Round each individual adjustment to three decimal places. After all adjustments are applied, round to the nearest whole dollar.

- 1. Determine base rate from Base Rates table according to zone, protection class, and construction type.
- 2. Amount of Insurance factor.
- 3. Deductible Adjustment factor.
- 4. Utilities/Roof Rating Plan factor (Applies to Policy Form 3).
- 5. Protective Device Credit factor.
- 6. Claim Free Plus factor.
- 7. Non-Weather Related Claims factor
- 8. Log Home Surcharge factor (Applies to Policy Form 3).

B. Total all miscellaneous and endorsement premium charges or credits except Earthquake Coverage, Equipment Breakdown Coverage, and the Stolen Identity Package. All miscellaneous and endorsement premiums are rounded to the nearest whole dollar. However, the minimum premium for any one endorsement is \$1.

- C. Subtotal by adding results in A and B.
- D. Multiply Auto-Home Discount (applies to Policy Forms 3 and 6 only) by the subtotal obtained in C. Round to the nearest whole dollar.
- E. Multiply TLC Discount by the subtotal obtained in C. Round to the nearest whole dollar.
- F. Final premium is determined by adding to the premium in C the result in D and E above and the cost of Earthquake Coverage , Equipment Breakdown Coverage, and the Stolen Identity Package (rounded to the nearest whole dollar) if it applies.

Rating Example:

(Actual premiums/rates were chosen arbitrarily for illustration purposes only.)

\$120,000 house (\$350 base rate, 1.073 Amount of Insurance factor)
 \$500 deductible (23% charge)
 Less than 1 year old home (Utilities/Roof Rating Plan Discount – 30% credit)
 Endorsement: Contents Replacement Cost coverage (12% of Adjusted Base Premium)
 Auto-Home Discount (10%)
 TLC Discount (10% credit)
 Endorsement: Earthquake coverage (.40/Thousand Charge)

Base Rate		\$350
X Amount of Insurance factor		<u>1.073</u>
		\$375.550
X Deductible Adjustment factor		<u>1.23</u>
		\$461.927
X Utilities/Roof Rating Plan factor		<u>0.70</u>
		\$323.349
Adjusted Base Premium		\$323
Endorsement		
Contents Replacement Coverage	$\$323 \times .12 =$	\$39
Subtotal		\$362
Auto-Home Discount	$\$362 \times -0.10 =$	-\$36
TLC Discount	$\$362 \times -0.10 =$	-\$36
Subtotal		\$290
Earthquake Coverage	$120 \times .40 =$	<u>\$ 48</u>
Total Policy Premium		\$338

XV. INTERPOLATION OF MANUAL PREMIUMS/FACTORS

The Amount of Insurance factor for a policy amount, in excess of the minimum policy amount, not shown in the Amount of Insurance Pages may be obtained by interpolation.

Method for Interpolation: A factor is desired for a policy amount of \$52,000 which falls between \$50,000 and \$55,000 shown in the Amount of Insurance Pages.

(1)	Policy Amounts Shown	Amount of Insurance Factors Shown
	\$ 55,000	0.775
	\$ 50,000	0.725
	\$ 5,000 - Difference (Amount)	0.050 - Difference (Factor)
(2)	$\frac{\$ 2,000 - \text{Additional (Amount)}}{\$ 5,000 - \text{Difference (Amount)}} \times$	$0.050 - \text{Difference (Factor)} = 0.020$
(3)	0.725 (Factor for \$50,000)	
	<u>0.020</u> (Factor for additional \$2,000)	
	0.745 (Factor for \$52,000)	

A similar method for interpolation is used to determine deductible adjustments for policy amounts not shown in the Deductible Adjustment Pages. Deductible adjustments are rounded to the nearest whole percent, and then converted to a rating factor.

The premium adjustment for the reduction in Coverage C, Section I as permitted by these rules, and premiums for additional amounts or coverages for both Sections I and II of the policy may also be interpolated.

NOTE - When the premium is obtained by interpolation, the limits for Coverages B, C, D, Section I should be revised in relation to the basic limit of liability on the dwelling. (See Rule IV)

XVI. PREMIUM PAYMENT

A. **Easy Pay - The Checkless Way[®]** - Insureds may elect to pay their premium by automatic, electronic monthly withdrawals from a checking or savings account. An authorization form must be completed by the insured and submitted to the Home Office along with the minimum required down payment for a new business application. A down payment is required when initiating an Easy Pay Plan and when adding a policy to an existing Easy Pay Plan.

No installment charge is applied to Easy Pay withdrawals.

The minimum required down payment for a new business application is one month's premium (1/12th of the total term premium for twelve-month policies).

The down payment requirement for Easy Pay is waived in these circumstances:

1. If the insured account qualifies under Underwriting Payment Plan Eligibility Category I.
2. If the insured has been an auto or homeowner policyholder for one full year or more.
3. If, at renewal, the request is submitted 60 days in advance of the renewal, and the current term is paid in full.

Non-Bound Trial Application - No down payment should be collected for non-bound trial applications.

Other Methods of Payment

B. **Cash with Application** – All new business applications and reinstatement applications, where Easy Pay is not selected as the payment method or where the bill is to be paid by the mortgagee, must be sent to the Home Office accompanied by a down payment remittance. A remittance of \$150 (\$75 for Form 4 and Form 6) or one-half of the annual premium, whichever is greater, is required. If the remittance is less than the full amount due and the amount due is more than \$25, a \$5 installment charge will be applied.

Non-Bound Trial Application - No down payment should be collected for non-bound trial applications.

C. **Renewal Payment** - The renewal premium is due and payable to the Home Office on or before the policy expiration date. The policyholder may elect to pay the renewal premium in two or four installments. Each installment will include a \$5 installment charge as shown on the renewal billing notice. If the amount due is less than \$25, the installment charge will be waived.

D. **Minimum Premium Rule** - The total annual policy minimum premium for Form 3 is \$150. For Form 4 and Form 6, the total annual policy minimum premium is \$75. The minimum premium requirements exclude premium for the following endorsements: Earthquake, Earthquake Loss Assessment, Equipment Breakdown Coverage, and Stolen Identity Package.

XVII. POLICY CHANGES

If a policy is amended and results in a total amount due of \$5 or less, such adjustment may be waived. Form policies with no balance due, a return premium of \$5 or less shall be allowed only at the insured's request.

XVIII. RATE CHANGES

A rate change, meaning any revision of premium, applicable to the Homeowner Program shall be made in accordance with the following procedures:

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL Frame

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01707	01707	01707	01764	01764	02023	02376	02842	03543	04767
002	01578	01578	01578	01632	01632	01870	02196	02628	03276	04408
003	02869	02869	02869	02967	02967	03400	03995	04778	05957	08014
004	02076	02076	02076	02147	02147	02460	02890	03456	04308	05796
005	02144	02144	02144	02217	02217	02540	02984	03569	04451	05988
006	02086	02086	02086	02157	02157	02472	02904	03473	04331	05826
007	02186	02186	02186	02260	02260	02590	03043	03639	04538	06106
008	01934	01934	01934	02001	02001	02292	02693	03221	04016	05403
009	02030	02030	02030	02100	02100	02406	02826	03380	04215	05671
010	02508	02508	02508	02593	02593	02971	03491	04175	05206	07003
012	02387	02387	02387	02468	02468	02828	03323	03973	04955	06665
017	01701	01701	01701	01759	01759	02016	02368	02832	03532	04751
024	02169	02169	02169	02243	02243	02570	03019	03611	04502	06057
026	02036	02036	02036	02105	02105	02412	02834	03390	04227	05687
033	02220	02220	02220	02295	02295	02630	03089	03695	04608	06199
037	01638	01638	01638	01693	01693	01941	02280	02726	03400	04574
038	01586	01586	01586	01640	01640	01880	02208	02641	03293	04429
039	02141	02141	02141	02214	02214	02537	02980	03564	04444	05979
040	01449	01449	01449	01498	01498	01716	02017	02412	03008	04046
041	02335	02335	02335	02414	02414	02767	03250	03887	04847	06521
042	02177	02177	02177	02251	02251	02580	03031	03625	04520	06082
043	02172	02172	02172	02246	02246	02575	03024	03617	04510	06068
044	02036	02036	02036	02105	02105	02412	02834	03390	04227	05687

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Veneer

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01422	01422	01422	01516	01516	01718	02262	02490	03326	04289
002	01314	01314	01314	01402	01402	01590	02091	02303	03076	03966
003	02390	02390	02390	02548	02548	02890	03802	04187	05593	07211
004	01729	01729	01729	01843	01843	02090	02750	03028	04045	05216
005	01786	01786	01786	01904	01904	02159	02841	03128	04178	05388
006	01738	01738	01738	01853	01853	02100	02764	03043	04066	05243
007	01821	01821	01821	01941	01941	02201	02896	03189	04260	05493
008	01611	01611	01611	01717	01717	01948	02563	02822	03770	04861
009	01692	01692	01692	01803	01803	02045	02690	02963	03957	05102
010	02089	02089	02089	02226	02226	02525	03323	03659	04887	06301
012	01988	01988	01988	02120	02120	02403	03162	03482	04651	05997
017	01417	01417	01417	01511	01511	01713	02254	02482	03316	04275
024	01807	01807	01807	01926	01926	02184	02873	03164	04227	05450
026	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117
033	01849	01849	01849	01971	01971	02235	02940	03238	04326	05578
037	01364	01364	01364	01454	01454	01649	02170	02389	03192	04116
038	01321	01321	01321	01408	01408	01597	02101	02314	03091	03985
039	01784	01784	01784	01901	01901	02156	02837	03124	04172	05380
040	01207	01207	01207	01286	01286	01459	01919	02114	02823	03640
041	01945	01945	01945	02074	02074	02351	03093	03406	04550	05868
042	01813	01813	01813	01933	01933	02193	02885	03177	04243	05471
043	01810	01810	01810	01930	01930	02188	02878	03170	04235	05460
044	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Brick

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01422	01422	01422	01516	01516	01718	02262	02490	03326	04289
002	01314	01314	01314	01402	01402	01590	02091	02303	03076	03966
003	02390	02390	02390	02548	02548	02890	03802	04187	05593	07211
004	01729	01729	01729	01843	01843	02090	02750	03028	04045	05216
005	01786	01786	01786	01904	01904	02159	02841	03128	04178	05388
006	01738	01738	01738	01853	01853	02100	02764	03043	04066	05243
007	01821	01821	01821	01941	01941	02201	02896	03189	04260	05493
008	01611	01611	01611	01717	01717	01948	02563	02822	03770	04861
009	01692	01692	01692	01803	01803	02045	02690	02963	03957	05102
010	02089	02089	02089	02226	02226	02525	03323	03659	04887	06301
012	01988	01988	01988	02120	02120	02403	03162	03482	04651	05997
017	01417	01417	01417	01511	01511	01713	02254	02482	03316	04275
024	01807	01807	01807	01926	01926	02184	02873	03164	04227	05450
026	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117
033	01849	01849	01849	01971	01971	02235	02940	03238	04326	05578
037	01364	01364	01364	01454	01454	01649	02170	02389	03192	04116
038	01321	01321	01321	01408	01408	01597	02101	02314	03091	03985
039	01784	01784	01784	01901	01901	02156	02837	03124	04172	05380
040	01207	01207	01207	01286	01286	01459	01919	02114	02823	03640
041	01945	01945	01945	02074	02074	02351	03093	03406	04550	05868
042	01813	01813	01813	01933	01933	02193	02885	03177	04243	05471
043	01810	01810	01810	01930	01930	02188	02878	03170	04235	05460
044	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Siding

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01707	01707	01707	01764	01764	02023	02376	02842	03543	04767
002	01578	01578	01578	01632	01632	01870	02196	02628	03276	04408
003	02869	02869	02869	02967	02967	03400	03995	04778	05957	08014
004	02076	02076	02076	02147	02147	02460	02890	03456	04308	05796
005	02144	02144	02144	02217	02217	02540	02984	03569	04451	05988
006	02086	02086	02086	02157	02157	02472	02904	03473	04331	05826
007	02186	02186	02186	02260	02260	02590	03043	03639	04538	06106
008	01934	01934	01934	02001	02001	02292	02693	03221	04016	05403
009	02030	02030	02030	02100	02100	02406	02826	03380	04215	05671
010	02508	02508	02508	02593	02593	02971	03491	04175	05206	07003
012	02387	02387	02387	02468	02468	02828	03323	03973	04955	06665
017	01701	01701	01701	01759	01759	02016	02368	02832	03532	04751
024	02169	02169	02169	02243	02243	02570	03019	03611	04502	06057
026	02036	02036	02036	02105	02105	02412	02834	03390	04227	05687
033	02220	02220	02220	02295	02295	02630	03089	03695	04608	06199
037	01638	01638	01638	01693	01693	01941	02280	02726	03400	04574
038	01586	01586	01586	01640	01640	01880	02208	02641	03293	04429
039	02141	02141	02141	02214	02214	02537	02980	03564	04444	05979
040	01449	01449	01449	01498	01498	01716	02017	02412	03008	04046
041	02335	02335	02335	02414	02414	02767	03250	03887	04847	06521
042	02177	02177	02177	02251	02251	02580	03031	03625	04520	06082
043	02172	02172	02172	02246	02246	02575	03024	03617	04510	06068
044	02036	02036	02036	02105	02105	02412	02834	03390	04227	05687

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Fire Resistive

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01422	01422	01422	01516	01516	01718	02262	02490	03326	04289
002	01314	01314	01314	01402	01402	01590	02091	02303	03076	03966
003	02390	02390	02390	02548	02548	02890	03802	04187	05593	07211
004	01729	01729	01729	01843	01843	02090	02750	03028	04045	05216
005	01786	01786	01786	01904	01904	02159	02841	03128	04178	05388
006	01738	01738	01738	01853	01853	02100	02764	03043	04066	05243
007	01821	01821	01821	01941	01941	02201	02896	03189	04260	05493
008	01611	01611	01611	01717	01717	01948	02563	02822	03770	04861
009	01692	01692	01692	01803	01803	02045	02690	02963	03957	05102
010	02089	02089	02089	02226	02226	02525	03323	03659	04887	06301
012	01988	01988	01988	02120	02120	02403	03162	03482	04651	05997
017	01417	01417	01417	01511	01511	01713	02254	02482	03316	04275
024	01807	01807	01807	01926	01926	02184	02873	03164	04227	05450
026	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117
033	01849	01849	01849	01971	01971	02235	02940	03238	04326	05578
037	01364	01364	01364	01454	01454	01649	02170	02389	03192	04116
038	01321	01321	01321	01408	01408	01597	02101	02314	03091	03985
039	01784	01784	01784	01901	01901	02156	02837	03124	04172	05380
040	01207	01207	01207	01286	01286	01459	01919	02114	02823	03640
041	01945	01945	01945	02074	02074	02351	03093	03406	04550	05868
042	01813	01813	01813	01933	01933	02193	02885	03177	04243	05471
043	01810	01810	01810	01930	01930	02188	02878	03170	04235	05460
044	01696	01696	01696	01808	01808	02051	02698	02971	03969	05117

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

1 - 4 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
002	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
003	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
004	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
005	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
006	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
007	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
008	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
009	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
010	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
012	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
017	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
024	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
026	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
033	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
037	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
038	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
039	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
040	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
041	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
042	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
043	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
044	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

5 - 99 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
002	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
003	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
004	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
005	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
006	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
007	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
008	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
009	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
010	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
012	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
017	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
024	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
026	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
033	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
037	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
038	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
039	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
040	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
041	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
042	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
043	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
044	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
002	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
003	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
004	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
005	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
006	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
007	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
008	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
009	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
010	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
012	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
017	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
024	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
026	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
033	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
037	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
038	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
039	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
040	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
041	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
042	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
043	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
044	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 5 - 99 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
002	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
003	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
004	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
005	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
006	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
007	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
008	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
009	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
010	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
012	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
017	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
024	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
026	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
033	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
037	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
038	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
039	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
040	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
041	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
042	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
043	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
044	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
15,000	0.450	220,000	1.365
20,000	0.469	225,000	1.390
25,000	0.488	230,000	1.414
30,000	0.507	235,000	1.439
35,000	0.525	240,000	1.463
40,000	0.544	245,000	1.485
45,000	0.563	250,000	1.507
50,000	0.582	260,000	1.549
55,000	0.601	270,000	1.591
60,000	0.620	280,000	1.639
65,000	0.639	290,000	1.687
70,000	0.658	300,000	1.721
75,000	0.676	350,000	1.911
80,000	0.695	400,000	2.102
85,000	0.714	450,000	2.294
90,000	0.733	500,000	2.500
95,000	0.751	550,000	2.699
100,000	0.769	600,000	2.897
105,000	0.795	650,000	3.096
110,000	0.821	700,000	3.284
115,000	0.839	750,000	3.482
120,000	0.866	800,000	3.680
125,000	0.893	850,000	3.877
130,000	0.910	900,000	4.075
135,000	0.937	950,000	4.273
140,000	0.955	1,000,000	4.470
145,000	0.982	1,100,000	4.865
150,000	1.000	1,200,000	5.261
155,000	1.028	1,300,000	5.656
160,000	1.054	1,400,000	6.029
165,000	1.081	1,500,000	6.423
170,000	1.107	1,600,000	6.816
175,000	1.134	1,700,000	7.211
180,000	1.161	1,800,000	7.605
185,000	1.187	1,900,000	7.999
190,000	1.213	2,000,000	8.394
195,000	1.239	2,100,000	8.788
200,000	1.265	2,200,000	9.183
205,000	1.290	2,300,000	9.578
210,000	1.315	2,400,000	9.974
215,000	1.340	2,500,000	10.369
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34

MINIMUM DEDUCT \$1000 \$1000 \$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail		-----					
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

**AMERICAN NATIONAL GENERAL INSURANCE COMPANY
MISCELLANEOUS AND ENDORSEMENT COVERAGES INDEX**

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Incidental Farm and Animal Liability Coverage	SH-9072	H-P-20
Increased Coverage for Guns	SH-91044	H-P-11
Increased Coverage for Service Sets	SH-91045	H-P-11
Jewelry, Watches, and Furs - Forms 3, 4, & 6 Broadened	SH-9381	H-P-10
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Loss Assessment Coverage	SH-6035	H-P-14
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Off Premises Structures	SH-9818	H-P-15
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Other Structure Restriction	SH-9833	H-P-15
Personal Injury Coverage	SH-9082	H-P-23
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Special Protection Package - Silver	SH-31263	H-P-17
Stolen Identity Package	SH-91465	H-P-20
Supreme Protection Package - Platinum	SH-91801	H-P-18
Tenants Water Bed Liability	SH-4780	H-P-23
Theft Coverage on Dwelling Under Construction	SH-9781	H-P-9
Three- or Four-Family Dwelling Premises Liability	SH-4074	H-P-23
Vacancy Coverage	SH-9807	H-P-16
Water Backup of Sewers and Drains	SH-9661	H-P-16
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AMERICAN NATIONAL GENERAL INSURANCE COMPANY

I. Miscellaneous Coverages, Credits, and Charges

A. CA\$HBACK FROM ANPAC®

For policies written in American National General Insurance Company and enrolled in CA\$HBACK FROM ANPAC® prior to March 26, 2008, insureds who remain claim free on all automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies for the three-year period after their CA\$HBACK FROM ANPAC® enrollment date, will receive a 25% refund of their combined automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner premiums from the third prior year subject to the eligibility requirements as outlined below. Earthquake, Secure I.D. from ANPAC®, and Equipment Breakdown endorsement premiums will not be included in the homeowner premium.

Enrollment eligibility requirements include:

- 1) Insureds who have at least one automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and one homeowner policy written in American National General Insurance Company or an affiliated company will be enrolled in the CA\$HBACK program. If a new policy is written in American National General Insurance Company on or after March 26, 2008, then the account will no longer qualify for CA\$HBACK FROM ANPAC®.
- 2) All automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies are eligible for enrollment in this program. In addition, at least one vehicle must have both Comprehensive and Collision Coverages.
- 3) All automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner policies under the same account will be required to be enrolled in the plan. An account is made up of individuals living at the same residence, as a family. Dependents of the named insured, temporarily living away from home, can also be included.
- 4) All CA\$HBACK policies must be written in a state where the CA\$HBACK program is available.

The first refund will be made 60 days after the three-year anniversary of the CA\$HBACK enrollment date provided:

- A) there have been no paid claims of any type including not-at-fault claims under any automobile, motor home, camping/travel trailer, motorcycle, recreational vehicle or homeowner policy during this time period other than automobile Towing and Labor Claims, homeowner Earthquake Claims, Secure I.D. from ANPAC® claims; and/or Equipment Breakdown claims; and
- B) the insured maintains continuous coverage (no policy is out of force for more than 45 days) on at least one automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and one homeowner policy; and
- C) the CA\$HBACK policies are in a state where the CA\$HBACK program is available.

Subsequent refunds will be made each year 60 days after the enrollment date anniversary provided all eligibility requirements, as listed above, are met. The refund is 25% of the combined automobile, motor home, camping/travel trailer, motorcycle, or recreational vehicle and homeowner written premiums from the third prior year.

Refund Conditions and Procedures:

- 1) The CA\$HBACK enrollment date will be used to determine when a refund will be made. This may or may not coincide with the renewal dates of any policies under the program.
- 2) The written premium from each CA\$HBACK policy will be used to calculate the refund amount. For policies already in force at the time of enrollment, the written premium of the first renewal after the program enrollment date will be used in the refund amount calculation. Premiums for the Earthquake, Secure I.D. from ANPAC®, and Equipment Breakdown endorsements will not be included in the calculation of the refund amount.
- 3) A paid claim occurring on or after the insured is a member of the CA\$HBACK program, under any policy that is part of a CA\$HBACK account, voids a refund only for the next three-year period. Subsequent refunds will be made after the account is claim free again for three years on all CA\$HBACK policies.

- 4) If a claim is paid, the three-year time period will begin again starting at the first enrollment anniversary date after the first payment has been made. Exception: If a claim occurs prior to the anniversary date, and first payment is made after the anniversary date, but before 60 days after the anniversary date, then the three-year time period begins on the most recent anniversary date.
- 5) The date of the first payment of a claim will be considered the claim date when determining the three-year claim free period for refund eligibility. If a payment is made on a claim in two different years, the insured would again be eligible for a refund at the first enrollment anniversary date three years after the first claim payment was made.
- 6) If a CA\$HBACK refund is not made due to a paid claim, but later the Company successfully subrogates 100% of the claim, then the amount that should have been refunded to the insured will be refunded.
- 7) All incurred claims must be reported immediately or as soon as reasonably possible.
- 8) If membership into the CA\$HBACK program is terminated, reinstatement may be allowed unless the termination is due to a new policy on the account being written in American National General Insurance Company on or after March 26, 2008. If reinstatement is allowed, the insured's CA\$HBACK enrollment anniversary date will change.
- 9) Policy lapses of 45 days or less will not affect eligibility. If a policy lapse of more than 45 days occurs, the insured's CA\$HBACK enrollment anniversary date will change.

B. PROTECTIVE DEVICE CREDITS

A premium credit may be applied for the protective devices listed below. A full description of each protective device must be shown on the application.

The following premium credits apply for each of the following devices which are properly installed and maintained:

- | | |
|---|-----|
| 1. Local burglar alarm covering all windows and exterior doors. | 5% |
| 2. Burglar alarm as in 1, above, reporting to central station or police department. | 10% |
| 3. Fire alarm reporting to central station or fire department. | 10% |

Any combination of the above credits is allowed but maximum total credit cannot exceed 15%.

Applicable to All Policy Forms.

C. CLAIM FREE PLUS

An insured will receive a Claim Free Plus discount on his/her homeowners policy based upon the length of time the insured has been claim free and his/her account Risk Score. The length of time is calculated as the number of years since the date of the last claim and the effective date of the policy or the effective date of reinstatement for a policy with a lapse in coverage. If a claim exists with an established reserve, the insured is considered claim free as long as no payment has been made on the claim. Equipment Breakdown claims will not be considered. The appropriate Claim Free Plus discount shall be applied according to the schedule below:

Risk Score	Number of Years Claim Free		
	0-2	3-5	6+
619 and below	0%	10%	15%
620 – 674	22%	30%	34%
675 – 729	26%	33%	37%
730 – 769	32%	40%	43%
770 – 809	35%	41%	46%
810 – 854	39%	44%	49%
855 – 899	42%	47%	51%
900 – 949	45%	50%	54%
950 and above	48%	53%	56%
No Hit/No Score	35%	41%	46%

Periodically, account Risk Scores will be updated. If such update results in a change in risk score range, the discount level will be adjusted accordingly. Additionally, under certain circumstances when necessary, such as changing the Risk Score model or receiving a calculated Risk Score for a prior No Match or No Score, a change in discount level can result and will be applied.

D. UTILITIES/ROOF RATING PLAN

A premium adjustment will be made on all Homeowner Dwelling forms depending on the age of the home and the calendar year that any of the following components have been newly installed or completely upgraded:

Heating

Complete replacement of the entire heating system, not including the ductwork or floor/ceiling registers.

All systems must be installed by a qualified contractor to meet or exceed local building codes.

Cooling

Complete replacement of the entire cooling system, not including the ductwork or floor/ceiling registers.

All systems must be installed by a qualified contractor to meet or exceed local building codes.

Roof

A. To determine age of roof - Complete replacement or overlay of the entire roof by a qualified contractor and installed to meet or exceed local building codes.

B. Roof Construction Rating Factors

1. A credit (as listed below) applies to roofs constructed of concrete tile, clay tile, slate, or composite wood fiber/cement.
2. A surcharge (as listed below) applies to roofs constructed of wood shake, wood shingle, or a composition overlay to a wood shake roof.
3. Roof coverings meeting the impact resistance of the Underwriters' Laboratories testing criteria of U. L. Standard 2218 are eligible for a credit, as listed below.

The applicable adjustments are added together to determine the total premium adjustments for the rating plan. The different adjustments depend on the number of years since the home was built or since the heating unit, cooling unit, or roof was newly installed. The maximum discount allowed is 78%.

PREMIUM ADJUSTMENTS										
Home Completed Or Utilities/ Roof Updated	Age of Home	Heating	Cooling	Roof	UL1	UL2	UL3	UL4	Concrete/ Clay Tile, Slate, or Composite Wood Fiber/ Cement	Wood Shake or Shingle
Current Year	-26%	-4%	-1%	-35%	0	0	-6%	-9%	-12%	+10%
1 st Preceding	-25%	-4%	-1%	-33%	0	0	-6%	-9%	-12%	+11%
2 nd Preceding	-24%	-3%	-1%	-32%	0	0	-6%	-9%	-12%	+12%
3 rd Preceding	-23%	-3%	-1%	-30%	0	0	-6%	-9%	-12%	+13%
4 th Preceding	-22%	-3%	-1%	-28%	0	0	-6%	-9%	-12%	+14%
5 th Preceding	-20%	-3%	-1%	-26%	0	0	-5%	-8%	-12%	+15%
6 th Preceding	-19%	-2%	-1%	-23%	0	0	-5%	-7%	-11%	+16%
7 th Preceding	-17%	-2%	-1%	-21%	0	0	-5%	-7%	-11%	+17%
8 th Preceding	-15%	-2%	-1%	-18%	0	0	-4%	-6%	-11%	+18%
9 th Preceding	-13%	-1%	-1%	-15%	0	0	-3%	-5%	-11%	+19%
10 th Preceding	-11%	-1%	-1%	-11%	0	0	-3%	-5%	-10%	+20%
11 th Preceding	-10%	-1%	0	-7%	0	0	-2%	-4%	-10%	+21%
12 th Preceding	-9%	-1%	0	-3%	0	0	-2%	-4%	-10%	+22%
13 th Preceding	-8%	-1%	0	0	0	0	-2%	-4%	-9%	+23%
14 th Preceding	-8%	-1%	0	0	0	0	-1%	-3%	-9%	+24%
15 th Preceding	-7%	0	0	0	0	0	-1%	-3%	-9%	+25%
16 th Preceding	-6%	0	0	0	0	0	0	-2%	-8%	+26%
17 th Preceding	-4%	0	0	0	0	0	0	-2%	-8%	+27%
18 th Preceding	-3%	0	0	0	0	0	0	-1%	-8%	+28%
19 th Preceding	-2%	0	0	0	0	0	0	-1%	-7%	+29%
20 th Preceding	0	0	0	0	0	0	0	0	-7%	+30%
21 st Preceding	0	0	0	0	0	0	0	0	-7%	+32%
22 nd Preceding	0	0	0	0	0	0	0	0	-6%	+34%
23 rd Preceding	0	0	0	0	0	0	0	0	-6%	+36%
24 th Preceding	0	0	0	0	0	0	0	0	-6%	+38%
25 th Preceding	0	0	0	0	0	0	0	0	-5%	+40%
26 th Preceding	0	0	0	0	0	0	0	0	-5%	+42%
27 th Preceding	0	0	0	0	0	0	0	0	-5%	+44%
28 th Preceding	0	0	0	0	0	0	0	0	-4%	+46%
29 th Preceding	0	0	0	0	0	0	0	0	-4%	+48%
30 th Preceding	0	0	0	0	0	0	0	0	-4%	+50%
31 st Preceding	0	0	0	0	0	0	0	0	-3%	+52%
32 nd Preceding	0	0	0	0	0	0	0	0	-3%	+54%
33 rd Preceding	0	0	0	0	0	0	0	0	-3%	+56%
34 th Preceding	0	0	0	0	0	0	0	0	-2%	+58%
35 th Preceding	0	0	0	0	0	0	0	0	-2%	+60%
36 th Preceding	0	0	0	0	0	0	0	0	-2%	+62%
37 th Preceding	0	0	0	0	0	0	0	0	-1%	+64%
38 th Preceding	0	0	0	0	0	0	0	0	-1%	+66%
39 th Preceding	0	0	0	0	0	0	0	0	-1%	+68%
40 th and all additional Preceding	0	0	0	0	0	0	0	0	0	+70%

If the year the dwelling was occupied is different from the year it was completed, the later year shall apply.

Applicable to Policy Form 3 Only

E. NON-WEATHER RELATED CLAIMS RATING PLAN

The appropriate surcharge shall be applied according to the schedule below:

Number of Qualified Paid Claims in the last 3 years			
0 or 1	2	3	4+
0%	20%	45%	75%

The number of paid claims will be determined by the number of qualified paid claims the policyholder has had in the last 3 years. The length of time is calculated as the 36 months prior to the effective date of the policy or the effective date of reinstatement for a policy with a lapse in coverage. A qualified claim is any non-catastrophe or non-weather related claim which results in a net paid loss during the 3 year period. Losses which have payments under Medical Coverage only, and Equipment Breakdown claims are not considered to be qualified claims.

F. TLC TRI-LINE COVERAGESM DISCOUNT

A TLC Discount will be applied when the appropriate homeowner/Special Farm Package[®], automobile, and life insurance or annuity conditions, as outlined below, have been met by the account. The amount of the discount varies based on the rating class of all required life insurance/annuity policies, as outlined below. In order for the most preferred discount to be applied, all required life insurance policies must have been issued in the most preferred rating class. Refer to the chart below for TLC Discount factors.

Life Product Rated in the Preferred-Plus Non-Nicotine Plan	15%
Other Rated Life Product	10%

- The named insured or a member of the named insured's immediate family who resides in the same household, must have an active automobile or motorcycle policy written in American National General Insurance Company or an affiliated company.
- Camping/travel trailers, utility trailers, recreational vehicles, and Named Non-Owner auto policies may not be used to qualify a homeowner policy for the TLC Discount.
- The automobile or motorcycle policy must be in force anytime during the 15 days prior to the effective date of the homeowner/Special Farm Package[®] policy; or the qualifying new business automobile or motorcycle policy effective date may not be greater than 90 days after the homeowner/Special Farm Package[®] policy's effective date.
- There must be an active permanent life insurance policy or an annuity policy on the account owner and/or spouse with American National Insurance Company, American National Life Insurance Company of Texas, or Farm Family Life Insurance Company subject to the conditions described herein. Whole Life, Whole Life with term rider, Universal Life, and Variable Universal Life policies are eligible permanent life insurance policies.

One of the following permanent life insurance/annuity conditions must be met in order to qualify for the discount:

1. The amount of such permanent life policy or the sum of the amounts of all such permanent life policies on the account owner and/or spouse must be:
 - Equal to or greater than the Coverage A amount for the Homeowner Dwelling form.
 - Equal to or greater than the Coverage C amount for the Condominium form.
 - Equal to or greater than the maximum of the Coverage C amount or \$100,000 for the Tenant form.
 - Equal to or greater than the Coverage A amount under Division I of the Special Farm Package[®] policy.

This relationship between the amount of permanent life insurance on the account owner and/or spouse and the Coverage A or C amounts must only be met at the inception date of the discount on the account as long as the homeowner/Special Farm Package[®] and life policies remain in force.

If more than one homeowner/Special Farm Package[®] policy exists on the account, the highest Coverage A or C amount at the time of qualification will apply.

If the account changes from a Tenant policy to a Homeowner Dwelling form or Condominium form, the relationship between the amount of life insurance on the account owner and/or spouse and the Coverage A or C amounts must requalify in order for the discount to apply. However, if an account qualifies for the TLC Discount and then subsequently moves their homeowner policy to a Tenant policy, the Tenant policy will count as a qualifying homeowner policy, regardless of the relationship between the Coverage C amount and the life insurance/annuity amount.

2. The amount of such permanent life policy, or the sum of the amounts of all such permanent life policies on the account owner and/or spouse is equal to or greater than \$500,000.
3. The annualized premium for any individual permanent life insurance policy, or the sum of the annualized premium amounts of all such permanent life policies on the account owner and/or spouse, is greater than or equal to \$1,200.

4. If the annuity method is selected, the annuity policies on the account owner and/or spouse must have a cash value equal to or greater than \$100,000 at the inception date of the discount.

The TLC Discount may be applied to or deleted from a homeowner policy at the evaluation date. Policies will be evaluated when a new business, corrected new business, renewal, corrected renewal or reinstatement with a lapse transaction is processed. All new business policies will be reviewed 90 days after issue to see if all discount requirements have been met. If not, the discount will be removed from the policy retroactively. All renewal business policies will be reviewed during the 90 days following the renewal effective date to see if all discount requirements have been met. If so, the discount will be applied retroactively to the renewal effective date.

Applicable to All Policy Forms.

G. AUTO-HOME DISCOUNT

For each Homeowner Dwelling form and Condominium Form written in American National General Insurance Company on the account, a 10% discount applies when the appropriate homeowner and automobile policy conditions, as outlined below, have been met by the account.

- A qualifying automobile policy must be written in American National General Insurance Company.
- Camping/travel trailers, utility trailers, motor homes, motorcycles, recreational vehicles, and Named Non-Owner auto policies do not qualify a homeowner policy for the Auto-Home Discount.
- Tenant policies do not qualify for the Auto-Home Discount.
- The automobile policy must be in force anytime during the 15 days prior to the effective date of the homeowner policy; or the qualifying new business automobile policy effective date may not be greater than 90 days after the homeowner policy's effective date.

The Auto-Home Discount may be applied to or deleted from a homeowner policy at the evaluation date. Policies will be evaluated when a new business, corrected new business, renewal, corrected renewal or reinstatement with a lapse transaction is processed. All new business policies will be reviewed 90 days after issue to see if all discount requirements have been met. If not, the discount will be removed from the policy retroactively. All renewal business policies will be reviewed during the 90 days following the renewal effective date to see if all discount requirements have been met. If so, the discount will be applied retroactively to the renewal effective date.

Applicable to Policy Form 3 and Form 6.

H. OPTIONAL LIABILITY LIMITS

The premium pages include Coverages E and F coverage limits of \$100,000/\$1,000 for Forms 4 and 6, and \$300,000/\$2,000 for Form 3. If other limits are desired, the premium is adjusted according to the table below. In all cases, the limits for Coverages E and F must be the same for all exposures covered under the policy. Coverage F limits are "each person" limits.

Coverage E - Personal Liability Limits	Premium Adjustment		
	Form 3 Described Residence	Forms 4 & 6 Described Residence	Forms 3, 4, & 6 Add'l. Residence Premises Occupied by Insured 1 or 2 Fam. Dwelling
\$ 25,000	\$-12	\$-2	\$+1
50,000	-11	-1	+2
100,000	-10	Base	+3
200,000	-5	+5	+4
300,000	Base	+10	+5
500,000	+7	+17	+7
1,000,000	+25	+34	+12

Coverage F - Medical Payments Limits	Form 3 Described Residence	Premium Adjustment	
		Forms 4 & 6 Described Residence	Forms 3, 4, & 6 Add'l. Residence Premises Occupied by Insured 1 or 2 Fam. Dwelling
\$1,000	\$-3	Base	\$+2
2,000	Base	\$+3	+3
5,000	+6	+9	+6

Applicable to All Policy Forms.

I. PERSONAL PROPERTY

1. Increased Limits

When the limit of liability for Coverage C is increased, the additional premium shall be \$0.44 per \$1,000 of insurance.

2. Reduction in Limit

The limit of liability for Coverage C may be reduced to an amount not less than 40% of the limit for Coverage A at a credit of \$0.64 per \$1,000 of insurance. Reduction in the limit of liability for Coverage C is not permitted when Endorsements SH-9042 - Office, Professional, Private School, or Studio Use, SH-31410 – Special Protection Package (Silver), SH-31796 – Enhanced Protection Package (Gold), or the SH-91801 – Supreme Protection Package (Platinum) are requested.

Applicable to Form 3 Only.

J. OTHER STRUCTURES - Increased Limits

The basic policy provides a 10% of Coverage A extension applicable to Coverage B, Other Structures, located on the residence premises. The structure must be identified and the specific amount of additional coverage must be shown.

When the limit of liability for Coverage B is increased, the additional premium shall be \$2.06 per \$1,000 of insurance.

Applicable to Form 3 Only.

K. BUILDING ADDITIONS AND ALTERATIONS

When the basic limit of \$1,000 is increased, the applicable premium is \$4.36 for each additional \$1,000 of Coverage A.

Applicable to Form 6 Only.

L. LOG HOME SURCHARGE

For homes constructed of full logs, a 75% surcharge applies. The surcharge does not apply to homes with log siding.

Applicable to Form 3 Only.

II. Optional Endorsement Coverages and Credits for Forms 3, 4, and 6

A. Section I - Property Damage Coverages and Credits

1. **SH-9291 - CONTENTS REPLACEMENT COST COVERAGE**

Coverage for personal property may be extended to include the full cost of repair or replacement without deduction for depreciation, subject to the terms of the contents replacement cost endorsement.

When this coverage is provided on a Form 3 policy without Modified Replacement Cost Coverage, Coverage A must be 100% of the dwelling replacement cost. The additional annual premium for this coverage is determined as follows:

Form 3 - Multiply the total adjusted base premium by 10% (round to the nearest dollar):

Form 4 - Multiply the total adjusted base premium by 30% (round to nearest dollar):

<u>Policy</u>	<u>Minimum Additional Premium</u>
Form 3	\$22
Form 4	\$24

Applicable to Policy Form 3 and Form 4 Only.
 Coverage required with the Special Protection Package (Silver),
 and the Enhanced Protection Package (Gold).
 Coverage automatically provided with the Supreme Protection Package (Platinum).

2. SH-31161 - MODIFIED REPLACEMENT COST

When a home's market value is 80% or less of its replacement cost, then Modified Replacement Cost will apply. This endorsement revises the Loss Settlement provision for Coverage A allowing us to repair and replace damage to a dwelling with commonly used construction materials and methods. The additional premium is determined by multiplying the total adjusted base premium by the following:

Replacement Cost Policy Amount Factor	X	Replacement Cost Deductible Amount Factor	÷	X	MRC Credit Factor	-	1
÷		÷					
Desired Coverage Policy Amount Factor		Desired Coverage Deductible Amount Factor					

MRC Credit Factors for Coverage A Amounts Above \$150,000	
>70% but ≤ 80%	0.89
>60% but ≤ 70%	0.87
>50% but ≤ 60%	0.85
>40% but ≤ 50%	0.82
>30% but ≤ 40%	0.79
>20% but ≤ 30%	0.75
≤ 20%	0.70

MRC Credit Factors for Coverage A Amounts At or Below \$150,000	
>70% but ≤ 80%	0.96
>60% but ≤ 70%	0.93
>50% but ≤ 60%	0.90
>40% but ≤ 50%	0.87
>30% but ≤ 40%	0.85
>20% but ≤ 30%	0.82
≤ 20%	0.79

Applicable to Policy Form 3 Only.

3. SH-9292 - DWELLING UNDER CONSTRUCTION

A homeowner policy may be issued to cover a dwelling under construction if the construction will be completed and the dwelling occupied within one year from the date construction begins. The effective date of the policy must be the date construction is actually started. If a home has a basement, however, the effective date must be the date construction begins above the level of the lowest basement floor. The amount of coverage provided is provisional.

Upon occupancy or completion, whichever is sooner, the home office must be notified and the policy will be amended to reflect any adjustments. (Refer to further requirements under eligibility section of manual.)

To determine the dwelling under construction credit, multiply the adjusted base premium by 66%.

The utilities/roof rating plan and protective device credit do not apply to a policy that receives the dwelling under construction credit. (Refer to further requirements under eligibility section of manual.)

The following endorsements are not available to homes receiving the Dwelling Under Construction Credit: the Special Protection Package (Silver), the Enhanced Protection Package (Gold), and the Supreme Protection Package (Platinum).

Applicable to Policy Form 3 Only.
Not Applicable for Manufactured Homes.

4. SH-9781 - THEFT COVERAGE ON DWELLING UNDER CONSTRUCTION

For an additional premium, theft coverage in or to a newly constructed dwelling prior to occupancy is available if the dwelling is fully enclosed and capable of being locked.

Upon occupancy or completion, whichever is sooner, the home office must be notified and the policy will be amended to reflect any adjustments.

The Dwelling Under Construction Endorsement, SH-9292, must be present in order to add endorsement.

The premium will not be refunded if this endorsement is cancelled.

<u>Policy Deductible</u>	<u>Premium</u>
\$500/1% Wind/Hail	\$12
\$1,000 or \$1,000/0.5% or \$1,000/1% Wind/Hail	11
0.5% of Coverage A	10
1% of Coverage A	9
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	8
\$3,000	7
2% of Coverage A	6
\$5,000	4

Applicable to Policy Form 3 Only.

5. SH-9766 - SCHEDULED PERSONAL PROPERTY COVERAGE

This endorsement provides specific coverage for certain eligible classes of personal property. Refer to underwriting section for description of eligible classes. Each item must be listed separately and a premium charged accordingly. The amount of coverage shown for each item will be the maximum limit of coverage provided by the Company. Each item must be scheduled for 100% of its current value.

The additional premium for this coverage is:

LIMIT CODE	ELIGIBLE CLASSES	ANNUAL RATES PER \$100 OF INSURANCE DEDUCTIBLE	
		ACV	10%
01	Jewelry	\$1.00	\$0.95
02	Furs	0.50	0.48
03	Cameras and Equipment (Noncommercial)	1.43	1.36
04	Musical Instruments* (Nonprofessional Only)	0.60	0.57
05	Silverware	0.29	0.28
06	Sporting Equipment	1.65	1.57
07	Fine Arts	0.37	0.35
08	Stamps	0.70	0.67
09	Coins	1.60	1.52
10	Tools	1.71	1.62
11	Collectibles	0.86	0.82
12	Guns	1.65	1.57
13	Pets		
	First \$200	8.55	8.12
	Each Additional \$100	4.28	4.07

* A professional is a person who receives any remuneration during the term of the policy for playing a musical instrument.

Applicable to All Policy Forms.

6. **SH-9381 - BROADENED JEWELRY, WATCHES, AND FURS COVERAGE**

This endorsement may be attached providing coverage for such items when the loss is caused by direct, physical loss or damage other than any named peril listed in the policy, with an individual limit per item of \$1,000 and a total limit of \$2,500 per occurrence.

The Special Limits of Liability under Coverage C – Personal Property, for loss by theft are as follows:

- a. The greater of \$2,500 or ½ of 1% of Coverage A for all Property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-3.
- b. The greater of \$2,500 or 1% of Coverage C for all property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-4.
- c. The greater of \$2,500 or 2% of Coverage C for all property subject to a maximum limit of \$1,000 for any one item. This applies to Policy Form SH-6.

The limit of liability shown in the Declarations for Coverage C is increased \$2,500 for covered perils other than the named perils listed in the policy.

The additional premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$8
\$1,000 or \$1,000/0.5% or \$1,000/1% Wind/Hail	7
0.5% of Coverage A	6
1% of Coverage A	5
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	4
\$3,000	3
2% of Coverage A	2
\$5,000	1

Applicable to All Policy Forms for their respective deductible options.
Not applicable with the Supreme Protection Package (Platinum)

7. **SH-91281 - BROADENED JEWELRY, WATCHES, AND FURS COVERAGE – INCREASED LIMIT**

This endorsement may be attached providing coverage for such items when the loss is caused by direct physical loss, or by damage other than any named peril listed in the policy, with an individual limit per item of \$2,500 and a total limit of \$5,000 per occurrence.

The Special Limits of Liability under Coverage C – Personal Property for losses by theft are as follows:

- a. The greater of \$5,000 or ½ of 1% of Coverage A for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-3.
- b. The greater of \$5,000 or 1% of Coverage C for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-4.
- c. The greater of \$5,000 or 2% of Coverage C for all property subject to a maximum limit of \$2,500 for any one item. This applies to Policy Form SH-6.

The limit of liability shown in the Declarations for Coverage C is increased by \$5,000 for covered perils other than the named perils listed in the policy.

The additional premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$28
\$1,000 or \$1,000/0.5% or \$1,000/1% Wind/Hail	24
0.5% of Coverage A	23
1% of Coverage A	22
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	20
\$3,000	18
2% of Coverage A	17
\$5,000	10

Applicable to All Policy Forms for their respective deductible options.
Not applicable with the Supreme Protection Package (Platinum)

8. SH-91044 - INCREASED COVERAGE FOR GUNS

The basic Form 3 policy form provides theft coverage for guns and related equipment, with a total limit of the greater of \$3,000 or 1% of Coverage A per occurrence.

The basic Form 4 policy forms provides theft coverage for guns and related equipment, with a total limit of the greater of \$2,500 or 2% of Coverage C per occurrence.

The basic Form 6 policy provides theft coverage for guns and related equipment, with a total limit of the greater of \$3,000 or 2% of Coverage C per occurrence.

This endorsement may be attached to these policies to increase the limit to the greater of \$5,000 or 1% of Coverage A (Form 3) OR the greater of \$5,000 or 2% of Coverage C (Forms 4 and 6) per occurrence, for loss by theft.

The annual premium for this increased limit is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$8
\$1,000 or \$1,000/0.5% or \$1,000/1% Wind/Hail	7
0.5% of Coverage A	6
1% of Coverage A	5
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	4
\$3,000	3
2% of Coverage A	2
\$5,000	1

Applicable to All Policy Forms for their respective deductible options.
Coverage automatically provided in Form 3 with the Supreme Protection Package (Platinum).

9. SH-91045 - INCREASED COVERAGE FOR SERVICE SETS

The basic Form 3 policy form provides theft coverage for silverware, goldware, and other service sets with a total limit of the greater of \$2,500 or 1% of Coverage A per occurrence.

The basic Form 4 and Form 6 policy forms provide theft coverage for silverware, goldware, and other service sets with a total limit of the greater of \$2,500 or 2% of Coverage C per occurrence.

This endorsement may be attached to these policies to increase the limit to the greater of \$5,000 or 1% of Coverage A (Form 3) OR the greater of \$5,000 or 2% of Coverage C (Forms 4 and 6) per occurrence, for loss by theft.

The annual premium for this increased limit is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$10
\$1,000 or \$1,000/0.5% or \$1,000/1% Wind/Hail	9
0.5% of Coverage A	8
1% of Coverage A	7
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	6
\$3,000	5
2% of Coverage A	4
\$5,000	3

Applicable to All Policy Forms for their respective deductible options.

Coverage automatically provided in Form 3 with the Supreme Protection Package (Platinum).

10. **SH-91794 – INCREASED LIMITS FOR HOME COMPUTER HARDWARE AND SOFTWARE**

This endorsement provides increased coverage for computer hardware and software whether used for personal or business reasons. For Form 3, the basic policy limits for computer hardware and software may be increased up to \$20,000, OR 1% of Coverage A, whichever is greater. For Forms 4 and 6, the basic policy limits for computer hardware and software may be increased up to \$20,000, OR 2% of Coverage C, whichever is greater.

The premium for increased limits for computer hardware and software is \$4 per thousand.

Applicable to All Policy Forms.

11. **SH-9050 - INCREASED LIMITS FOR PERSONAL PROPERTY AT OTHER RESIDENCES**

The basic policy provides a 10% extension of Coverage C for personal property normally located at additional residences away from the residence premises. This endorsement may be attached to provide increased coverage for personal property usually located at any insured's residence other than the residence premises.

The premium for these increased limits is \$5 per thousand.

Applicable to All Policy Forms.

12. **SH-9878 - EARTHQUAKE COVERAGE (10% Deductible)**

NOTE: This endorsement is available only for renewals that currently have this endorsement.

This endorsement amends the policy to include coverage for direct physical loss to property described in Coverages A, B, and C caused by earthquake. When earthquake coverage is provided, it does not increase the limits of liability stated in the policy and does not include the costs of filling land.

The deductible for loss covered under this earthquake endorsement is the amount determined by applying the deductible percentage of **10%** separately to each of the following:

- (a) the limit as shown on the Declarations for Coverage A - Dwelling;
- (b) the limit as shown on the Declarations for Coverage B - Other Structures;
- (c) the limit as shown on the Declarations for Coverage C - Personal Property plus the limit of coverage provided under any Scheduled Personal Property Endorsements.

In addition, the minimum deductible amount for any one covered loss under Coverages A, B, or C shall be \$500 for each coverage that applies to the loss.

NOTE: SPECIAL BINDING AUTHORITY RESTRICTIONS FOR THIS ENDORSEMENT (new or renewal business)

For a period of 30 days, coverage may not be bound on any house within 100 miles of the epicenter of an earthquake measuring 5.0 or greater on the Richter Scale.

Additionally, coverage is not provided until 10 days after the endorsement effective date. This restriction does not apply to new business if the insured maintained earthquake coverage up to the policy effective date.

The exclusion applying to exterior masonry veneer may be deleted for the additional premium shown below under the All Others category.

The premium for this coverage is:

ZONE	PREMIUM PER \$1,000 FRAME								APPLIED TO
	1	2	3	4	5	6	7	8	
FORM 3	\$3.58	\$1.69	\$1.69	\$.90	\$.90	\$.53	\$.47	\$.31	Coverage A Limit of Liability
FORMS 4 and 6	.68	.34	.26	.22	.19	.16	.14	.12	Coverage C Limit of Liability
FORM 3 Coverage C Increased Limits	.34	.17	.13	.11	.10	.08	.07	.06	Amount of Increase Only
ALL FORMS Appurtenant Structures	3.58	1.69	1.69	.90	.90	.53	.47	.31	Amount Increased or Added

ZONE	PREMIUM PER \$1,000 ALL OTHERS								APPLIED TO
	1	2	3	4	5	6	7	8	
FORM 3	\$5.34	\$2.52	\$2.52	\$1.35	\$1.35	\$.79	\$.70	\$.47	Coverage A Limit of Liability
FORMS 4 and 6	.68	.34	.26	.22	.19	.16	.14	.12	Coverage C Limit of Liability
FORM 3 Coverage C Increased Limits	.34	.17	.13	.11	.10	.08	.07	.06	Amount of Increase Only
ALL FORMS Appurtenant Structures	5.34	2.52	2.52	1.35	1.35	.79	.70	.47	Amount Increased or Added

Zone Definitions

Countries of:	1.	Mississippi	Poinsett
	2.	Craighead	Crittenden Cross
	3.	Clay Greene	Jackson St. Francis
	4.	Independence Lawrence Lee	Monroe Prairie Randolph White Woodruff
	5.	Arkansas	Lonoke Phillips
	6.	Chicot Cleveland Dallas Desha	Drew Grant Jefferson Lincoln Pulaski Saline Sharp
	7.	Ashley Bradley Calhoun	Cleburne Conway Faulkner Izard Perry
	8.	Remainder of State	

Applicable to All Policy Forms.

13. SH-91260 - EARTHQUAKE COVERAGE (15% Deductible)

NOTE: This endorsement is available only for renewals that currently have this endorsement.

This endorsement amends the policy to include coverage for direct physical loss to property described in Coverages A, B, and C caused by earthquake. When earthquake coverage is provided, it does not increase the limits of liability stated in the policy and does not include the costs of filling land.

The deductible for loss covered under this earthquake endorsement is the amount determined by applying the deductible percentage of **15%** separately to each of the following:

- (a) the limit as shown on the Declarations for Coverage A - Dwelling;
- (b) the limit as shown on the Declarations for Coverage B - Other Structures;
- (c) the limit as shown on the Declarations for Coverage C - Personal Property plus the limit of coverage provided under any Scheduled Personal Property Endorsements.

In addition, the minimum deductible amount for any one covered loss under Coverages A, B, or C shall be \$750 for each coverage that applies to the loss.

NOTE: SPECIAL BINDING AUTHORITY RESTRICTIONS FOR THIS ENDORSEMENT (new or renewal business)

For a period of 30 days, coverage may not be bound on any house within 100 miles of the epicenter of an earthquake measuring 5.0 or greater on the Richter Scale.

The exclusion applying to exterior masonry veneer may be deleted for the additional premium shown below under the All Others category.

The premium for this coverage is:

ZONE	PREMIUM PER \$1,000 FRAME								APPLIED TO
	1	2	3	4	5	6	7	8	
FORM 3	\$2.51	\$1.18	\$1.18	\$.63	\$.63	\$.37	\$.33	\$.22	Coverage A Limit of Liability
FORMS 4 and 6	.48	.24	.18	.15	.13	.11	.10	.08	Coverage C Limit of Liability
FORM 3 Coverage C Increased Limits	.24	.12	.09	.08	.07	.06	.05	.04	Amount of Increase Only
ALL FORMS Appurtenant Structures	2.51	1.18	1.18	.63	.63	.37	.33	.22	Amount Increased or Added

ZONE	PREMIUM PER \$1,000 ALL OTHERS								APPLIED TO
	1	2	3	4	5	6	7	8	
FORM 3	\$3.74	\$1.76	\$1.76	\$.95	\$.95	\$.55	\$.49	\$.33	Coverage A Limit of Liability
FORMS 4 and 6	.48	.24	.18	.15	.13	.11	.10	.08	Coverage C Limit of Liability
FORM 3 Coverage C Increased Limits	.24	.12	.09	.08	.07	.06	.05	.04	Amount of Increase Only
ALL FORMS Appurtenant Structures	3.74	1.76	1.76	.95	.95	.55	.49	.33	Amount Increased or Added

*See Endorsement SH-9878 for zone descriptions.
Applicable to All Policy Forms.

14. SH-6035 - LOSS ASSESSMENT COVERAGE

When the policy is extended to cover loss assessment for which the insured may be liable, excluding Earthquake, the premiums listed shall apply:

<u>Limit of Liability</u>	<u>Premium Per \$1,000 Coverage</u>
First \$5,000	\$0.49
Next \$20,000	0.25
Above \$25,000	0.10

Applicable to Policy Form 6 Only.

15. **SH-9401 - BUSINESS MERCHANDISE COVERAGE**

The policy excludes from Section I Coverage any loss to merchandise held as samples or for sale after delivery. This endorsement may be attached to provide \$5,000 coverage for this exposure.

The premium for this coverage is:

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$13
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	12
0.5% of Coverage A	11
1% of Coverage A	10
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	9
\$3,000	8
2% of Coverage A	7
\$5,000	5

Applicable to All Policy Forms for their respective deductible options.

16. **SH-9833 - OTHER STRUCTURE RESTRICTION**

This endorsement allows homes to be insured that have other structures on the residence premises which are in poor condition. These structures are specifically identified on the endorsement and coverage is excluded.

A photograph of each excluded other structure is required.

No additional premium or discount is applicable to this endorsement.

Applicable to Policy Form 3 Only.

17. **SH-9818 - OFF PREMISES STRUCTURES**

With this endorsement, Coverage B - Other Structures may be extended to include structures which are located off premises. Coverage will be provided on an actual cash value basis for accidental direct physical loss. Coverage will not apply to: 1) Off premises dwellings, whether or not owner-occupied; 2) Buildings used in whole or in part for business purposes; or 3) Buildings which are rented or held for rental unless used solely as a private garage.

This endorsement does not increase the amount of coverage applying to Coverage B. The additional coverage provided by this endorsement applies only to the Off Premises Structure insured.

The additional premium shall be \$2.70 per \$1,000 of insurance.

Applicable to Policy Form 3 Only.

18. **SH-91227 - BROADENED WATER BACKUP OF SEWERS AND DRAINS**

The policy excludes from Section I Coverage any loss that is caused by water which backs up through sewers or drains. This endorsement may be attached to provide coverage for direct physical loss caused by water which backs up through sewers or drains, sump pumps, sump pump wells, or any device for the removal of ground water.

There is no coverage provided if the loss is caused by the insured's negligence.

The policy deductible or \$1,000, whichever is greater, will be deducted for each backup of sewer or drain loss covered by this endorsement.

The premium for this endorsement is listed below by amount of coverage provided per year.

<u>Amount of Coverage</u>	<u>Premium</u>
\$ 5,000	\$ 122
10,000	162

Applicable to Policy Form 3 and Form 6 Only.
Not Available with the Supreme Protection Package (Platinum).

19. **SH-9661 - WATER BACKUP OF SEWERS AND DRAINS**

The policy excludes from Section I Coverage any loss that is caused by water which backs up through sewers or drains. This endorsement may be attached to provide up to \$2,500 of coverage per year for direct physical loss caused by water which backs up through sewers or drains, sump pumps, sump pump wells, or any device for the removal of ground water.

There is no coverage provided if the loss is caused by the insured's negligence, or for the replacement value, actual cash value, or actual replacement of basement flooring materials.

The policy deductible or \$1,000, whichever is greater, will be deducted for each backup of sewer or drain loss covered by this endorsement.

The premium for this coverage is \$81.

Applicable to Policy Form 3 and Form 6 Only.
Not Available with the Supreme Protection Package (Platinum).

20. **SH-9304 - FIRE DEPARTMENT SERVICE CHARGE**

The limit of \$500 provided under the Homeowner policy may be increased at an additional rate of \$2 per \$500 of coverage.

Applicable to All Policy Forms.

21. **SH-9053 - CREDIT CARD, FUND TRANSFER CARD, FORGERY, AND COUNTERFEIT MONEY COVERAGE**

This endorsement provides increased limits for these types of property.

The premiums for this additional coverage are as follows:

<u>Additional Coverage Amount</u>	<u>Premium</u>
\$ 1,000	\$ 2
2,000	4
3,000	6
4,000	8
5,000	10

Applicable to All Policy Forms.

22. **SH-9807 - VACANCY COVERAGE**

Forms 3 and 6 restrict coverage for vandalism and glass breakage if the dwelling has been vacant for more than 30 consecutive days. For an additional premium, this limitation may be deleted.

<u>Policy Deductible</u>	<u>Premium</u>
\$500 or \$500/1% Wind/Hail	\$44
\$1,000 or \$1,000/0.5% Wind/Hail or \$1,000/1% Wind/Hail	37
0.5% of Coverage A	36
1% of Coverage A	35
\$2,000 or \$2,000/0.5% Wind/Hail or \$2,000/1% Wind/Hail	32
\$3,000	29
2% of Coverage A	27
\$5,000	16

Applicable to Policy Form 3 and Form 6 Only for their respective deductible options.

23. **SH-6033 - CONDOMINIUM UNIT-OWNERS RENTAL TO OTHERS**

When the policy is extended to include coverage for unscheduled personal property when the premises is rented to others, the additional premium shall be the otherwise applicable basic Form 6 premium increased 35%.

Applicable to Policy Form 6 Only.

24. **SH-31263 - SPECIAL PROTECTION PACKAGE – “Silver”**

Coverage may be written to provide a maximum loss payment of 125% of the Coverage A amount for the dwelling. This coverage and Ordinance or Law Coverage shall not increase the total amount the Company pays under Coverage A - Dwelling for the cost of repair or replacement beyond 125% of the limit as shown on the Declarations for Coverage A.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost, and
2. Purchase Replacement Cost Coverage on contents.
3. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this Special Package increases the limit of Coverage C - Personal Property to 75% of Coverage A - Dwelling, and increases the limit of Coverage D - Loss of Use to 25% of Coverage A.

Annual Premium - \$10

Applicable to Policy Form 3 Only.

Not Applicable With Modified Replacement Cost Coverage,
Enhanced Protection Package (Gold),
or Supreme Protection Package (Platinum).

Not Applicable for Manufactured Homes.

25. **SH-31796 - ENHANCED PROTECTION PACKAGE – “Gold”**

Coverage may be written to provide loss payment of the Coverage A amount for the amount to repair or replace the dwelling up to 125% of the Coverage A amount shown on the policy Declarations. This endorsement also provides the following coverage enhancements:

1. Ordinance or Law Coverage: Up to 25% of the Coverage A limit.
2. Dwelling Lock Replacement Coverage: Up to \$500.
3. Land Coverage: Up to \$10,000 for costs to replace, rebuild, stabilize or otherwise restore the land necessary to support that part of the dwelling sustaining a covered loss.
4. Additional Living Expense and Fair Rental Value: Time period extended to 36 months.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost, and
2. Purchase Replacement Cost Coverage on contents.
3. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling, which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this Enhanced Protection Package increases the limit of Coverage C – Personal Property to 75% of Coverage A – Dwelling, and increases the limit of Coverage D – Loss of Use to 25% of Coverage A.

The additional premium is determined by applying the following schedule:

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	1% X Adjusted Base Premium + \$34
First Preceding Year	3% X Adjusted Base Premium + \$34
Second Preceding Year	4% X Adjusted Base Premium + \$34
Third Preceding Year	6% X Adjusted Base Premium + \$34
Fourth Preceding Year	7% X Adjusted Base Premium + \$34
Fifth and All Additional Preceding Years	9% X Adjusted Base Premium + \$34

Zone 2

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	1% X Adjusted Base Premium + \$34
First Preceding Year	4% X Adjusted Base Premium + \$34
Second Preceding Year	7% X Adjusted Base Premium + \$34
Third Preceding Year	10% X Adjusted Base Premium + \$34
Fourth Preceding Year	13% X Adjusted Base Premium + \$34
Fifth and All Additional Preceding Years	16% X Adjusted Base Premium + \$34

*See Endorsement SH-91407 for Zone definitions.

Applicable to Policy Form 3 Only.

Not Applicable with Modified Replacement Cost Coverage,
Special Protection Package (Silver),
or Supreme Protection Package (Platinum).

Not Applicable for Manufactured Homes.

26. **SH-91801- SUPREME PROTECTION PACKAGE – “Platinum”**

Coverage may be written to provide loss payment of the Coverage A amount for the amount to repair or replace the dwelling up to 200% of the Coverage A amount shown on the policy Declarations. This endorsement extends coverage for personal property to include all risk coverage, subject to the terms of the Supreme Protection Package. This endorsement also provides the following coverage enhancements:

1. Ordinance or Law Coverage: Up to 100% of the Coverage A limit.
2. Debris Removal: Increased from \$500 to \$1,000.
3. Trees, Shrubs, and Other Plants: Increased from \$500 to \$1,000.
4. Fire Department Service Charge: Increased from \$500 to \$1,000.
5. Refrigerated Products Coverage: Up to 100% of the Coverage C limit.
6. Dwelling Lock Replacement Coverage: Up to \$500.
7. Limited Fungus Remediation Coverage: Up to \$15,000.
8. Water Backup Coverage: Up to \$20,000.
9. Land Coverage: Up to 10% of the amount of the covered loss to the dwelling or other structure for the excavation, replacement, or stabilization of the land on the residence premises.
10. Additional Living Expense and Fair Rental Value: Time period extended to 36 months.

One- to two-family dwellings are eligible.

To qualify for this coverage, the insured must agree to:

1. Insure the dwelling for 100% Replacement Cost;
2. Purchase Stolen Identity Package Endorsement, SH-91465;
3. Purchase Equipment Breakdown Coverage Endorsement, SH-91909; and
4. Notify the Company within 90 days of the start of any new building or any additions or other physical changes of the dwelling, which will increase the value of the dwelling by \$5,000 or more and pay any resulting additional premium.

In addition, this endorsement removes the percent limitation of Coverage D – Loss of Use and provides up to 30 days coverage for prohibited use by civil authority and includes Ordinance or Law Coverage when damage to the dwelling exceeds 10% of the Coverage A amount. The Supreme Protection Package also increases the limit of Coverage B to 20% of Coverage A, and increases the limit of Coverage C to 75% of Coverage A. Furthermore, this Supreme Protection Package provides increased special limits of liability for several items, as detailed in the endorsement.

The additional premium is determined by applying the following schedule:

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	23% X Adjusted Base Premium + \$309
First Preceding Year	25% X Adjusted Base Premium + \$309
Second Preceding Year	26% X Adjusted Base Premium + \$309
Third Preceding Year	28% X Adjusted Base Premium + \$309
Fourth Preceding Year	29% X Adjusted Base Premium + \$309
Fifth and All Additional Preceding Years	31% X Adjusted Base Premium + \$309

Zone 2

<u>Home Completed and First Occupied</u>	<u>Premium</u>
Current Calendar Year	23% X Adjusted Base Premium + \$309
First Preceding Year	26% X Adjusted Base Premium + \$309
Second Preceding Year	29% X Adjusted Base Premium + \$309
Third Preceding Year	32% X Adjusted Base Premium + \$309
Fourth Preceding Year	34% X Adjusted Base Premium + \$309
Fifth and All Additional Preceding Years	37% X Adjusted Base Premium + \$309

*See Endorsement SH-91407 for Zone definitions.

Applicable to Policy Form 3 Only.

Not Applicable with Modified Replacement Cost Coverage,
Special Protection Package (Silver),
or Enhanced Protection Package (Gold).

Not Applicable for Manufactured Homes.

27. SH-91407 – ORDINANCE OR LAW COVERAGE

For the additional premium, covered losses that are at least 50% or more of the Coverage A limit for Policy Form 3 will be settled on the basis of any ordinance or law that regulates the construction, repair or demolition of the property. The amount of coverage provided by this endorsement is 25% of the Coverage A limit.

For Form 3 policies, this coverage and Special Protection Package (Silver) Coverage shall not increase the total amount the Company will pay under Coverage A - Dwelling for the cost of repair or replacement beyond 125% of the Coverage A limit as shown on the Declarations.

The additional premium is determined by multiplying the adjusted base premium by the following applicable percentage:

<u>Home Completed and First Occupied</u>	<u>Adjustment to Base Premium</u>	
	<u>Zone 1</u>	<u>Zone 2</u>
Current Calendar Year	0%	0%
First Preceding Year	2%	3%
Second Preceding Year	3%	6%
Third Preceding Year	5%	9%
Fourth Preceding Year	6%	12%
Fifth and All Preceding Years	8%	15%

Zone 1 – Remainder of State

Zone 2 – Clay, Craighead, Crittenden, Greene, Mississippi, Poinsett Counties

Applicable to Policy Form 3 Only.

Equivalent or better coverage automatically provided with the Enhanced Protection Package (Gold); and Supreme Protection Package (Platinum).

28. SH-91465 – STOLEN IDENTITY PACKAGE “Secure I.D. from ANPAC®”

For an additional premium, this endorsement may be added to the policy to provide up to \$50,000 for reasonable and necessary expenses incurred by an insured as the result of any one stolen identity occurrence during the policy period. Aggregate coverage for multiple stolen identity occurrences shall not exceed \$100,000 per policy period. Income Replacement coverage of up to \$200 per day for a maximum of 25 days or \$5,000 for lost wages when having to take time from work to rectify records as a result of a stolen identity occurrence. No deductible applies to the loss for each stolen identity occurrence.

The premium for this coverage is \$90. (A minimum premium of \$35 shall be earned in full.)

Applicable to All Policy Forms.

Required with the Supreme Protection Package (Platinum).

29. SH-91909 – EQUIPMENT BREAKDOWN COVERAGE

For an additional premium, this endorsement may be added to provide up to \$50,000 in repair or replacement coverage arising from any one accident caused by sudden and accidental breakdown of mechanical or electrical equipment such as central air conditioning unit, heating unit, hot water heater and other basic electrical services in the home (central vacuums, chair lifts/elevators, well pumps, generators, electric power panels, permanently installed appliances, etc.).

Coverage is also provided for spoilage of refrigerated property (\$500), and loss of use (\$200 per day/\$1,000 aggregate) as a result of a covered loss. Loss due to electrical power surge or brownout is not covered. Electronic entertainment or component equipment is not covered. The coverage provided under this endorsement does not increase any limit of liability under Section I. A \$1,000 deductible applies for each covered occurrence.

The premium for this coverage is as follows:

Coverage A Value Range	0-\$250,000	\$250,001 to \$500,000	\$500,001 to \$1,000,000	\$1,000,001 to \$5,000,000
Base Rate	\$73	\$109	\$137	\$150

Applicable to Policy Forms 3 and 6

Required with the Supreme Protection Package (Platinum).

30. SH-9819 - CONTRACTORS' INTEREST

The contractor's interest in the building only is covered with this endorsement. No additional premium is applicable for this coverage.

Applicable to Form 3 Only.

B. Section II - Liability Coverages

1. SH-9072 - INCIDENTAL FARM AND ANIMAL LIABILITY COVERAGE

This endorsement provides Section II coverage for incidental farming operations conducted on the residence premises or caused by animals on or adjacent to the residence premises. "Incidental" would include instances where the insured has livestock or plant crops used only for personal consumption.

It should be noted this is not a farmers comprehensive personal liability coverage. This form has no provision for covering employer's liability or extended liability for farming operations conducted away from the residence premises.

As farming operations create unique exposures, careful attention to underwriting must be given. Underwriting considerations for this incidental coverage include the number of acres, number of animals, and the size and condition of any outbuildings.

The additional premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Farm and Animal</u>
\$ 25,000	\$ 5
50,000	6
100,000	7
200,000	9
300,000	11
500,000	15
1,000,000	25

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Farm and Animal</u>
\$ 1,000	\$ 4
2,000	5
5,000	7

Applicable to Policy Form 3 Only.

2. SH-9071 - INCIDENTAL BUSINESS PURSUITS

This endorsement may be attached to provide Section II coverages for liability of the insured arising out of incidental business activities; however, this coverage does not apply to products liability. Only the occupations listed below are eligible for this coverage.

NOTE: This coverage may not be provided for any insured in connection with a business partnership of which the insured is a partner or member. The limits of liability for this coverage must be the same as in the basic policy.

Classifications:

- A. Clerical Office Employees - Defined as those employees whose duties are confined to keeping the books or records, conducting correspondence, or who are engaged wholly in office work where such books or records are kept or where such correspondence is conducted, having no other duty of any nature in or about the employer's premises.
- B. Salespersons, collectors, or messengers.
- C. Teachers - For all teachers, including corporal punishment of pupils.

The premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Classifications A, B, and C</u>
\$ 25,000	\$ 3
50,000	4
100,000	5
200,000	6
300,000	7
500,000	8
1,000,000	11

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Classifications A, B, and C</u>
\$ 1,000	\$2
2,000	3
5,000	4

Applicable to All Policy Forms.

3. **SH-9380 - HOME DAY-CARE COVERAGE**

When the insured provides day-care or babysitting services in the insured dwelling or other structures located on the residence premises, this endorsement may be attached to provide Section II Coverages. The form is designed for incidental exposures only. The insured may provide day-care services for one to three children in the home at any one time. The limits shown for Coverage E and Coverage F are annual aggregate limitations, regardless of the number of occurrences, insureds, claims made, suits brought, or persons injured.

The additional premium for this coverage is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Exposures</u>
\$ 25,000	\$29
50,000	34
100,000	39
200,000	46
300,000	54
500,000	59
1,000,000	74

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Exposures</u>
\$ 1,000	\$10
2,000	15
5,000	20

Applicable to All Policy Forms.

4. **SH-9695 - CHILD CARE COVERAGE**

NOTE: Coverage is available on an exception basis and must be submitted to the Home Office for approval prior to binding coverage

When the insured provides day-care or babysitting services in the insured dwelling or other structures located on the residence premises, this endorsement may be attached to provide Section II Coverages. The form is designed for incidental exposures only. The insured may provide day-care services for up to six children in the home at any one time. The limits shown for Coverage E and Coverage F are annual aggregate limitations, regardless of the number of occurrences, insureds, claims made, suits brought, or persons injured.

The rates shown apply to all Coverage F - Medical Payment limits.

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Exposures</u>
\$ 100,000	\$196
200,000	245
300,000	294
500,000	392
1,000,000	637

Applicable to All Policy Forms.

5. **SH-9082 - PERSONAL INJURY COVERAGE**

This endorsement broadens the definition of bodily injury under Coverage E - Personal Liability, to include personal injury to others. This coverage includes areas such as false arrest, libel, or invasion of privacy, subject to limitations found in the endorsement itself.

Special underwriting considerations apply to the use of this endorsement. Generally, individuals in the following types of occupations would not be eligible for this endorsement:

1. Law Enforcement Officer, Private Investigator, Bail Bondsman
2. Internet Service, Internet Service Provider or related support personnel, backbone personnel, Installer or Consultant
3. Network Application Provider or related support personnel, Installer or Consultant
4. Director or Officer of Publicly Held Corporation
5. Judge / Politician
6. Labor Negotiator
7. Professional or Semi-Professional Athlete / Coach
8. Professional Actor, Entertainer / Author / Public Lecturer / Broadcaster /Telecaster / Newspaper Reporter / Editor / Publisher / Advertiser

Any questions regarding a specific case should be directed to your underwriter.

Coverage E – Personal <u>Liability Limits</u>	<u>Premium Adjustment</u>
\$ 100,000	\$10
200,000	12
300,000	13
500,000	16
1,000,000	24

Applicable to All Policy Forms.

6. **SH-4780 - TENANTS WATERBED LIABILITY**

A Form 4 policy may be endorsed to pay up to the Coverage E limit of liability, all sums for which the insured is legally liable to pay for damage to property of others, caused by or arising out of the ownership, maintenance or use of the owned waterbed on the residence premises. The premium for this endorsement is \$20.

Applicable to Policy Form 4 Only.

7. **SH-4074 - THREE- OR FOUR-FAMILY DWELLING PREMISES LIABILITY**

The following tables show the premium when Coverages E and F are provided for the indicated exposures.

Coverage E – Personal <u>Liability Limits</u>	Premium Adjustment	
	<u>Form 4 Only 3 Family Dwelling</u>	<u>Form 4 Only 4 Family Dwelling</u>
\$ 25,000	\$ 9	\$11
50,000	10	12
100,000	11	13
200,000	12	14
300,000	13	15
500,000	15	17
1,000,000	20	22

Coverage F – Medical <u>Payments Limits</u>	Premium Adjustment	
	<u>Form 4 Only 3 Family Dwelling</u>	<u>Form 4 Only 4 Family Dwelling</u>
\$ 1,000	\$ 7	\$ 8
2,000	8	9
5,000	10	11

Applicable to Policy Form 4 Only.

C. **Section I and II**

1. **SH-9207 - ADDITIONAL RESIDENCE PREMISES - RENTED TO OTHERS**

This endorsement provides liability and medical payments coverages for any exposure arising out of any one- to four-family dwelling which is rented from or held for rental to others by the insured. The rental property may be, but is not required to be, a part of or attached to the residence premises.

This endorsement also amends Coverage B - Other Structures to provide coverage when the structure is used for the business purpose of renting to others as a resident premises.

The additional premium is developed from the tables below:

Coverage E – Personal <u>Liability Limits</u>	Adjustment to Premium			
	Rented to Others	Rented to Others	Rented to Others	Rented to Others
	<u>1 Family</u>	<u>2 Family</u>	<u>3 Family</u>	<u>4 Family</u>
\$ 25,000	\$ 6	\$10	\$14	\$18
50,000	8	12	16	20
100,000	10	14	18	22
200,000	12	16	20	24
300,000	14	18	22	28
500,000	18	22	26	34
1,000,000	28	32	36	50

Coverage F –Medical <u>Payments Limits</u>	Adjustment to Premium			
	Rented to Others	Rented to Others	Rented to Others	Rented to Others
	<u>1 Family</u>	<u>2 Family</u>	<u>3 Family</u>	<u>4 Family</u>
\$ 1,000	\$6	\$8	\$12	\$ 14
2,000	8	10	14	16
5,000	12	14	18	20

Applicable to All Policy Forms.

2. **SH-9041 - ADDITIONAL INSURED RESIDENCE PREMISES**

(Other than Contractors)

This endorsement extends the definition of "insured" to include the person or persons named on the endorsement with respect to Coverages A - Dwelling, B - Other Structures, E - Personal Liability, and F - Medical Payments To Others. No additional premium is applicable for this coverage.

Applicable to All Policy Forms.

3. **SH-9042 - OFFICE, PROFESSIONAL, PRIVATE SCHOOL OR STUDIO USE**

When a permitted incidental occupancy is conducted on the residence premises, this endorsement must be attached. This form provides both Section I and II coverages to reflect a business exposure actually conducted on the residence premises.

Under Section I, the basic policy provides limited coverage on property actually used in business. If a higher limit is desired, the options listed below are available. Note--property for sale or held for resale is not covered under this form.

The premium for increased coverage on business property (does not include electronic Data Processing equipment or the recording or storage media used with the equipment) is:

<u>Limit</u>	<u>Premium</u>
\$5,000	\$ 5
7,500	7
10,000	10

A charge must be included for Section II coverages in all cases. The premium for the Section II exposure is developed from the tables below:

<u>Coverage E – Personal Liability Limits</u>	<u>Premium Adjustment Incidental Occupancy on Premises</u>
\$ 25,000	\$ 8
50,000	9
100,000	10
200,000	11
300,000	12
500,000	14
1,000,000	18

<u>Coverage F – Medical Payments Limits</u>	<u>Premium Adjustment Incidental Occupancy on Premises</u>
\$ 1,000	\$ 4
2,000	6
5,000	8

Applicable to All Policy Forms.

4. **438BFU – LENDER’S LOSS PAYABLE ENDORSEMENT**

This endorsement protects the mortgagee’s interest and rights and should only be added when requested by the mortgagee. No additional premium is applicable for this endorsement.

Applicable to All Policy Forms.

Rate Data for Homeowners SERFF Filings
American National Property And Casualty Company & American National General Insurance Company

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

9.3%

Effective Date of Last Rate Revision:

6/24/09 NB & RB

Company Rate Information

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):
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ANPAC

25.5%	Capped 2.2% Uncapped 6.0%	Capped \$98,029 Uncapped \$268,165	4,931	\$4,484,631	Capped 20.0% Uncapped 124.7%	-58.2%
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ANG

25.5%	Capped 0.4% Uncapped 1.9%	Capped \$899 Uncapped \$3,900	324	\$207,187	Capped 20.0% Uncapped 49.3%	-39.4%
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Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated	25.5%
Overall Percentage Rate Impact for this Filing	Capped 2.1% Uncapped 5.8%
Effect of Rate Filing – Written Premium Change for this Program	Capped \$98,928 Uncapped \$272,065
Effect of Rate Filing – Number of Policyholders Affected	5,255

SERFF Tracking Number: ANPC-126522833 State: Arkansas
 First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
 ...
 Company Tracking Number: 03-H-G-10-0232
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
 Project Name/Number: /399008

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	H-1 Homeowners Abstract	Filed	08/30/2010
Comments:			
Attachments:			
	Form H-1 (HO).pdf		
	Form H-1 (GHO).pdf		

		Item Status:	Status Date:
Satisfied - Item:	HPCS-Homeowners Premium Comparison Survey	Filed	08/30/2010
Comments:			
Attachments:			
	HPCS (HO).xls		
	HPCS (HO).pdf		
	HPCS (GHO).xls		
	HPCS (GHO).pdf		

		Item Status:	Status Date:
Satisfied - Item:	NAIC loss cost data entry document	Filed	08/30/2010
Comments:			
Attachments:			
	RF-1 _HO-3.pdf		
	RF-1 _GHO-3.pdf		

		Item Status:	Status Date:
Satisfied - Item:	Actuarial Memorandum	Filed	08/30/2010
Comments:			
Attachments:			

SERFF Tracking Number: ANPC-126522833 State: Arkansas
 First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
 ...
 Company Tracking Number: 03-H-G-10-0232
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
 Project Name/Number: /399008

AR ANPAC Actuarial Memorandum.pdf
 EB for HO Revised rates Filing Memorandum.pdf

		Item Status:	Status
			Date:
Satisfied - Item:	Exhibits	Filed	08/30/2010
Comments:			
Attachments:			
	AR Home Rate Packet Exhibits.pdf		
	EB Rate Support.pdf		

		Item Status:	Status
			Date:
Satisfied - Item:	Supplemental Exhibit 7-21-10	Filed	08/30/2010
Comments:			
Attachment:			
	Supplemental Exhibits.pdf		

		Item Status:	Status
			Date:
Satisfied - Item:	Supplemental Exhibit 8-27-10	Filed	08/30/2010
Comments:			
Attachment:			
	Supp Exh.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 American National Property And Casualty Company

NAIC No. 28401 GROUP No. 408

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

We have an ongoing program to determine coverage on homes for new business and existing customers. We use estimating products developed by Marshall & Swift/Boeckh Company to help keep our homes properly insured and provide competitive rates. In addition, we started a program in 2005 to insure our homes to their value at the end of the policy term, instead of at the beginning of the policy term.

2. If you use a cost estimator (or some 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.

We use the Marshall & Swift/Boeckh RCT System. This program started in 2003. Before this change we used the Boeckh Insurance to Value System.

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.

We offer two options: Replacement Cost and Modified Replacement Cost. Replacement Cost is available if the market value is at least 80% of the replacement cost. Modified Replacement is used to insure the home for its current market value instead of replacement cost.

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

We use the Marshall & Swift/Boeckh Residential Building Cost Insurance Index at each renewal. This procedure is discussed in General Rule XIX.

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

a. Fire Extinguisher	<u>0</u>	%
b. Burglar Alarm	<u>5</u>	%
c. Smoke Alarm	<u>0</u>	%
d. Insured who has both homeowners and auto with your company	<u>0</u>	%
e. Deadbolt Locks	<u>0</u>	%
f. Window or Door Locks	<u>0</u>	%
g. Other (Specify)	<u>0</u>	%
Burglar Alarm to Police Dept.	<u>10</u>	%
Fire Alarm to Fire Dept.	<u>10</u>	%

6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance?

No

If so, state areas and explain reason for not writing N/A

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

<u>FORM</u>	<u>PREMIUM VOLUME</u>
SH-3	\$4,230,085
SH-4	\$56,808
SH-6	\$13,608
SH-7	\$184,130

8. Do you write homeowner risks which have aluminum, steel or vinyl siding? Yes

9. Is there a surcharge on risks with wood heat? No

If yes, state surcharge N/A

Does the surcharge apply to conventional fire places? N/A

If yes, state surcharge N/A

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

Rebecca Rast

Signature

Rebecca Rast

Printed Name

Regulatory Compliance Analyst II

Title

417-887-4990, ext.2057

Telephone Number

rrast@anpac.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 American National General Insurance Company

NAIC No. 39942 GROUP No. 408

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

We have an ongoing program to determine coverage on homes for new business and existing customers. We use estimating products developed by Marshall & Swift/Boeckh Company to help keep our homes properly insured and provide competitive rates. In addition, we started a program in 2005 to insure our homes to their value at the end of the policy term, instead of at the beginning of the policy term.

2. If you use a cost estimator (or some 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.

We use the Marshall & Swift/Boeckh RCT System. This program started in 2003. Before this change we used the Boeckh Insurance to Value System.

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.

We offer two options: Replacement Cost and Modified Replacement Cost. Replacement Cost is available if the market value is at least 80% of the replacement cost. Modified Replacement is used to insure the home for its current market value instead of replacement cost.

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

We use the Marshall & Swift/Boeckh Residential Building Cost Insurance Index at each renewal. This procedure is discussed in General Rule XIX.

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

a. Fire Extinguisher	<u>0</u>	%
b. Burglar Alarm	<u>5</u>	%
c. Smoke Alarm	<u>0</u>	%
d. Insured who has both homeowners and auto with your company	<u>0</u>	%
e. Deadbolt Locks	<u>0</u>	%
f. Window or Door Locks	<u>0</u>	%
g. Other (Specify)	<u>0</u>	%
Burglar Alarm to Police Dept.	<u>10</u>	%
Fire Alarm to Fire Dept.	<u>10</u>	%

6. Are there any areas in the State of Arkansas in which your company will not write homeowners insurance?

No

If so, state areas and explain reason for not writing N/A

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

FORM	PREMIUM VOLUME
SH-3	\$202,470
SH-4	\$4,717
SH-6	\$0

8. Do you write homeowner risks which have aluminum, steel or vinyl siding? Yes

9. Is there a surcharge on risks with wood heat? No

If yes, state surcharge N/A

Does the surcharge apply to conventional fire places? N/A

If yes, state surcharge N/A

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

Rebecca Rast

Signature

Rebecca Rast

Printed Name

Regulatory Compliance Analyst II

Title

417-887-4990, ext.2057

Telephone Number

rrast@anpac.com

Email Address

NAIC Number: 408-28401
 Company Name: American National Property And Casualty Company
 Contact Person: Rebecca Rast
 Telephone No.: 417-887-4990, ext 2057
 Email Address: rrast@anpac.com
 Effective Date: 9/28/2010

**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	\$518.00	\$621.00	\$519.00	\$624.00	\$660.00	\$792.00	\$873.00	\$1,048.00	\$665.00	\$799.00	\$635.00	\$762.00	\$632.00	\$758.00	\$618.00	\$742.00	\$711.00	\$853.00
	\$120,000	\$645.00	\$774.00	\$647.00	\$777.00	\$822.00	\$987.00	\$1,088.00	\$1,306.00	\$829.00	\$995.00	\$791.00	\$950.00	\$787.00	\$945.00	\$770.00	\$924.00	\$886.00	\$1,063.00
	\$160,000	\$785.00	\$942.00	\$788.00	\$946.00	\$1,001.00	\$1,201.00	\$1,324.00	\$1,590.00	\$1,009.00	\$1,211.00	\$963.00	\$1,156.00	\$958.00	\$1,150.00	\$937.00	\$1,125.00	\$1,078.00	\$1,294.00
6	\$80,000	\$626.00	\$736.00	\$628.00	\$739.00	\$798.00	\$939.00	\$1,056.00	\$1,242.00	\$804.00	\$947.00	\$768.00	\$903.00	\$764.00	\$899.00	\$747.00	\$879.00	\$859.00	\$1,011.00
	\$120,000	\$780.00	\$918.00	\$782.00	\$921.00	\$994.00	\$1,170.00	\$1,315.00	\$1,548.00	\$1,002.00	\$1,179.00	\$956.00	\$1,126.00	\$952.00	\$1,120.00	\$931.00	\$1,095.00	\$1,071.00	\$1,260.00
	\$160,000	\$949.00	\$1,117.00	\$952.00	\$1,121.00	\$1,210.00	\$1,424.00	\$1,601.00	\$1,884.00	\$1,220.00	\$1,435.00	\$1,164.00	\$1,370.00	\$1,158.00	\$1,363.00	\$1,133.00	\$1,333.00	\$1,303.00	\$1,533.00
9	\$80,000	\$1,211.00	\$1,290.00	\$1,215.00	\$1,294.00	\$1,544.00	\$1,645.00	\$2,043.00	\$2,176.00	\$1,557.00	\$1,658.00	\$1,486.00	\$1,582.00	\$1,478.00	\$1,574.00	\$1,446.00	\$1,540.00	\$1,663.00	\$1,771.00
	\$120,000	\$1,509.00	\$1,608.00	\$1,514.00	\$1,613.00	\$1,924.00	\$2,049.00	\$2,546.00	\$2,712.00	\$1,940.00	\$2,066.00	\$1,851.00	\$1,972.00	\$1,842.00	\$1,962.00	\$1,802.00	\$1,919.00	\$2,072.00	\$2,207.00
	\$160,000	\$1,837.00	\$1,957.00	\$1,843.00	\$1,963.00	\$2,342.00	\$2,494.00	\$3,099.00	\$3,301.00	\$2,361.00	\$2,515.00	\$2,253.00	\$2,400.00	\$2,242.00	\$2,388.00	\$2,193.00	\$2,335.00	\$2,522.00	\$2,686.00

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	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$92.00	\$92.00
	\$15,000	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$115.00	\$115.00
	\$25,000	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$151.00	\$151.00
6	\$5,000	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$74.00	\$92.00	\$92.00
	\$15,000	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$93.00	\$115.00	\$115.00
	\$25,000	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$151.00	\$151.00
9	\$5,000	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$110.00	\$136.00	\$136.00
	\$15,000	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$138.00	\$171.00	\$171.00
	\$25,000	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$182.00	\$225.00	\$225.00

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" value="0"/> %	Deadbolt Lock	<input type="text" value="0"/> %
Burglar Alarm	<input type="text" value="5"/> %	Window Locks	<input type="text" value="0"/> %
Smoke Alarm	<input type="text" value="0"/> %	\$1,000 Deductible	<input type="text" value="Base"/> %
		Other (specify)	

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?
 %

Zone Brick Frame

Claim Free Plus & Utility/	Up to 56% a	%
Maximum Credit Allowed	56% and 78	%

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

Highest Risk

\$ 5.34

\$ 3.58

Lowest Risk

\$ 0.47

\$ 0.31

|

SERFF Tracking Number: ANPC-126522833 *State:* Arkansas
First Filing Company: American National General Insurance Company, *State Tracking Number:* EFT \$100
...
Company Tracking Number: 03-H-G-10-0232
TOI: 04.0 Homeowners *Sub-TOI:* 04.0000 Homeowners Sub-TOI Combinations
Product Name: Homeowners
Project Name/Number: /399008

Attachment "HPCS (GHO).xls" is not a PDF document and cannot be reproduced here.

Claim Free Plus & Utility/	Up to 56% a	%
Maximum Credit Allowed	56% and 78	%

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

Highest Risk

\$ 5.34

\$ 3.58

Lowest Risk

\$ 0.47

\$ 0.31

|

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National Property And Casualty Company	B.	408-28401

		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.	4.0 Homeowners	B.	4.0000 Homeowners Sub-TOI Combinations

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
SH-3 & SH-7	26.0%	Capped 2.2% Uncapped 6.1%					
SH-4 & SH-6	-4.6%	0.0%					
TOTAL OVERALL EFFECT	25.5%	Capped 2.2% Uncapped 6.0%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	5263	N/A	N/A	3738	1174	31.4%	49.3%
2006	5267	N/A	N/A	3748	2511	67.0%	60.5%
2007	5142	-0.0%	3/1/07	3728	1635	43.8%	55.4%
2008	5021	-2.9%	5/14/08	3893	11869	304.9%	102.2%
2009	4950	9.6%	6/24/09	3789	2643	69.8%	90.3%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)
 9. 20.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____ 037 _____
 10. -58.2% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____ 002 _____

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National General Insurance Company	B.	408-39942

		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.	4.0 Homeowners	B.	4.0000 Homeowners Sub-TOI Combinations

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
SH-3	26.0%	Capped 0.6% Uncapped 2.1%					
SH-4 & SH-6	-4.6%	-8.0%					
TOTAL OVERALL EFFECT	25.5%	Capped 0.4% Uncapped 1.9%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	279	N/A	N/A	277	-35	-12.6%	234.6%
2006	210	N/A	N/A	249	124	49.7%	94.9%
2007	119	48.8%	3/1/07	235	56	23.7%	43.1%
2008	188	-44.1%	5/14/08	179	299	166.4%	81.8%
2009	314	1.0%	6/24/09	167	97	58.0%	80.7%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 20.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____008_____

10. -39.4% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____009_____

American National Property And Casualty Company
American National General Insurance Company
Arkansas
Homeowners
Actuarial Memorandum

The purpose of this filing is to implement several changes to the homeowners program as detailed in this memorandum and to address our rate inadequacy in the state. We are proposing to increase our overall rate level by 24.7% resulting in an annual revenue effect of \$1,157,231. This memorandum and accompanying exhibits describe the underlying data and ratemaking methodologies used to develop our overall Homeowners indication of 42.4%.

1. Dwelling protection class relativities are being adjusted.
2. Policy Amount factors are changing.
3. Deductible adjustment factors are changing.
4. Changes are proposed for the zone definitions
5. The Age of Home discount will increase for homes built in this calendar year, and the discount decays much more quickly. A home of age 20 years will no longer receive any discount; previously, a home built 40 years ago would still receive a slight discount. In addition, newer roofs will receive larger discounts than they presently do.
6. The Claim Free Plus Discount will now be determined using the account's current Attract Risk Score instead of the historic high Attract Risk Score (the higher of the auto & home Attract Risk Score will continue to be used).
7. The equipment breakdown endorsement has also been revised. Please see the accompanying memo for further details.

Exhibit I – Rate Level Indications - Rate level indications are displayed on Page 1 of this exhibit. We are combining the experience for American National Property And Casualty Company (ANPAC) and American National General Insurance Company (ANGIC). Earned Premiums exclude Earthquake, Write-off, and Scheduled Personal Property premiums and ANPAC premiums are adjusted for CASHBACK return premiums. Accident year losses exclude Wind/Hail, Liability, and Catastrophe losses. Provisions for these excluded losses are described in Exhibit V. The total projected loss ratio is further modified for loss adjustment expenses, and the Projected Loss and LAE ratio is credibility weighted with the Trended Permissible Loss Ratio. The standard used for full credibility is 40,000 earned house years. Page 4 shows loss ratios by zone for ANPAC form SH-3.

Exhibit II – Premium Trend - This exhibit develops the premium trend factors by form used in Exhibit I. The average APAR for each year is fitted to a line and an annual change is selected using a 4-year exponential fit. The current amount factor (CAF) is calculated as an index of the average APAR at the midpoint of each experience year to the average APAR at 6/30/09. The trended amount factor (TAF) is calculated as the selected TAF annual change trended from 6/30/09 to 9/28/11. The premium trend factors are the product of the respective current amount factor and the trended amount factor. A provision is also included to reflect the switch to a standardized cost model in our estimation of insurance to value.

Exhibit III – Loss Trend - Page 1 of this exhibit displays our loss trend factors. The data supporting our loss trends is ISS Fast Track data and excludes catastrophes. Loss trend is the product of the Current Cost Factor (CCF) and the Trended Cost Factor (TCF).

The CCF is calculated as the selected CCF annual change trended from the mid-point of each respective year to 6/30/09. The TCF is calculated by selecting an annual pure premium growth factor and trending

American National Property And Casualty Company
American National General Insurance Company
Arkansas
Homeowners
Actuarial Memorandum

it from 6/30/09 to 9/28/2011. Pages 2-5 display the annual growth factors for various exponential fits for both Arkansas and Countrywide.

Credibility-weighted factors are displayed on Pages 6-7. The credibility procedure is based on the variance of the residuals from each exponential fit. Specifically, the inverse of the variance for both Arkansas and Countrywide is determined and the credibility weight is calculated as the proportion of each source's variance inverse to the total. For example, if the variance for Arkansas is X and the variance for Countrywide is Y, then the weight for Arkansas is calculated as $(1/X)/[(1/X)+(1/Y)]$. After developing the credibility-weighted change, an annual change is selected based on recent trends.

Exhibit IV – Loss Development Factors - The loss development factors used to adjust the accident year losses in Exhibit I to ultimate cost are derived in this exhibit. Countrywide non-catastrophe data excluding Texas is used.

Exhibit V – Wind/Hail, Catastrophe and Section II Provisions – Page 1 of this exhibit displays the wind/hail loss ratios by zone. Modeled catastrophic wind/hail losses were estimated for our current book of business using Version 10.0 of AIR Clasic 2. Non-catastrophic wind/hail losses were loaded by applying a regionally estimated experienced based non-cat to cat ratio to the modeled catastrophic wind/hail losses. This was necessary since the model can only account for catastrophic wind/hail losses.

We are including a \$17 non-wind catastrophe provision, based on regional non-wind catastrophe pure premium. Due to the infrequent nature of non-wind/hail catastrophes, we have developed our catastrophe provision using 16 years of catastrophe experience for Arkansas and neighboring states having similar exposure. The catastrophe frequency and severity are calculated for each year from 1/1/94 to 12/31/09. The severities have been developed to ultimate using the loss development factors displayed in Exhibit IV and have been adjusted for inflation using the annual changes in the average policy amount limits for policies in the region. A \$21 per exposure provision was used to estimate Section II losses.

Exhibit VI – Loss Adjustment Expense Factors - This exhibit displays the data utilized to calculate the companywide loss adjustment expense factors used in Exhibit I. Companywide calendar year data is used since Arkansas's data is not fully credible.

Exhibit VII – Expense and Profit Provisions - This exhibit displays the variable expense provision, a fixed provision for reinsurance expense, and the underwriting profit provision developed in Exhibit VIII.

Exhibit VIII – Estimated Effect of Investment Income - This exhibit develops the underwriting profit provision. This factor is based upon the estimated effect of investment earnings on unearned premium reserves and loss reserves. The risk free rate of return is used to remove investment risk from influencing our indications. The tax rate shown was computed as described on Page 3 of this exhibit.

Exhibit IX – Proposed Base Rate Relativities - Several changes to our zone definitions are included with this filing. The changes being made are to align our zones more closely with the zones for Allstate.

American National Property And Casualty Company
American National General Insurance Company
Arkansas
Homeowners
Actuarial Memorandum

Page 1 summarizes the portions of the zones being moved. Page 2 displays the rating impact of each individual rating factor change proposed.

Pages 3-4 show the changes to ANPAC Form SH-3 base rate relativities. These base rates are protection class 1 frame construction at \$150,000 of Coverage A. Page 3 displays the current base rates and current/proposed relativities indexed to zone 9, which is our largest zone. Page 4 displays the current and proposed average overall premium for each new zone. The base rates for ANPAC Form SH-7 and ANGIC Form SH-3 are determined by applying a differential to the ANPAC Form SH-3 corresponding base rates. The changes in these differentials are shown on page 5. Pages 6-7 show the base rates for Forms SH-4 and SH-6.

Exhibit X – Proposed Protection Class Relativities – This exhibit displays the current and proposed protection class relativities. The proposed relativities are based on ISO data and our own countrywide experience.

Exhibit XI – Proposed Policy Amount Relativities – This exhibit displays the current and proposed policy amount relativities. The proposed changes are being made to bring our relativities more in line with our competitors.

Exhibit XII – Proposed Deductible Adjustment Factors – Page 1 displays our proposed deductible adjustments, which vary by coverage amount, for forms SH-3 and SH-7. The deductible curves have been re-adjusted to more accurately price deductibles in relation to the \$1000 base deductible. A Gamma distribution was used to select the proposed deductible factors. The 0.5% All Peril, \$1000/0.5% Wind/Hail and \$2000/0.5% Wind/Hail deductible options are being added.

Exhibit XIII – Utilities / Roof Rating Plan - Pages 1 - 2 display the present and proposed utility/roof rating plans. We have made several changes to the utility-roof rating plan. The Age of Home discount will increase for homes built in this calendar year, and the discount decays much more quickly. A home of age 20 years will no longer receive any discount; previously, a home built 40 years ago would still receive a slight discount. In addition, newer roofs will receive larger discounts than they presently do.

Exhibit XIV –Claim Free Plus Rule Change - The Claim Free Plus Discount will now be determined using the account's current Attract Risk Score instead of the historic high Attract Risk Score (the higher of the auto & home Attract Risk Score will continue to be used). This exhibit shows the distribution of policies by risk score range before and after this change.

Exhibit XV –Rate Change Distribution – This Exhibit displays the number of policies by rate change range. The percentage of policyholders with a change over 20% is shown as well.

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS EQUIPMENT BREAKDOWN COVERAGE**

EXPLANATORY MEMORANDUM

This memorandum explains the revisions that will apply to the Equipment Breakdown (EB) Coverage component of our Homeowners Program. This coverage is 100% reinsured by The Hartford Steam Boiler Inspection and Insurance Company (HSB).

Background

Your records will reflect that we recently introduced our Equipment Breakdown coverage for Homeowners program in your state. Unfortunately, this program has not produced acceptable results, and we are filing to revise our charges.

Revisions

We are making the following revisions to our Homeowners EB program:

- Increasing the deductible from \$500 to \$1,000
- Revising our rates per policy by Coverage A value range as indicated below:

Coverage A Value Range	Current Rate per Policy	Proposed Rate per Policy
≤ \$250,000	\$30	\$73
\$250,001 to \$500,000	\$48	\$109
\$500,001 to \$1,000,000	\$75	\$137
\$1,000,001 to \$5,000,000	\$111	\$150

We have partnered with HSB to act as our outsourced EB department. In order to determine the revised rates, we calculated the overall loss costs for our program based on our program's experience since inception. A new gross charge for our program was computed by adding HSB's expenses associated with reinsuring this coverage to the loss costs and also adding our expenses which include the agents' commission, any written premium taxes, general expense and other acquisition expense, and profit. We then compared the computed overall gross charge to our current overall charge, and applied this difference to our existing rates by Coverage A value range. Lastly, we selected a final premium charge less than computed in recognition of the change in deductibles and to avoid rate vacillation and market disruption.

Our EB Rate Support spreadsheet details our rate derivation.

Summary

We believe these revisions will position the EB component of our Homeowners Program for profitable growth.

Our proposed manual page accompanies this filing.

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS EQUIPMENT BREAKDOWN COVERAGE**

Independent rates and rules for rating Equipment Breakdown Coverage

1. Description

The Equipment Breakdown Coverage Endorsement provides equipment breakdown insurance to cover equipment attached to and made part of the dwelling or other structure when perils for such equipment would have been excluded under the Homeowners policy.

2. Form

Use Equipment Breakdown Coverage Form SH-91909.

3. Eligibility

Any risk eligible for and carrying a Homeowners policy is eligible for Equipment Breakdown coverage.

4. Rules

This coverage will be written as a separate endorsement as part of a Homeowners Policy.

5. Premium Determination

The premium charge is per policy.

a.) Rate per Policy

Coverage A Value Range	Rate per Policy
≤ \$250,000	\$73
\$250,001 to \$500,000	\$109
\$500,001 to \$1,000,000	\$137
\$1,000,001 to \$5,000,000	\$150

b.) Deductible

A deductible of \$1,000 applies.

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Rate Level Indications
All Forms

Form	Written Premium at Current Rate Level	CW Loss Ratio w/ LAE & Fixed Expenses	Indicated Rate Level Change
Dwelling Forms	4,616,685	96.9%	43.2%
Contents Forms	75,133	64.5%	-4.6%
All Forms	4,691,818	96.4%	42.4%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Rate Level Indications
Forms SH-3 & SH-7

Year Ending (1)	Earned Premium at Current Rate Level (2)	Premium Trend (3)	Earned Premium at Current Rate Level (Incl. Premium Trend) (4) = (2) * (3)	Undeveloped Accident Year Non-Wind/Hail Losses (5)	Loss Development Factor (6)	Developed Accident Year Non-Wind/Hail Losses (7)=(5)*(6)	Non- Wind/Hail Loss Cost Trend (8)	Projected Non- Wind/Hail Losses (9) = (7) * (8)	Projected Non- Wind/Hail Loss Ratio (10) = (9) / (4)
12/31/2005	4,244,563	1.3875	5,889,161	818,534	1.0000	818,534	1.8134	1,484,358	25.2%
12/31/2006	4,134,854	1.2860	5,317,280	1,177,859	1.0000	1,177,859	1.6486	1,941,791	36.5%
12/31/2007	4,135,001	1.2160	5,028,219	983,187	1.0000	983,187	1.4987	1,473,508	29.3%
12/31/2008	4,106,596	1.1735	4,818,928	1,727,926	1.0100	1,745,205	1.3625	2,377,773	49.3%
12/31/2009	4,220,067	1.1153	4,706,560	1,196,555	1.0403	1,244,776	1.2386	1,541,780	32.8%
(11.1) Projected Non-Wind/Hail or Catastrophe Loss Ratio = Weighted Avg of (10) by (4)									34.2%
(11.2) Projected Wind/Hail Loss Ratio									47.7%
(11.3) Non-Wind/Hail Catastrophe Loss Ratio									1.7%
(11.4) Liability Loss Ratio									2.0%
(12) Total Projected Loss Ratio = (11.1) + (11.2) + (11.3) + (11.4)									85.7%
(13) Projected LAE Ratio to Losses									16.0%
(14) Total Projected Loss and LAE Ratio = (12) * [1+(13)]									99.4%
(15) Trended Permissible Loss Ratio									66.8%
(16) Dwelling Exposures									25,003
(17) Credibility of Experience Period w/ Full Credibility = 40,000 Exposures									0.791
(18) Credibility Weighted Loss & LAE Ratio = (14)*(17) + (15)* [1- (17)]									92.5%
(19.1) Projected Variable Expense Ratio									20.5%
(19.2) Projected Fixed Expense Ratio									4.3%
(19.3) Profit Provision									11.9%
(20) Indicated Rate Level Change = [(18) + (19.2)]/[1 - (19.1) - (19.3)] - 1									43.2%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Rate Level Indications
Forms SH-4 & SH-6

Year Ending	Earned Premium at Current Rate Level	Premium Trend	Earned Premium at Current Rate Level (Incl. Premium Trend)	Undeveloped Accident Year Losses	Loss Development Factor	Developed Accident Year Losses	Loss Cost Trend	Projected Losses	Projected Loss Ratio
(1)	(2)	(3)	(4) = (2) * (3)	(5)	(6)	(7)=(5)*(6)	(8)	(9) = (7) * (8)	(10) = (9) / (4)
12/31/2005	57,434	0.9515	54,647	24,629	1.0000	24,629	1.3563	33,403	61.1%
12/31/2006	57,566	0.9485	54,602	3,906	1.0000	3,906	1.2917	5,045	9.2%
12/31/2007	57,283	1.0202	58,440	5,624	1.0000	5,624	1.2302	6,919	11.8%
12/31/2008	61,788	1.0146	62,689	4,794	1.0100	4,842	1.1716	5,673	9.0%
12/31/2009	66,447	0.9797	65,098	35,045	1.0302	36,103	1.1158	40,284	61.9%

- (11) Projected Loss Ratio = Weighted Avg of (10) by (4) 30.9%
- (12) Projected LAE Ratio to Losses 16.0%
- (13) Total Projected Loss and LAE Ratio = (11) * [1+(12)] 35.9%
- (14) Trended Permissible Loss Ratio 67.1%
- (15) Contents Exposures 1,951
- (16) Credibility of Experience Period w/ Full Credibility = 40,000 Exposures 0.221
- (17) Credibility Weighted Loss & LAE Ratio = (13)*(16) + (13)* [1- (16)] 60.2%
- (18.1) Projected Variable Expense Ratio 20.5%
- (18.2) Projected Fixed Expense Ratio 4.3%
- (18.3) Profit Provision 11.9%
- (19) Indicated Rate Level Change = [(17) + (18.2)]/[1 - (18.1) - (18.3)] - 1 -4.6%

American National Property and Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Zone Loss Ratios - Form SH-3

Zone	Trended Ultimate Credibility Weighted Loss & LAE Ratios					
	2005	2006	2007	2008	2009	Total
001	89.8%	108.1%	95.3%	112.6%	97.1%	100.4%
002	78.0%	88.2%	82.0%	94.5%	85.3%	85.4%
003	84.5%	100.5%	103.1%	111.0%	95.4%	98.4%
004	79.9%	104.2%	92.5%	105.6%	103.7%	96.7%
005	85.3%	98.0%	90.6%	106.6%	94.5%	94.7%
006	74.2%	77.7%	71.6%	84.2%	73.5%	76.4%
007	92.9%	104.9%	97.9%	113.1%	100.4%	101.6%
008	87.7%	97.1%	96.6%	106.9%	92.5%	95.9%
009	81.6%	91.6%	83.8%	98.0%	87.2%	88.3%
010	72.9%	84.3%	77.6%	92.2%	79.9%	81.2%
012	90.4%	107.1%	95.9%	113.0%	98.5%	100.8%
017	102.5%	112.9%	106.8%	119.7%	113.3%	111.0%
024	101.4%	115.0%	105.2%	126.4%	108.2%	111.0%
026	85.6%	95.0%	89.1%	100.7%	90.3%	92.0%
033	78.4%	92.6%	83.0%	93.7%	89.2%	87.1%
037	96.1%	109.8%	99.7%	132.3%	103.4%	107.8%
038	81.3%	90.8%	87.7%	107.8%	85.7%	90.4%
039	89.8%	103.3%	95.3%	114.1%	97.8%	99.9%
040	104.0%	114.6%	108.8%	120.4%	109.2%	111.2%
041	90.5%	97.5%	94.6%	114.2%	93.5%	97.8%
042	90.5%	102.5%	98.0%	111.1%	97.0%	99.6%
043	94.1%	113.2%	98.9%	116.2%	101.4%	104.6%
044	92.3%	101.5%	94.6%	107.7%	97.7%	98.6%

American National Property and Casualty Company
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 Arkansas
 Premium Trend - APAR

<u>Form (1)</u>	<u>Year Ending (2)</u>	<u>Avg. Policy Amount Relativity (3)</u>	<u>4-Year Exponential Fit (4)</u>	<u>Fitted Annual Change (5)</u>	<u>Selected TAF Annual Change (6)</u>	<u>Current Amount Factor (7)</u>	<u>Trended Amount Factor (8)</u>	<u>Standardized Cost Factor (9)</u>	<u>Premium Trend (10)=(7)*(8)*(9)</u>
			1.0152						
3 & 7	12/31/2005	1.0303	1.0728	4.26%	4.26%	1.2251	1.0980	1.0315	1.3875
	12/31/2006	1.1116	1.1184	4.26%		1.1354	1.0980	1.0315	1.2860
	12/31/2007	1.1755	1.1660	4.26%		1.0737	1.0980	1.0315	1.2160
	12/31/2008	1.2182	1.2156	4.26%		1.0361	1.0980	1.0315	1.1735
	12/31/2009	1.2622	1.2673	4.26%		1.0000	1.0980	1.0157	1.1153
			1.3213	4.26%					
			1.1362						
4 & 6	12/31/2005	1.1897	1.1695	-0.91%	-0.91%	0.9712	0.9797	1.0000	0.9515
	12/31/2006	1.1934	1.1588	-0.91%		0.9682	0.9797	1.0000	0.9485
	12/31/2007	1.1096	1.1483	-0.91%		1.0413	0.9797	1.0000	1.0202
	12/31/2008	1.1157	1.1378	-0.91%		1.0356	0.9797	1.0000	1.0146
	12/31/2009	1.1554	1.1275	-0.91%		1.0000	0.9797	1.0000	0.9797
			1.1172	-0.91%					

American National Property and Casualty Company
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Loss Trends

Dwelling Forms

Year	Current Cost Factor	Trended Cost Factor	Loss Trend Factor
2005	1.4641	1.2386	1.8134
2006	1.3310	1.2386	1.6486
2007	1.2100	1.2386	1.4987
2008	1.1000	1.2386	1.3625
2009	1.0000	1.2386	1.2386

Contents Forms

Year	Current Cost Factor	Trended Cost Factor	Loss Trend Factor
2005	1.2155	1.1158	1.3563
2006	1.1576	1.1158	1.2917
2007	1.1025	1.1158	1.2302
2008	1.0500	1.1158	1.1716
2009	1.0000	1.1158	1.1158

American National Property and Casualty Company
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Homeowners
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ISS Fast Track - Arkansas Data

Dwelling Forms

<u>Year</u>	<u>Month</u>	<u>Frequency</u>	<u>% Change</u>	<u>Severity</u>	<u>% Change</u>	<u>Pure Prem</u>	<u>% Change</u>
2005	3	4.18		7,059		294.88	
2005	6	5.27		5,299		279.53	
2005	9	5.52		5,276		291.40	
2005	12	5.17		5,621		290.33	
2006	3	5.24	25.33%	5,707	-19.14%	298.82	1.34%
2006	6	5.43	3.00%	5,811	9.66%	315.71	12.94%
2006	9	5.48	-0.75%	5,820	10.32%	319.07	9.50%
2006	12	5.37	3.95%	5,994	6.63%	321.80	10.84%
2007	3	5.44	3.99%	6,093	6.76%	331.75	11.02%
2007	6	5.20	-4.24%	6,278	8.03%	326.60	3.45%
2007	9	5.05	-7.87%	6,611	13.59%	333.92	4.65%
2007	12	5.07	-5.65%	6,609	10.27%	334.80	4.04%
2008	3	5.09	-6.55%	6,657	9.25%	338.68	2.09%
2008	6	5.46	5.05%	6,826	8.73%	373.03	14.22%
2008	9	5.77	14.33%	6,943	5.02%	400.94	20.07%
2008	12	5.83	15.01%	7,465	12.95%	434.93	29.91%
2009	3	6.14	20.64%	7,576	13.81%	465.02	37.30%
2009	6	6.14	12.35%	7,965	16.69%	489.06	31.10%
2009	9	6.62	14.57%	8,202	18.13%	542.66	35.35%
2009	12	6.92	18.84%	7,946	6.44%	550.15	26.49%

<u>Exponential Fit</u>	<u>Frequency</u>	<u>Annual Percent Change Severity</u>	<u>Pure Prem</u>
20-point	5.71%	8.21%	14.39%
16-point	6.33%	10.54%	17.54%
12-point	11.21%	11.33%	23.81%
8-point	17.29%	13.10%	32.65%
4-point	19.06%	7.14%	27.55%

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<u>Year</u>	<u>Month</u>	<u>Frequency</u>	<u>% Change</u>	<u>Severity</u>	<u>% Change</u>	<u>Pure Prem</u>	<u>% Change</u>
2005	3	2.27		5,787		131.16	
2005	6	2.41		4,343		104.86	
2005	9	2.45		4,485		109.92	
2005	12	2.39		4,783		114.32	
2006	3	2.48	9.32%	4,468	-22.79%	110.71	-15.60%
2006	6	2.42	0.33%	4,607	6.08%	111.60	6.43%
2006	9	2.35	-4.10%	4,346	-3.09%	102.15	-7.07%
2006	12	2.32	-2.91%	4,134	-13.57%	95.94	-16.08%
2007	3	2.23	-10.19%	3,895	-12.83%	86.67	-21.71%
2007	6	2.22	-8.36%	3,807	-17.37%	84.51	-24.27%
2007	9	2.42	3.01%	3,920	-9.81%	94.90	-7.09%
2007	12	2.53	9.11%	3,713	-10.18%	94.02	-1.99%
2008	3	2.56	15.07%	3,859	-0.92%	98.81	14.01%
2008	6	2.58	16.07%	4,002	5.12%	103.12	22.01%
2008	9	2.63	8.43%	3,867	-1.35%	101.52	6.97%
2008	12	2.64	4.38%	4,113	10.76%	108.70	15.61%
2009	3	2.68	4.64%	4,090	6.00%	109.59	10.92%
2009	6	2.70	4.81%	3,879	-3.07%	104.75	1.59%
2009	9	2.67	1.68%	4,265	10.30%	113.85	12.15%
2009	12	2.67	0.92%	4,419	7.44%	117.87	8.43%

<u>Exponential Fit</u>	<u>Frequency</u>	<u>Annual Percent Change Severity</u>	<u>Pure Prem</u>
20-point	3.30%	-3.88%	-0.71%
16-point	4.47%	-1.14%	3.27%
12-point	6.97%	4.25%	11.51%
8-point	2.71%	6.24%	9.12%
4-point	-0.99%	13.95%	12.82%

American National Property and Casualty Company
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Dwelling Forms

<u>Year</u>	<u>Month</u>	<u>Frequency</u>	<u>% Change</u>	<u>Severity</u>	<u>% Change</u>	<u>Pure Prem</u>	<u>% Change</u>
2005	3	4.09		7,087		290.18	
2005	6	4.38		6,485		284.12	
2005	9	4.73		6,086		288.09	
2005	12	4.41		6,243		275.60	
2006	3	4.36	6.43%	6,422	-9.38%	279.87	-3.55%
2006	6	4.34	-0.96%	6,603	1.82%	286.51	0.84%
2006	9	4.30	-9.20%	6,798	11.70%	292.20	1.42%
2006	12	4.33	-1.94%	6,649	6.50%	287.81	4.43%
2007	3	4.43	1.72%	6,671	3.87%	295.72	5.66%
2007	6	4.55	4.96%	6,703	1.52%	305.30	6.56%
2007	9	4.73	10.02%	6,773	-0.36%	320.31	9.62%
2007	12	4.73	9.24%	6,891	3.64%	325.86	13.22%
2008	3	4.72	6.44%	7,070	5.98%	333.59	12.81%
2008	6	4.74	4.03%	7,192	7.29%	340.74	11.61%
2008	9	4.81	1.75%	7,286	7.56%	350.57	9.45%
2008	12	4.81	1.75%	7,477	8.50%	359.76	10.40%
2009	3	4.87	3.26%	7,633	7.97%	371.92	11.49%
2009	6	4.86	2.56%	7,808	8.57%	379.41	11.35%
2009	9	4.78	-0.59%	8,148	11.83%	389.76	11.18%
2009	12	4.85	0.78%	7,946	6.27%	385.29	7.10%

<u>Exponential Fit</u>	<u>Frequency</u>	<u>Annual Percent Change Severity</u>	<u>Pure Prem</u>
20-point	2.98%	4.86%	7.98%
16-point	3.68%	6.13%	10.03%
12-point	2.61%	7.80%	10.61%
8-point	1.34%	8.28%	9.74%
4-point	-1.21%	6.75%	5.46%

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<u>Year</u>	<u>Month</u>	<u>Frequency</u>	<u>% Change</u>	<u>Severity</u>	<u>% Change</u>	<u>Pure Prem</u>	<u>% Change</u>
2005	3	2.38		3,529		83.85	
2005	6	2.25		3,858		86.77	
2005	9	2.46		3,704		91.09	
2005	12	2.38		4,345		103.21	
2006	3	2.39	0.38%	4,552	29.00%	108.58	29.49%
2006	6	2.40	6.83%	4,369	13.25%	104.97	20.98%
2006	9	2.37	-3.70%	4,323	16.72%	102.39	12.39%
2006	12	2.34	-1.59%	4,034	-7.16%	94.30	-8.63%
2007	3	2.31	-3.18%	3,896	-14.41%	89.98	-17.13%
2007	6	2.30	-4.26%	3,862	-11.61%	88.84	-15.37%
2007	9	2.32	-2.08%	3,859	-10.72%	89.50	-12.58%
2007	12	2.33	-0.25%	3,794	-5.94%	88.47	-6.18%
2008	3	2.30	-0.57%	3,853	-1.11%	88.48	-1.67%
2008	6	2.28	-1.10%	3,863	0.04%	87.89	-1.06%
2008	9	2.29	-1.26%	3,903	1.12%	89.37	-0.15%
2008	12	2.28	-2.11%	4,227	11.42%	96.49	9.07%
2009	3	2.30	0.07%	4,328	12.33%	99.45	12.40%
2009	6	2.30	1.02%	4,297	11.24%	98.76	12.37%
2009	9	2.26	-1.33%	4,359	11.70%	98.50	10.22%
2009	12	2.24	-1.89%	4,210	-0.40%	94.29	-2.28%

<u>Exponential Fit</u>	<u>Frequency</u>	<u>Annual Percent Change</u>	
		<u>Severity</u>	<u>Pure Prem</u>
20-point	-1.12%	1.42%	0.28%
16-point	-1.41%	0.01%	-1.40%
12-point	-0.90%	5.23%	4.28%
8-point	-0.91%	7.60%	6.61%
4-point	-3.70%	-2.69%	-6.29%

American National Property and Casualty Company
 American National General Insurance Company
 Homeowners
 Arkansas
 Resulting Weighted Trend Factors

Homeowners - Dwelling Forms

5 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	5.71%	0.0051	14.5%	8.21%	0.0050	24.2%	14.39%	0.0058	17.6%
Industry - CW	2.98%	0.0009	85.5%	4.86%	0.0016	75.8%	7.98%	0.0012	82.4%
Weighted Trend			3.37%			5.67%			9.10%

4 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	6.33%	0.0038	8.6%	10.54%	0.0004	48.2%	17.54%	0.0048	4.4%
Industry - CW	3.68%	0.0004	91.4%	6.13%	0.0004	51.8%	10.03%	0.0002	95.6%
Weighted Trend			3.90%			8.25%			10.36%

3 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	11.21%	0.0022	9.6%	11.33%	0.0005	22.5%	23.81%	0.0027	5.3%
Industry - CW	2.61%	0.0002	90.4%	7.80%	0.0001	77.5%	10.61%	0.0002	94.7%
Weighted Trend			3.44%			8.59%			11.31%

2 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	17.29%	0.0003	16.8%	13.10%	0.0005	23.1%	32.65%	0.0004	26.0%
Industry - CW	1.34%	0.0001	83.2%	8.28%	0.0002	76.9%	9.74%	0.0001	74.0%
Weighted Trend			4.01%			9.39%			15.68%

1 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	19.06%	0.0003	12.9%	7.14%	0.0006	35.2%	27.55%	0.0005	20.3%
Industry - CW	-1.21%	0.0001	87.1%	6.75%	0.0003	64.8%	5.46%	0.0001	79.7%
Weighted Trend			1.41%			6.89%			9.95%

Selected for CCF	10.00%	Selected for TCF	10.00%
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American National Property and Casualty Company
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Resulting Weighted Trend Factors

Homeowners - Contents Forms

5 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	3.30%	0.0017	15.0%	-3.88%	0.0071	38.0%	-0.71%	0.0108	32.6%
Industry - CW	-1.12%	0.0003	85.0%	1.42%	0.0044	62.0%	0.28%	0.0052	67.4%
Weighted Trend			-0.46%			-0.59%			-0.04%

4 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	4.47%	0.0017	4.5%	-1.14%	0.0039	47.9%	3.27%	0.0076	36.4%
Industry - CW	-1.41%	0.0001	95.5%	0.01%	0.0036	52.1%	-1.40%	0.0044	63.6%
Weighted Trend			-1.14%			-0.54%			0.30%

3 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	6.97%	0.0011	4.8%	4.25%	0.0011	44.7%	11.51%	0.0010	51.4%
Industry - CW	-0.90%	0.0001	95.2%	5.23%	0.0009	55.3%	4.28%	0.0010	48.6%
Weighted Trend			-0.52%			4.79%			8.00%

2 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	2.71%	0.0001	37.3%	6.24%	0.0011	44.7%	9.12%	0.0007	63.0%
Industry - CW	-0.91%	0.0001	62.7%	7.60%	0.0009	55.3%	6.61%	0.0012	37.0%
Weighted Trend			0.44%			6.99%			8.19%

1 Year Trend									
Source	Frequency			Severity			Pure Premium		
	Trend	Variance	Weight	Trend	Variance	Weight	Trend	Variance	Weight
Industry - AR	-0.99%	0.0000	45.1%	13.95%	0.0014	9.7%	12.82%	0.0011	12.2%
Industry - CW	-3.70%	0.0000	54.9%	-2.69%	0.0001	90.3%	-6.29%	0.0001	87.8%
Weighted Trend			-2.48%			-1.08%			-3.96%

Selected for CCF	5.00%	Selected for TCF	5.00%
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**American National Property and Casualty Company
American National General Insurance Company
Homeowners
Companywide Excluding Texas - Excluding Catastrophes
Loss Development Factors**

Forms SH-3 & SH-7

Incurred Losses - Direct

Accident Year	12 Months	24 Months	36 Months	48 Months	60 Months	72 Months	84 Months
1995		18,687,836	18,796,144	18,845,788	18,842,029	18,816,131	18,816,769
1996	22,098,258	24,123,276	24,230,023	24,167,809	24,218,048	24,258,709	24,246,612
1997	21,762,158	23,312,333	23,412,690	23,534,691	23,319,224	23,570,123	23,731,966
1998	28,991,254	31,258,615	31,584,227	26,890,055	31,342,980	31,265,736	31,166,318
1999	31,140,854	34,216,706	34,460,657	34,078,190	33,645,696	33,880,774	33,799,482
2000	37,174,356	41,905,281	42,507,431	43,002,517	43,762,039	43,616,546	43,585,861
2001	47,552,626	51,536,680	52,266,438	52,564,960	52,637,976	52,562,135	52,483,038
2002	53,509,904	55,115,460	55,183,879	55,096,893	55,133,814	54,989,997	55,034,348
2003	56,123,680	58,759,642	59,405,663	59,424,538	59,282,880	59,263,199	59,487,484
2004	59,236,032	63,146,947	63,995,941	64,106,752	64,055,727	63,090,922	
2005	59,672,456	61,890,310	63,132,350	63,286,969	63,301,258		
2006	64,732,609	64,922,811	65,359,637	65,204,991			
2007	71,269,138	73,976,917	73,802,579				
2008	80,083,091	81,598,728					
2009	83,450,210						

Loss Development Factors

Accident Year	12 to 24	24 to 36	36 to 48	48 to 60	60 to 72	72 to 84
1995			1.0058	1.0026	0.9998	1.0000
1996	1.0916	1.0044	0.9974	1.0021	1.0017	0.9995
1997	1.0712	1.0043	1.0052	0.9908	1.0108	1.0069
1998	1.0782	1.0104	0.8514	1.1656	0.9975	0.9968
1999	1.0988	1.0071	0.9889	0.9873	1.0070	0.9976
2000	1.1273	1.0144	1.0116	1.0177	0.9967	0.9993
2001	1.0838	1.0142	1.0057	1.0014	0.9986	0.9985
2002	1.0300	1.0012	0.9984	1.0007	0.9974	1.0008
2003	1.0470	1.0110	1.0003	0.9976	0.9997	1.0038
2004	1.0660	1.0134	1.0017	0.9992	0.9849	
2005	1.0372	1.0201	1.0024	1.0002		
2006	1.0029	1.0067	0.9976			
2007	1.0380	0.9976				
2008	1.0189					
Average	1.0608	1.0085	0.9886	1.0148	0.9993	1.0004
3-pt. Average	1.0199	1.0081	1.0006	0.9990	0.9940	1.0010
2-pt. Average	1.0285	1.0022	1.0000	0.9997	0.9923	1.0023
Selected	1.0300	1.0100	1.0000	1.0000	1.0000	1.0000
12 to Ultimate =		1.0403				
24 to Ultimate =		1.0100				
36 to Ultimate =		1.0000				
48 to Ultimate =		1.0000				
60 to Ultimate =		1.0000				

**American National Property and Casualty Company
American National General Insurance Company
Homeowners
Companywide Excluding Texas - Excluding Catastrophes
Loss Development Factors**

Forms SH-4 & SH-6

Incurred Losses - Direct

Accident Year	12 Months	24 Months	36 Months	48 Months	60 Months	72 Months	84 Months
1995		642,356	644,345	644,540	644,304	663,304	663,064
1996	681,534	694,008	684,008	690,120	690,120	690,120	690,120
1997	884,647	895,350	929,329	930,690	903,941	910,483	908,067
1998	1,055,677	1,086,488	1,086,814	921,804	1,088,614	1,088,614	1,093,287
1999	1,002,275	1,026,919	1,011,855	1,010,555	1,008,593	1,008,593	1,008,593
2000	1,046,604	1,060,909	1,063,476	1,076,038	1,091,932	1,079,357	1,079,357
2001	1,355,153	1,486,858	1,481,035	1,490,492	1,490,928	1,490,828	1,490,828
2002	1,485,090	1,417,711	1,786,950	1,792,535	1,791,366	1,789,291	1,791,366
2003	1,485,630	1,270,659	1,285,017	1,282,378	1,293,711	1,374,711	1,315,059
2004	1,661,986	1,476,915	1,620,599	1,619,049	1,618,906	1,554,083	
2005	1,557,032	1,422,000	1,395,159	1,390,034	1,380,085		
2006	1,923,006	2,057,238	2,037,949	2,006,093			
2007	2,004,030	2,037,781	2,090,393				
2008	1,886,553	1,779,965					
2009	1,780,190						

Loss Development Factors

Accident Year	12 to 24	24 to 36	36 to 48	48 to 60	60 to 72	72 to 84
1995		1.0031	1.0003	0.9996	1.0295	0.9996
1996	1.0183	0.9856	1.0089	1.0000	1.0000	1.0000
1997	1.0121	1.0380	1.0015	0.9713	1.0072	0.9973
1998	1.0292	1.0003	0.8482	1.1810	1.0000	1.0043
1999	1.0246	0.9853	0.9987	0.9981	1.0000	1.0000
2000	1.0137	1.0024	1.0118	1.0148	0.9885	1.0000
2001	1.0972	0.9961	1.0064	1.0003	0.9999	1.0000
2002	0.9546	1.2604	1.0031	0.9993	0.9988	1.0012
2003	0.8553	1.0113	0.9979	1.0088	1.0626	0.9566
2004	0.8886	1.0973	0.9990	0.9999	0.9600	
2005	0.9133	0.9811	0.9963	0.9928		
2006	1.0698	0.9906	0.9844			
2007	1.0168	1.0258				
2008	0.9435					
Average	0.9875	1.0290	0.9880	1.0151	1.0047	0.9954
3-pt. Average	1.0100	0.9992	0.9932	1.0005	1.0071	0.9859
2-pt. Average	0.9802	1.0082	0.9904	0.9964	1.0113	0.9789
Selected	1.0200	1.0100	1.0000	1.0000	1.0000	1.0000
12 to Ultimate =		1.0302				
24 to Ultimate =		1.0100				
36 to Ultimate =		1.0000				
48 to Ultimate =		1.0000				
60 to Ultimate =		1.0000				

American National Property and Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Wind/Hail Loss Ratio

Year	Modelled Catastrophe Wind/Hail Loss Ratio	Non-Catastrophe Wind/Hail Loss Ratio	Overall Wind/Hail Loss Ratio
001	30.5%	13.0%	43.5%
002	28.9%	12.3%	41.2%
003	21.9%	9.3%	31.2%
004	27.0%	11.4%	38.4%
005	28.1%	11.9%	40.0%
006	22.3%	9.5%	31.8%
007	33.5%	14.2%	47.7%
008	34.9%	14.8%	49.7%
009	29.0%	12.3%	41.3%
010	22.8%	9.7%	32.5%
012	29.7%	12.6%	42.4%
017	42.4%	18.0%	60.4%
024	31.9%	13.6%	45.5%
026	35.0%	14.9%	49.9%
033	30.0%	12.7%	42.7%
037	37.1%	15.8%	52.9%
038	31.1%	13.2%	44.3%
039	28.9%	12.3%	41.1%
040	44.8%	19.0%	63.8%
041	27.4%	11.7%	39.1%
042	30.1%	12.8%	42.9%
043	31.0%	13.2%	44.2%
044	38.5%	16.4%	54.9%
Total	33.5%	14.2%	47.7%

American National Property and Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas, Colorado, Kansas, Missouri, Nebraska, and Oklahoma
Non Wind/Hail Catastrophe Pure Premium

<u>Year</u>	<u>Frequency</u>	<u>Average Severity</u>	<u>Loss Development Factor</u>	<u>Ultimate Average Severity</u>	<u>Exposure Adjustment Factor</u>	<u>Exposure Trended Ultimate Average Severity</u>
1994	0.0013	\$710	1.0000	\$710	2.6548	\$1,885
1995	0.0021	\$1,291	1.0000	\$1,291	2.5177	\$3,250
1996	0.0062	\$1,801	1.0000	\$1,801	2.4451	\$4,405
1997	0.0013	\$1,251	1.0000	\$1,251	2.1846	\$2,734
1998	0.0013	\$2,169	1.0000	\$2,169	2.1158	\$4,590
1999	0.0020	\$738	1.0000	\$738	2.0425	\$1,508
2000	0.0101	\$1,501	1.0000	\$1,501	1.9664	\$2,952
2001	0.0006	\$933	1.0000	\$933	1.8801	\$1,754
2002	0.0122	\$1,101	1.0000	\$1,101	1.7862	\$1,967
2003	0.0047	\$4,955	1.0000	\$4,955	1.6815	\$8,332
2004	0.0004	\$1,179	1.0000	\$1,179	1.5302	\$1,804
2005	0.0003	\$1,085	1.0000	\$1,085	1.3997	\$1,519
2006	0.0002	\$2,396	1.0000	\$2,396	1.2571	\$3,013
2007	0.0350	\$2,066	1.0000	\$2,066	1.1293	\$2,333
2008	0.0011	\$3,685	1.0100	\$3,722	1.0642	\$3,961
2009	0.0074	\$3,278	1.0403	\$3,410	1.0000	\$3,410
Average	0.0054					\$3,088
Average Pure Premium						\$17

**American National Property and Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Non-Wind/Hail Catastrophe and Section II Loss Ratio**

<u>Year</u>	<u>Per Exposure Non-Wind/Hail Catastrophe Loss Provision</u>	<u>Dwelling Exposures</u>	<u>Total Non-Wind/Hail Catastrophe Loss Provision</u>	<u>Trended Earned Premium</u>	<u>Non-Wind/Hail Catastrophe Loss Ratio</u>
2005	\$17	5,292	89,967	5,889,161	1.5%
2006	\$17	5,111	86,881	5,317,280	1.6%
2007	\$17	4,944	84,045	5,028,219	1.7%
2008	\$17	4,862	82,647	4,818,928	1.7%
2009	\$17	4,794	81,503	4,706,560	1.7%
			<u>425,043</u>	<u>25,760,147</u>	1.7%

<u>Year</u>	<u>Per Exposure Section II Loss Provision</u>	<u>Dwelling Exposures</u>	<u>Total Section II Loss Provision</u>	<u>Trended Earned Premium</u>	<u>Section II Loss Ratio</u>
2005	\$21	5,292	110,977	5,889,161	1.9%
2006	\$21	5,111	107,171	5,317,280	2.0%
2007	\$21	4,944	103,672	5,028,219	2.1%
2008	\$21	4,862	101,947	4,818,928	2.1%
2009	\$21	4,794	100,537	4,706,560	2.1%
			<u>524,303</u>	<u>25,760,147</u>	2.0%

American National Property And Casualty Company
American National General Insurance Company
Arkansas
Homeowners

Companywide Data
Loss Adjustment Expense Factor

Year (1)	Total Incurred Loss Adjustment Expense (2)	Incurred Losses (3)	Loss Adjustment Expense Factor (4) = (2) / (3) + 1
2005	31,307,907	345,885,138	1.091
2006	22,084,358	107,684,884	1.205
2007	18,538,776	93,231,347	1.199
2008	28,445,693	191,482,880	1.149
2009	20,447,649	136,085,573	1.150
Selected			1.160

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Expense and Profit Provisions

	2007	2008	2009	Average	Selected
1) Commission and Brokerage (%WP)	11.4%	12.3%	11.7%	11.8%	11.8%
2) Taxes, Licenses, and Fees (%WP)	2.9%	3.0%	3.0%	3.0%	3.0%
3) Other Acquisition (%EP - Companywide)	4.1%	5.8%	4.4%	4.8%	4.8%
4) General Expense (%EP - Companywide)	0.7%	1.2%	0.8%	0.9%	0.9%
5) Variable Expense Ratio	19.1%	22.3%	19.9%	20.5%	20.5%
6) Fixed Expense Ratio					4.3%
7) Underwriting Profit Ratio (Reflects Investment Income)					11.9%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Estimated Effect Of Investment Income
On Unearned Premium & Loss Reserves

A. Unearned Premium Reserve

1. Direct Earned Premium For Calendar Year Ended 12-31-09	3,769,098
2. Mean Unearned Premium Reserve	3,191,099
3. Deduction for Prepaid Expenses	
Commission and Brokerage Expense	11.8%
Taxes, Licenses, and Fees	3.0%
50% of Other Acquisition Expenses	2.4%
50% of Company Operating Expenses	0.5%
Total	17.7%
4. (Mean Unearned Premium Reserve) X (Total Prepaid Ded.)	563,229
5. Tax on Unearned Premium Reserve (Line 2 x .20 x .35)	223,377
6. Net Subject to Investment	2,404,493

B. Delayed Remissions of Premium (Agents' Balances)

1. Direct Earned Premium	3,769,098
2. Average Agents' Balances	0.1347
3. Delayed Premiums	507,592

C. Loss Reserve

1. Direct Earned Premium		3,769,098
2. Expected Incurred Losses And Loss Adjustment :	67.6%	2,547,910
3. Expected Mean Loss Reserves		803,137
4. Tax on Loss & LAE Reserves discount (Line 3 x (1 - Avg. Disc. Factor) x .35)		20,525
5. Adjusted Mean Loss Reserves		782,612

D. Net Subject to Investment 2,679,513E. Risk Free Rate of Return 1.5%F. Investment Earning on Net Subject to Investment 40,193G. Average Rate of Return as a Percent of Direct Earned Premium 1.07%H. Average Rate of Return as a Percent of Direct Earned Premium
After Federal Income Taxes (Corporate Tax Rate of 26.4%) 0.78%I. After-Tax Underwriting Profit Provision Needed in Order to
Obtain After-Tax Target Operating Profit of: 8.5% 7.70%J. Provision for Pre-Tax Underwriting Profit (Line I/0.65) 11.85%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Estimated Effect Of Investment Income
On Unearned Premium & Loss Reserves
Factor Calculations

I. Percent of Net Earned Premium to Direct Earned Premium

A) Companywide Homeowners Direct Premiums Earned 2009	245,367,000
B) Companywide Homeowners Net Premiums Earned 2009	219,485,000
C) (Net Premiums Earned) / (Direct Premiums Earned)	0.8945

II. Mean Unearned Premium Reserve Factor

A) Net Earned Premium For 2009	3,371,523
B) Net Unearned Premium Reserve December 31, 2008	2,772,749
C) Net Unearned Premium Reserve December 31, 2009	2,936,236
D) Unearned Premium to Earned Premium	0.8466

III. Average Agents' Balances Factor

A) Companywide Homeowners Agents' Balances Dec. 31, 2008	27,829,000
B) Companywide Homeowners Agents' Balances Dec. 31, 2009	31,288,000
C) Net Earned Premium Percent Of Companywide	1.54%
D) Average Agents' Balances	454,050
E) Agents' Balances to Earned Premium	0.1347

IV. Expected Mean Loss Reserves Factor

A) Incurred Losses & LAE 2008	13,405,916
B) Incurred Losses & LAE 2009	3,003,920
C) Loss & LAE Reserves December 31, 2007	793,732
D) Loss & LAE Reserves December 31, 2008	2,315,983
E) Loss & LAE Reserves December 31, 2009	774,722
F) Mean Loss & LAE Reserve 2008	1,554,858
G) Mean Loss & LAE Reserve 2009	1,545,353
H) Ratio of 2008 Mean Loss & LAE Res. to 2008 Inc. Losses	0.1160
I) Ratio of 2009 Mean Loss & LAE Res. to 2009 Inc. Losses	0.5144
J) Average Loss & LAE Res. To Inc. Loss	0.3152

American National Property And Casualty Company
American National General Insurance Company
Average Federal Tax Rate on Investment Income

	Investment Income*	Distribution	Federal Income Tax Rate**	Investment Income*	Distribution	Federal Income Tax Rate**	Investment Income*	Distribution	Federal Income Tax Rate**
	2007			2008			2009		
Bonds (Taxable)	\$25,877,014	0.586	0.350	\$23,880,983	0.568	0.350	\$21,974,885	0.575	0.350
Bonds (Tax Exempt) **	8,231,988	0.186	0.053	9,952,635	0.237	0.053	9,667,078	0.253	0.053
Stocks (Unaffiliated) ***	4,313,838	0.098	0.142	4,081,759	0.097	0.142	3,246,469	0.085	0.142
Other (Net of Depreciation)	5,766,726	0.130	0.350	4,154,934	0.099	0.350	3,353,127	0.088	0.350
Total	\$44,189,566	1.000	0.274	\$42,070,311	1.000	0.259	\$38,241,559	1.000	0.257
Weighted Federal Tax Rate on Investment Income For 2007 through 2009									0.264

*From Annual Statement Page 6, Part 1

**Tax rate on bonds (tax exempt) reflects 15% taxable at current rate

***Tax rate on stock dividends reflects credit for dividends received [(1.00 - .70) x .35] and 15% of 70% being taxable

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Zone Changes

Description of Zone Change

Zone 2 to 1: Counties of: Newton and Searcy
Zone 3 to 2: Counties of: Clay, Greene, Jackson, Lawrence
Zone 5 to 3: Counties of: Prairie, White, and Woodruff
Zone 6 to 4: Nevada County
Zone 7 to 4: Counties of: Hempstead, Lafayette, and Miller
Zone 6 to 5: Jefferson County
Zone 4 to 6: Clark County
Zone 7 to 6: Counties of: Bradley, Columbia, and Union
Zone 6 to 7: Counties of: Chicot and Desha
Zone 3 to 10: Mississippi County
Zone 4 to 12: Perry County
Zone 5 to 12: Remainder of Lonoke County (Excluding Zone 43)
Zone 2 to 38: Counties of: Franklin Johnson Logan Yell
Zone 4 to 39: Counties of Grant and Hot Springs
Zone 8 to 40: Zip Code 71909 in Garland and Saline Counties (Hot Springs Village)
Zone 12 to 41: Pulaski Zip Codes: (Little Rock)
Zone 12 to 42: Pulaski Zip Codes: (North Little Rock)
Zone 12 to 43: Pulaski Zip Codes: (Jacksonville)
Zone 5 to 43: Lonoke Zip Codes: (Cabot)
Zone 26 to 44: Saline Zip Codes: (Benton)

American National Property And Casualty Company
Homeowners
Arkansas
Impact of All Rating Factors Except Base Rate

Form SH-3 Change Summary

Protection Class Relativity Change	-1.9%
Policy Amount Factor Change	-1.0%
Deductible Factor Change	1.0%
Utility/Roof Factor Change	2.3%
Claim Free Plus Rule Change	9.3%
Base Rate Change	14.2%
<hr/> Total Form SH-3 Change	<hr/> 25.4%

American National Property And Casualty Company
Homeowners
Arkansas
Rates - Form SH-3

All Peril - PC 1 - Frame - \$150,000 Cov. A

Zone	Present Base Rate	Present Relativity	Proposed Relativity	Relativity Change
001	2,151	0.8981	0.8405	-6.4%
002to001	1,653	0.6902	0.8405	21.8%
002	1,653	0.6902	0.7774	12.6%
003to002	2,872	1.1992	0.7774	-35.2%
003	2,872	1.1992	1.4133	17.9%
005to003	2,578	1.0764	1.4133	31.3%
004	1,981	0.8271	1.0224	23.6%
006to004	2,295	0.9582	1.0224	6.7%
007to004	2,023	0.8447	1.0224	21.0%
005	2,578	1.0764	1.0560	-1.9%
006to005	2,295	0.9582	1.0560	10.2%
006	2,295	0.9582	1.0276	7.2%
004to006	1,981	0.8271	1.0276	24.2%
007to006	2,023	0.8447	1.0276	21.7%
007	2,023	0.8447	1.0767	27.5%
006to007	2,295	0.9582	1.0767	12.4%
008	1,790	0.7474	0.9528	27.5%
009	2,395	1.0000	1.0000	0.0%
010	2,763	1.1537	1.2350	7.1%
003to010	2,872	1.1992	1.2350	3.0%
012	2,451	1.0234	1.1755	14.9%
004to012	1,981	0.8271	1.1755	42.1%
005to012	2,578	1.0764	1.1755	9.2%
017	1,700	0.7098	0.8377	18.0%
024	2,025	0.8455	1.0679	26.3%
026	1,884	0.7866	1.0028	27.5%
033	2,440	1.0188	1.0935	7.3%
037	1,753	0.7319	0.8066	10.2%
002to038	1,653	0.6902	0.7810	13.2%
004to039	1,981	0.8271	1.0544	27.5%
008to040	1,790	0.7474	0.7134	-4.5%
012to041	2,451	1.0234	1.1503	12.4%
012to042	2,451	1.0234	1.0727	4.8%
012to043	2,451	1.0234	1.0699	4.5%
005to043	2,578	1.0764	1.0699	-0.6%
026to044	1,884	0.7866	1.0028	27.5%

American National Property And Casualty Company
Homeowners
Arkansas
Overall Summary - Form SH-3

Zone	Count	Current Average Premium	Proposed Average Premium	Premium Change
001	241	1,128	1,209	7.2%
002	91	1,127	1,315	16.6%
003	29	1,208	1,780	47.4%
004	24	921	1,274	38.3%
005	11	930	1,178	26.7%
006	19	1,020	1,305	28.0%
007	0	0	0	0.0%
008	223	1,056	1,467	38.8%
009	1,151	1,075	1,234	14.7%
010	9	1,169	1,446	23.7%
012	16	1,281	1,657	29.3%
017	1,274	827	1,085	31.2%
024	66	921	1,427	55.0%
026	41	929	1,391	49.7%
033	383	936	1,178	25.8%
037	216	757	1,002	32.2%
038	88	877	1,178	34.4%
039	19	1,069	1,590	48.7%
040	31	1,189	1,192	0.3%
041	157	1,214	1,570	29.4%
042	70	1,080	1,326	22.8%
043	30	1,077	1,297	20.4%
044	197	800	1,192	49.0%
Total	4,386	964	1,209	25.4%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Dwelling Forms

Form	Current Differential	Proposed Differential	Differential Change
ANPAC SH-7	1.270	1.170	-7.9%
ANGIC SH-3	0.960	0.960	0.0%

American National Property And Casualty Company
Homeowners
Arkansas
Base Rates - Form SH-4 and SH-6

Form	Present Base Rate	Proposed Base Rate	Base Rate Change
Remainder of State			
SH-4	168	153	-8.9%
SH-6	219	206	-5.9%
Zones 12, 41, 42, and 43			
SH-4	208	189	-9.1%
SH-6	271	255	-5.9%

American National General Insurance Company
Homeowners
Arkansas
Contents Forms

Form	Current Differential	Proposed Differential	Differential Change
		All Peril	
ANGIC SH-4	0.960	0.960	0.0%
ANGIC SH-6	0.960	0.960	0.0%

Note: Differentials are applied to corresponding ANPAC Contents Homeowners Base Rates

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Protection Class / Construction Type Relativities - Dwelling Forms

All Peril				
Protection Class	Construction Type	Present Relativity	Proposed Relativity	Percent Change
1	Frame/Siding	1.000	1.000	0.0%
2	Frame/Siding	1.000	1.000	0.0%
3	Frame/Siding	1.000	1.000	0.0%
4	Frame/Siding	1.068	1.034	-3.2%
5	Frame/Siding	1.068	1.034	-3.2%
6	Frame/Siding	1.169	1.185	1.4%
7	Frame/Siding	1.404	1.392	-0.9%
8	Frame/Siding	1.950	1.665	-14.6%
9	Frame/Siding	2.677	2.076	-22.5%
10	Frame/Siding	3.980	2.793	-29.8%
1	Brick/Brick Veneer	0.833	0.833	0.0%
2	Brick/Brick Veneer	0.833	0.833	0.0%
3	Brick/Brick Veneer	0.833	0.833	0.0%
4	Brick/Brick Veneer	0.917	0.888	-3.2%
5	Brick/Brick Veneer	0.917	0.888	-3.2%
6	Brick/Brick Veneer	0.993	1.007	1.4%
7	Brick/Brick Veneer	1.336	1.325	-0.8%
8	Brick/Brick Veneer	1.709	1.459	-14.6%
9	Brick/Brick Veneer	2.513	1.949	-22.4%
10	Brick/Brick Veneer	3.581	2.513	-29.8%

**American National Property And Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Policy Amount Relativities**

Dwelling Forms

Coverage Amount	Present Factor 1,000 Ded	Proposed Factor 1,000 Ded	Percent Change
15,000	0.450	0.450	0.0%
20,000	0.469	0.469	0.0%
25,000	0.488	0.488	0.0%
30,000	0.507	0.507	0.0%
35,000	0.525	0.525	0.0%
40,000	0.544	0.544	0.0%
45,000	0.563	0.563	0.0%
50,000	0.582	0.582	0.0%
55,000	0.601	0.601	0.0%
60,000	0.620	0.620	0.0%
65,000	0.639	0.639	0.0%
70,000	0.658	0.658	0.0%
75,000	0.676	0.676	0.0%
80,000	0.695	0.695	0.0%
85,000	0.714	0.714	0.0%
90,000	0.733	0.733	0.0%
95,000	0.751	0.751	0.0%
100,000	0.769	0.769	0.0%
105,000	0.795	0.795	0.0%
110,000	0.821	0.821	0.0%
115,000	0.839	0.839	0.0%
120,000	0.866	0.866	0.0%
125,000	0.893	0.893	0.0%
130,000	0.910	0.910	0.0%
135,000	0.937	0.937	0.0%
140,000	0.955	0.955	0.0%
145,000	0.982	0.982	0.0%
150,000	1.000	1.000	0.0%
155,000	1.029	1.028	-0.1%
160,000	1.048	1.054	0.6%
165,000	1.077	1.081	0.4%
170,000	1.096	1.107	1.0%
175,000	1.126	1.134	0.7%
180,000	1.152	1.161	0.8%
185,000	1.178	1.187	0.8%
190,000	1.204	1.213	0.7%
195,000	1.231	1.239	0.6%
200,000	1.257	1.265	0.6%
205,000	1.282	1.290	0.6%
210,000	1.307	1.315	0.6%
215,000	1.332	1.340	0.6%
220,000	1.357	1.365	0.6%
225,000	1.382	1.390	0.6%

**American National Property And Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Policy Amount Relativities**

Dwelling Forms

Coverage Amount	Present Factor 1,000 Ded	Proposed Factor 1,000 Ded	Percent Change
230,000	1.407	1.414	0.5%
235,000	1.433	1.439	0.4%
240,000	1.458	1.463	0.3%
245,000	1.484	1.485	0.1%
250,000	1.510	1.507	-0.2%
260,000	1.558	1.549	-0.6%
270,000	1.607	1.591	-1.0%
280,000	1.656	1.639	-1.0%
290,000	1.705	1.687	-1.1%
300,000	1.721	1.721	0.0%
350,000	1.942	1.911	-1.6%
400,000	2.196	2.102	-4.3%
450,000	2.457	2.294	-6.6%
500,000	2.735	2.500	-8.6%
550,000	2.985	2.699	-9.6%
600,000	3.235	2.897	-10.4%
650,000	3.487	3.096	-11.2%
700,000	3.688	3.284	-11.0%
750,000	3.936	3.482	-11.5%
800,000	4.181	3.680	-12.0%
850,000	4.428	3.877	-12.4%
900,000	4.675	4.075	-12.8%
950,000	4.921	4.273	-13.2%
1,000,000	5.168	4.470	-13.5%
1,100,000	5.660	4.865	-14.0%
1,200,000	6.152	5.261	-14.5%
1,300,000	6.645	5.656	-14.9%
1,400,000	7.026	6.029	-14.2%
1,500,000	7.511	6.423	-14.5%
1,600,000	7.997	6.816	-14.8%
1,700,000	8.484	7.211	-15.0%
1,800,000	8.972	7.605	-15.2%
1,900,000	9.461	7.999	-15.5%
2,000,000	9.950	8.394	-15.6%
2,100,000	10.439	8.788	-15.8%
2,200,000	10.930	9.183	-16.0%
2,300,000	11.421	9.578	-16.1%
2,400,000	11.914	9.974	-16.3%
2,500,000	12.406	10.369	-16.4%
Each Add'l 5,000	0.025	0.025	-16.4%

**American National Property And Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Proposed Deductible Adjustment Factors**

Policy Amount	Deductible													
	\$500*	\$1000	\$2000	1%	2%	\$3000	\$5000	0.5%	\$500/1% Wind/Hail	\$1000/1% Wind/Hail	\$2000/1% Wind/Hail	\$1000/0.5% Wind/Hail	\$2000/0.5% Wind/Hail	
15,000	12%	0%	-15%	0%	-15%	-29%	-57%	0%	6%	0%	-15%	0%	-15%	
20,000	12%	0%	-15%	0%	-15%	-29%	-56%	0%	6%	0%	-15%	0%	-15%	
25,000	12%	0%	-15%	0%	-15%	-28%	-55%	0%	6%	0%	-15%	0%	-15%	
30,000	11%	0%	-14%	0%	-14%	-28%	-55%	0%	6%	0%	-14%	0%	-14%	
35,000	11%	0%	-14%	0%	-14%	-28%	-54%	0%	6%	0%	-14%	0%	-14%	
40,000	11%	0%	-14%	0%	-14%	-27%	-54%	0%	6%	0%	-14%	0%	-14%	
45,000	11%	0%	-14%	0%	-14%	-27%	-53%	0%	6%	0%	-14%	0%	-14%	
50,000	11%	0%	-14%	0%	-14%	-27%	-53%	0%	6%	0%	-14%	0%	-14%	
55,000	11%	0%	-14%	0%	-14%	-26%	-52%	0%	6%	0%	-14%	0%	-14%	
60,000	11%	0%	-13%	0%	-13%	-26%	-52%	0%	6%	0%	-13%	0%	-13%	
65,000	11%	0%	-13%	0%	-13%	-26%	-52%	0%	6%	0%	-13%	0%	-13%	
70,000	11%	0%	-13%	0%	-13%	-26%	-51%	0%	6%	0%	-13%	0%	-13%	
75,000	11%	0%	-13%	0%	-13%	-26%	-51%	0%	6%	0%	-13%	0%	-13%	
80,000	11%	0%	-13%	0%	-13%	-25%	-51%	0%	6%	0%	-13%	0%	-13%	
85,000	10%	0%	-13%	0%	-13%	-25%	-50%	0%	5%	0%	-13%	0%	-13%	
90,000	10%	0%	-13%	0%	-13%	-25%	-50%	0%	5%	0%	-13%	0%	-13%	
95,000	10%	0%	-13%	0%	-13%	-25%	-50%	0%	5%	0%	-13%	0%	-13%	
100,000	10%	0%	-13%	0%	-13%	-25%	-49%	0%	5%	0%	-13%	0%	-13%	
105,000	10%	0%	-12%	-1%	-14%	-24%	-48%	0%	5%	-1%	-12%	0%	-12%	
110,000	10%	0%	-12%	-2%	-15%	-23%	-47%	0%	4%	-1%	-12%	0%	-12%	
115,000	10%	0%	-12%	-2%	-15%	-23%	-46%	0%	4%	-1%	-12%	0%	-12%	
120,000	10%	0%	-12%	-2%	-15%	-22%	-44%	0%	4%	-1%	-12%	0%	-12%	
125,000	10%	0%	-11%	-3%	-17%	-22%	-43%	0%	4%	-2%	-11%	0%	-11%	
130,000	9%	0%	-11%	-3%	-17%	-21%	-43%	0%	3%	-2%	-11%	0%	-11%	
135,000	9%	0%	-10%	-4%	-18%	-21%	-41%	0%	3%	-2%	-10%	0%	-10%	
140,000	9%	0%	-10%	-4%	-18%	-20%	-40%	0%	3%	-2%	-10%	0%	-10%	
145,000	9%	0%	-10%	-5%	-19%	-20%	-39%	0%	2%	-3%	-10%	0%	-10%	
150,000	9%	0%	-10%	-5%	-19%	-19%	-39%	0%	2%	-3%	-10%	0%	-10%	
155,000	9%	0%	-10%	-5%	-20%	-18%	-37%	0%	2%	-3%	-10%	0%	-10%	
160,000	9%	0%	-9%	-5%	-20%	-18%	-37%	0%	2%	-3%	-9%	0%	-9%	
165,000	8%	0%	-9%	-6%	-21%	-18%	-36%	0%	1%	-3%	-9%	0%	-9%	
170,000	8%	0%	-9%	-6%	-22%	-18%	-35%	0%	1%	-3%	-9%	0%	-9%	
175,000	8%	0%	-9%	-6%	-22%	-17%	-34%	0%	1%	-3%	-9%	0%	-9%	
200,000	8%	0%	-8%	-8%	-24%	-15%	-31%	0%	0%	-4%	-9%	0%	-8%	
250,000	7%	0%	-7%	-10%	-26%	-13%	-26%	-1%	-2%	-5%	-9%	-1%	-7%	
300,000	7%	0%	-6%	-11%	-27%	-11%	-23%	-3%	-2%	-6%	-9%	-2%	-6%	
350,000	7%	0%	-5%	-12%	-28%	-10%	-20%	-4%	-3%	-6%	-9%	-2%	-5%	
400,000	6%	0%	-5%	-13%	-29%	-9%	-18%	-5%	-4%	-7%	-9%	-3%	-5%	
500,000	5%	0%	-4%	-14%	-30%	-8%	-14%	-6%	-5%	-7%	-9%	-3%	-5%	
600,000	5%	0%	-3%	-15%	-31%	-6%	-13%	-6%	-5%	-8%	-9%	-3%	-5%	
750,000	5%	0%	-3%	-16%	-32%	-5%	-11%	-7%	-6%	-8%	-10%	-4%	-5%	
1,000,000	5%	0%	-2%	-16%	-32%	-4%	-9%	-9%	-6%	-8%	-10%	-5%	-6%	
1,500,000	5%	0%	-2%	-17%	-33%	-3%	-6%	-9%	-6%	-9%	-10%	-5%	-6%	
2,000,000	5%	0%	-2%	-17%	-34%	-3%	-5%	-9%	-6%	-9%	-10%	-5%	-6%	
2,500,000	5%	0%	-1%	-17%	-34%	-2%	-3%	-9%	-6%	-9%	-10%	-5%	-6%	

Minimum 0.5% Deductible - \$1,000

Minimum Wind/Hail

\$1,000

\$1,000

\$2,000

\$1,000

\$2,000

Minimum 1% Deductible - \$1,000

Minimum 2% Deductible - \$2,000

Note: The \$500 All Peril Deductible is only available to renewal business that already has this deductible (ANPAC Only)

Note: The Wind/Hail Deductible cannot be less than the All Other Peril Deductible

American National Property And Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Present Deductible Adjustment Factors

Policy Amount	Deductible													
	\$500*	\$1000	\$2000	1%	2%	\$3000	\$5000	0.5%	\$500/1% Wind/Hail	\$1000/1% Wind/Hail	\$2000/1% Wind/Hail	\$1000/0.5% Wind/Hail	\$2000/0.5% Wind/Hail	
15,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
20,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
25,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
30,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
35,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
40,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
45,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
50,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
55,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
60,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
65,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
70,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
75,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
80,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
85,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
90,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
95,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
100,000	16%	0%	-17%	0%	-17%	-34%	-71%	N/A	16%	0%	-17%	N/A	N/A	
105,000	15%	0%	-16%	-1%	-19%	-34%	-69%	N/A	16%	0%	-17%	N/A	N/A	
110,000	15%	0%	-16%	-2%	-20%	-32%	-67%	N/A	16%	0%	-16%	N/A	N/A	
115,000	15%	0%	-16%	-2%	-21%	-31%	-66%	N/A	15%	0%	-16%	N/A	N/A	
120,000	15%	0%	-16%	-3%	-21%	-30%	-63%	N/A	15%	-1%	-16%	N/A	N/A	
125,000	15%	0%	-14%	-4%	-23%	-30%	-62%	N/A	15%	-1%	-14%	N/A	N/A	
130,000	15%	0%	-14%	-4%	-23%	-29%	-61%	N/A	15%	-1%	-14%	N/A	N/A	
135,000	14%	0%	-14%	-5%	-25%	-29%	-58%	N/A	15%	-1%	-14%	N/A	N/A	
140,000	14%	0%	-14%	-5%	-25%	-28%	-57%	N/A	15%	-1%	-14%	N/A	N/A	
145,000	14%	0%	-13%	-6%	-26%	-27%	-56%	N/A	14%	-1%	-13%	N/A	N/A	
150,000	14%	0%	-13%	-6%	-26%	-26%	-55%	N/A	14%	-1%	-13%	N/A	N/A	
155,000	14%	0%	-13%	-7%	-28%	-25%	-53%	N/A	14%	-1%	-13%	N/A	N/A	
160,000	14%	0%	-12%	-7%	-28%	-25%	-52%	N/A	14%	-1%	-12%	N/A	N/A	
165,000	13%	0%	-12%	-7%	-30%	-24%	-51%	N/A	14%	-1%	-12%	N/A	N/A	
170,000	13%	0%	-12%	-7%	-30%	-24%	-50%	N/A	13%	-1%	-12%	N/A	N/A	
175,000	13%	0%	-12%	-8%	-31%	-24%	-49%	N/A	13%	-1%	-12%	N/A	N/A	
200,000	12%	0%	-11%	-11%	-33%	-21%	-44%	N/A	12%	-2%	-11%	N/A	N/A	
250,000	11%	0%	-9%	-14%	-36%	-17%	-36%	N/A	11%	-2%	-9%	N/A	N/A	
300,000	11%	0%	-8%	-15%	-37%	-15%	-32%	N/A	11%	-3%	-8%	N/A	N/A	
350,000	11%	0%	-7%	-16%	-38%	-13%	-28%	N/A	11%	-3%	-8%	N/A	N/A	
400,000	10%	0%	-6%	-17%	-39%	-12%	-25%	N/A	10%	-3%	-7%	N/A	N/A	
500,000	9%	0%	-5%	-19%	-40%	-10%	-19%	N/A	9%	-3%	-7%	N/A	N/A	
600,000	9%	0%	-4%	-19%	-40%	-8%	-17%	N/A	9%	-4%	-6%	N/A	N/A	
750,000	9%	0%	-3%	-20%	-41%	-6%	-14%	N/A	9%	-4%	-6%	N/A	N/A	
1,000,000	9%	0%	-3%	-20%	-41%	-5%	-12%	N/A	9%	-4%	-6%	N/A	N/A	
1,500,000	9%	0%	-2%	-21%	-41%	-3%	-7%	N/A	9%	-4%	-6%	N/A	N/A	
2,000,000	9%	0%	-2%	-21%	-42%	-3%	-6%	N/A	9%	-4%	-6%	N/A	N/A	
2,500,000	9%	0%	-1%	-21%	-42%	-2%	-4%	N/A	9%	-4%	-6%	N/A	N/A	

Minimum 1% Deductible - \$1,000

Minimum Wind/Hail

\$1,000

\$1,000

\$2,000

Minimum 2% Deductible - \$2,000

Note: The \$500 All Peril Deductible is only available to renew business that already has this deductible (ANPAC Only)

Note: The Wind/Hail Deductible cannot be less than the All Other Peril Deductible.

American National Property And Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Percent Change in Deductible Factors

Policy Amount	Deductible													
	\$500	\$1000	\$2000	1%	2%	\$3000	\$5000	0.5%	\$500/1% Wind/Hail	\$1000/1% Wind/Hail	\$2000/1% Wind/Hail	\$1000/0.5% Wind/Hail	\$2000/0.5% Wind/Hail	
15,000	-3%	0%	2%	0%	2%	8%	48%	N/A	-9%	0%	2%	N/A	N/A	
20,000	-3%	0%	2%	0%	2%	8%	52%	N/A	-9%	0%	2%	N/A	N/A	
25,000	-3%	0%	2%	0%	2%	9%	55%	N/A	-9%	0%	2%	N/A	N/A	
30,000	-4%	0%	4%	0%	4%	9%	55%	N/A	-9%	0%	4%	N/A	N/A	
35,000	-4%	0%	4%	0%	4%	9%	59%	N/A	-9%	0%	4%	N/A	N/A	
40,000	-4%	0%	4%	0%	4%	11%	59%	N/A	-9%	0%	4%	N/A	N/A	
45,000	-4%	0%	4%	0%	4%	11%	62%	N/A	-9%	0%	4%	N/A	N/A	
50,000	-4%	0%	4%	0%	4%	11%	62%	N/A	-9%	0%	4%	N/A	N/A	
55,000	-4%	0%	4%	0%	4%	12%	66%	N/A	-9%	0%	4%	N/A	N/A	
60,000	-4%	0%	5%	0%	5%	12%	66%	N/A	-9%	0%	5%	N/A	N/A	
65,000	-4%	0%	5%	0%	5%	12%	66%	N/A	-9%	0%	5%	N/A	N/A	
70,000	-4%	0%	5%	0%	5%	12%	69%	N/A	-9%	0%	5%	N/A	N/A	
75,000	-4%	0%	5%	0%	5%	12%	69%	N/A	-9%	0%	5%	N/A	N/A	
80,000	-4%	0%	5%	0%	5%	14%	69%	N/A	-9%	0%	5%	N/A	N/A	
85,000	-5%	0%	5%	0%	5%	14%	72%	N/A	-9%	0%	5%	N/A	N/A	
90,000	-5%	0%	5%	0%	5%	14%	72%	N/A	-9%	0%	5%	N/A	N/A	
95,000	-5%	0%	5%	0%	5%	14%	72%	N/A	-9%	0%	5%	N/A	N/A	
100,000	-5%	0%	5%	0%	5%	14%	76%	N/A	-9%	0%	5%	N/A	N/A	
105,000	-4%	0%	5%	0%	6%	15%	68%	N/A	-9%	-1%	6%	N/A	N/A	
110,000	-4%	0%	5%	0%	6%	13%	61%	N/A	-10%	-1%	5%	N/A	N/A	
115,000	-4%	0%	5%	0%	8%	12%	59%	N/A	-10%	-1%	5%	N/A	N/A	
120,000	-4%	0%	5%	1%	8%	11%	51%	N/A	-10%	0%	5%	N/A	N/A	
125,000	-4%	0%	3%	1%	8%	11%	50%	N/A	-10%	-1%	3%	N/A	N/A	
130,000	-5%	0%	3%	1%	8%	11%	46%	N/A	-10%	-1%	3%	N/A	N/A	
135,000	-4%	0%	5%	1%	9%	11%	40%	N/A	-10%	-1%	5%	N/A	N/A	
140,000	-4%	0%	5%	1%	9%	11%	40%	N/A	-10%	-1%	5%	N/A	N/A	
145,000	-4%	0%	3%	1%	9%	10%	39%	N/A	-11%	-2%	3%	N/A	N/A	
150,000	-4%	0%	3%	1%	9%	9%	36%	N/A	-11%	-2%	3%	N/A	N/A	
155,000	-4%	0%	3%	2%	11%	9%	34%	N/A	-11%	-2%	3%	N/A	N/A	
160,000	-4%	0%	3%	2%	11%	9%	31%	N/A	-11%	-2%	3%	N/A	N/A	
165,000	-4%	0%	3%	1%	13%	8%	31%	N/A	-11%	-2%	3%	N/A	N/A	
170,000	-4%	0%	3%	1%	11%	8%	30%	N/A	-11%	-2%	3%	N/A	N/A	
175,000	-4%	0%	3%	2%	13%	9%	29%	N/A	-11%	-2%	3%	N/A	N/A	
200,000	-4%	0%	3%	3%	13%	8%	23%	N/A	-11%	-2%	2%	N/A	N/A	
250,000	-4%	0%	2%	5%	16%	5%	16%	N/A	-12%	-3%	0%	N/A	N/A	
300,000	-4%	0%	2%	5%	16%	5%	13%	N/A	-12%	-3%	-1%	N/A	N/A	
350,000	-4%	0%	2%	5%	16%	3%	11%	N/A	-13%	-3%	-1%	N/A	N/A	
400,000	-4%	0%	1%	5%	16%	3%	9%	N/A	-13%	-4%	-2%	N/A	N/A	
500,000	-4%	0%	1%	6%	17%	2%	6%	N/A	-13%	-4%	-2%	N/A	N/A	
600,000	-4%	0%	1%	5%	15%	2%	5%	N/A	-13%	-4%	-3%	N/A	N/A	
750,000	-4%	0%	0%	5%	15%	1%	3%	N/A	-14%	-4%	-4%	N/A	N/A	
1,000,000	-4%	0%	1%	5%	15%	1%	3%	N/A	-14%	-4%	-4%	N/A	N/A	
1,500,000	-4%	0%	0%	5%	14%	0%	1%	N/A	-14%	-4%	-4%	N/A	N/A	
2,000,000	-4%	0%	0%	5%	14%	0%	1%	N/A	-14%	-5%	-4%	N/A	N/A	
2,500,000	-4%	0%	0%	5%	14%	0%	1%	N/A	-14%	-5%	-4%	N/A	N/A	

American National Property And Casualty Company
American National General Insurance Company
Homeowners & Rental Owners
Arkansas
Present Utilities / Roof Rating Plan

Year of Construction / Update Completion	Utilities			Roof						
	Age of Home	Heating	Cooling	Roof	UL Class				Construction	
					1	2	3	4	Concrete/Clay Tile or Composite Wood Fiber/Cement	Wood Shake or Shingle
Current Calendar Year	-20%	-3%	-3%	-24%	0%	0%	-6%	-9%	-12%	10%
1st Preceding Year	-20%	-3%	-3%	-23%	0%	0%	-6%	-9%	-12%	11%
2nd Preceding Year	-20%	-3%	-3%	-21%	0%	0%	-6%	-9%	-12%	12%
3rd Preceding Year	-20%	-3%	-3%	-20%	0%	0%	-6%	-9%	-12%	13%
4th Preceding Year	-20%	-2%	-3%	-19%	0%	0%	-6%	-9%	-12%	14%
5th Preceding Year	-20%	-2%	-3%	-17%	0%	0%	-5%	-8%	-12%	15%
6th Preceding Year	-20%	-2%	-2%	-15%	0%	0%	-5%	-7%	-11%	16%
7th Preceding Year	-20%	-2%	-2%	-13%	0%	0%	-5%	-7%	-11%	17%
8th Preceding Year	-20%	-2%	-2%	-11%	0%	0%	-4%	-6%	-11%	18%
9th Preceding Year	-20%	-2%	-2%	-9%	0%	0%	-3%	-5%	-11%	19%
10th Preceding Year	-20%	-1%	-2%	-7%	0%	0%	-3%	-5%	-10%	20%
11th Preceding Year	-20%	-1%	-2%	-5%	0%	0%	-2%	-4%	-10%	21%
12th Preceding Year	-20%	-1%	-1%	-3%	0%	0%	-2%	-4%	-10%	22%
13th Preceding Year	-20%	-1%	-1%	-1%	0%	0%	-2%	-4%	-9%	23%
14th Preceding Year	-20%	0%	-1%	0%	0%	0%	-1%	-3%	-9%	24%
15th Preceding Year	-20%	0%	0%	0%	0%	0%	-1%	-3%	-9%	25%
16th Preceding Year	-20%	0%	0%	0%	0%	0%	0%	-2%	-8%	26%
17th Preceding Year	-20%	0%	0%	0%	0%	0%	0%	-2%	-8%	27%
18th Preceding Year	-20%	0%	0%	0%	0%	0%	0%	-1%	-8%	28%
19th Preceding Year	-19%	0%	0%	0%	0%	0%	0%	-1%	-7%	29%
20th Preceding Year	-19%	0%	0%	0%	0%	0%	0%	0%	-7%	30%
21st Preceding Year	-19%	0%	0%	0%	0%	0%	0%	0%	-7%	32%
22nd Preceding Year	-19%	0%	0%	0%	0%	0%	0%	0%	-6%	34%
23rd Preceding Year	-19%	0%	0%	0%	0%	0%	0%	0%	-6%	36%
24th Preceding Year	-19%	0%	0%	0%	0%	0%	0%	0%	-6%	38%
25th Preceding Year	-18%	0%	0%	0%	0%	0%	0%	0%	-5%	40%
26th Preceding Year	-17%	0%	0%	0%	0%	0%	0%	0%	-5%	42%
27th Preceding Year	-16%	0%	0%	0%	0%	0%	0%	0%	-5%	44%
28th Preceding Year	-14%	0%	0%	0%	0%	0%	0%	0%	-4%	46%
29th Preceding Year	-13%	0%	0%	0%	0%	0%	0%	0%	-4%	48%
30th Preceding Year	-12%	0%	0%	0%	0%	0%	0%	0%	-4%	50%
31st Preceding Year	-10%	0%	0%	0%	0%	0%	0%	0%	-3%	52%
32nd Preceding Year	-9%	0%	0%	0%	0%	0%	0%	0%	-3%	54%
33rd Preceding Year	-8%	0%	0%	0%	0%	0%	0%	0%	-3%	56%
34th Preceding Year	-7%	0%	0%	0%	0%	0%	0%	0%	-2%	58%
35th Preceding Year	-6%	0%	0%	0%	0%	0%	0%	0%	-2%	60%
36th Preceding Year	-5%	0%	0%	0%	0%	0%	0%	0%	-2%	62%
37th Preceding Year	-4%	0%	0%	0%	0%	0%	0%	0%	-1%	64%
38th Preceding Year	-3%	0%	0%	0%	0%	0%	0%	0%	-1%	66%
39th Preceding Year	-2%	0%	0%	0%	0%	0%	0%	0%	-1%	68%
40th and All Preceding Years	0%	0%	0%	0%	0%	0%	0%	0%	0%	70%

Max Utility/Roof Discount - 69%

American National Property And Casualty Company
American National General Insurance Company
Homeowners & Rental Owners
Arkansas
Proposed Utilities / Roof Rating Plan

Year of Construction / Update Completion	Utilities			Roof						
	Age of Home	Heating	Cooling	Roof Age	UL Class				Construction	
					1	2	3	4	Concrete/Clay Tile or Composite Wood Fiber/Cement	Wood Shake or Shingle
Current Calendar Year	-26%	-4%	-1%	-35%	0%	0%	-6%	-9%	-12%	10%
1st Preceding Year	-25%	-4%	-1%	-33%	0%	0%	-6%	-9%	-12%	11%
2nd Preceding Year	-24%	-3%	-1%	-32%	0%	0%	-6%	-9%	-12%	12%
3rd Preceding Year	-23%	-3%	-1%	-30%	0%	0%	-6%	-9%	-12%	13%
4th Preceding Year	-22%	-3%	-1%	-28%	0%	0%	-6%	-9%	-12%	14%
5th Preceding Year	-20%	-3%	-1%	-26%	0%	0%	-5%	-8%	-12%	15%
6th Preceding Year	-19%	-2%	-1%	-23%	0%	0%	-5%	-7%	-11%	16%
7th Preceding Year	-17%	-2%	-1%	-21%	0%	0%	-5%	-7%	-11%	17%
8th Preceding Year	-15%	-2%	-1%	-18%	0%	0%	-4%	-6%	-11%	18%
9th Preceding Year	-13%	-1%	-1%	-15%	0%	0%	-3%	-5%	-11%	19%
10th Preceding Year	-11%	-1%	-1%	-11%	0%	0%	-3%	-5%	-10%	20%
11th Preceding Year	-10%	-1%	0%	-7%	0%	0%	-2%	-4%	-10%	21%
12th Preceding Year	-9%	-1%	0%	-3%	0%	0%	-2%	-4%	-10%	22%
13th Preceding Year	-8%	-1%	0%	0%	0%	0%	-2%	-4%	-9%	23%
14th Preceding Year	-8%	-1%	0%	0%	0%	0%	-1%	-3%	-9%	24%
15th Preceding Year	-7%	0%	0%	0%	0%	0%	-1%	-3%	-9%	25%
16th Preceding Year	-6%	0%	0%	0%	0%	0%	0%	-2%	-8%	26%
17th Preceding Year	-4%	0%	0%	0%	0%	0%	0%	-2%	-8%	27%
18th Preceding Year	-3%	0%	0%	0%	0%	0%	0%	-1%	-8%	28%
19th Preceding Year	-2%	0%	0%	0%	0%	0%	0%	-1%	-7%	29%
20th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-7%	30%
21st Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-7%	32%
22nd Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-6%	34%
23rd Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-6%	36%
24th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-6%	38%
25th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-5%	40%
26th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-5%	42%
27th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-5%	44%
28th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-4%	46%
29th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-4%	48%
30th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-4%	50%
31st Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-3%	52%
32nd Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-3%	54%
33rd Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-3%	56%
34th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-2%	58%
35th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-2%	60%
36th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-2%	62%
37th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-1%	64%
38th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-1%	66%
39th Preceding Year	0%	0%	0%	0%	0%	0%	0%	0%	-1%	68%
40th and All Preceding Years	0%	0%	0%	0%	0%	0%	0%	0%	0%	70%

Max Utility/Roof Discount - 78%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Claim Free Plus Tier Distribution

<u>Risk Score</u>	<u>Policy Counts</u>	
	<u>Current</u>	<u>Proposed</u>
1 - 1	10	10
2 - 2	20	20
619 and Below	59	351
620 - 674	242	519
675 - 729	482	736
730 - 769	542	671
770 - 809	544	614
810 - 854	768	591
855 - 899	692	432
900 - 949	642	302
950 and above	676	431
Total	4,677	4,677

**American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Distribution by Rate Change**

<u>Change Range</u>	<u>Count</u>	<u>Distribution</u>
Less than -40.0%	3	0.1%
-40.0% to -30.1%	9	0.2%
-30.0% to -20.1%	63	1.2%
-20.0% to -10.1%	205	3.9%
-10.0% to -0.1%	716	13.6%
0.0% to 9.9%	725	13.8%
10.0% to 19.9%	800	15.2%
20.0% to 29.9%	796	15.1%
30.0% to 39.9%	635	12.1%
40.0% to 49.9%	493	9.4%
50.0% to 59.9%	318	6.1%
60.0% to 69.9%	206	3.9%
70.0% to 79.9%	123	2.3%
80.0% to 89.9%	73	1.4%
90.0% to 99.9%	38	0.7%
Over 100.0%	52	1.0%
Percent 20% and Over		52.0%

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS EQUIPMENT BREAKDOWN COVERAGE**

EB RATE SUPPORT

(1.)	Frequency	2.19%		
	Severity	\$2,124		
	Loss Cost	\$46.52		
	Expense and Profit Load	57.6%		
	Expense and Profit Factor	2.358		
	Computed Premium:	\$110		
			<u>HSB</u>	<u>ANPAC</u>
			<u>Projected</u>	<u>Projected</u>
	Expenses	20.9%	36.7%	Total Expenses 57.6%

(1.) We used inception to date experience to compute our loss costs for this program and then included associated program expenses and profit load. This resulted in a computed charge of \$110.

(2.)	Average Premium per Policy	<u>EB Premium</u>	<u>Policies</u>	<u>Average Premium</u>
		\$246,203	6,486	\$38

(2.) We calculated our existing average premium per policy as \$38.

(3.)	Computed Change	289%		
------	-----------------	------	--	--

(3.) Computed change = (1.) / (2.)

(4.)	<u>Coverage A Value Range</u>	<u>Rate/Policy</u>	<u>Computed</u>	<u>Selected</u>
	≤ \$250,000	\$30	\$87	\$73
	\$250,001 to \$500,000	\$48	\$139	\$109
	\$500,001 to \$1,000,000	\$75	\$217	\$137
	\$1,000,001 to \$5,000,000	\$111	\$321	\$150

(4.) We selected a final premium charge less than computed in recognition of the change in deductibles and to avoid rate vacillation and market disruption.

**American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Rate Level Indications
All Forms**

Form	Written Premium at Current Rate Level	CW Loss Ratio w/ LAE & Fixed Expenses	Indicated Rate Level Change
Dwelling Forms	4,616,685	85.3%	26.0%
Contents Forms	75,133	64.5%	-4.6%
All Forms	4,691,818	84.9%	25.5%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Rate Level Indications
Forms SH-3 & SH-7

Year Ending (1)	Earned Premium at Current Rate Level (2)	Premium Trend (3)	Earned Premium at Current Rate Level (Incl. Premium Trend) (4) = (2) * (3)	Undeveloped Accident Year Non-Wind/Hail Losses (5)	Loss Development Factor (6)	Developed Accident Year Non-Wind/Hail Losses (7)=(5)*(6)	Non- Wind/Hail Loss Cost Trend (8)	Projected Non- Wind/Hail Losses (9) = (7) * (8)	Projected Non- Wind/Hail Loss Ratio (10) = (9) / (4)
12/31/2005	4,244,563	1.3875	5,889,161	818,534	1.0000	818,534	1.8134	1,484,358	25.2%
12/31/2006	4,134,854	1.2860	5,317,280	1,177,859	1.0000	1,177,859	1.6486	1,941,791	36.5%
12/31/2007	4,135,001	1.2160	5,028,219	983,187	1.0000	983,187	1.4987	1,473,508	29.3%
12/31/2008	4,106,596	1.1735	4,818,928	1,727,926	1.0100	1,745,205	1.3625	2,377,773	49.3%
12/31/2009	4,220,067	1.1153	4,706,560	1,196,555	1.0403	1,244,776	1.2386	1,541,780	32.8%
(11.1) Projected Non-Wind/Hail or Catastrophe Loss Ratio = Weighted Avg of (10) by (4)									34.2%
(11.2) Projected Wind/Hail Loss Ratio									35.1%
(11.3) Non-Wind/Hail Catastrophe Loss Ratio									1.7%
(11.4) Liability Loss Ratio									2.0%
(12) Total Projected Loss Ratio = (11.1) + (11.2) + (11.3) + (11.4)									73.0%
(13) Projected LAE Ratio to Losses									16.0%
(14) Total Projected Loss and LAE Ratio = (12) * [1+(13)]									84.7%
(15) Trended Permissible Loss Ratio									66.8%
(16) Dwelling Exposures									25,003
(17) Credibility of Experience Period w/ Full Credibility = 40,000 Exposures									0.791
(18) Credibility Weighted Loss & LAE Ratio = (14)*(17) + (15)* [1- (17)]									80.9%
(19.1) Projected Variable Expense Ratio									20.5%
(19.2) Projected Fixed Expense Ratio									4.3%
(19.3) Profit Provision									11.9%
(20) Indicated Rate Level Change = [(18) + (19.2)]/[1 - (19.1) - (19.3)] - 1									26.0%

American National Property and Casualty Company
American National General Insurance Company
Homeowners/Rental Owners
Arkansas
Wind/Hail Pure Premium

Year	Frequency	Average Severity	Loss Development Factor	Ultimate Average Severity	Exposure Adjustment Factor	Exposure Trended Ultimate Average Severity
1994	0.0427	\$1,885	1.0000	\$1,885	2.6548	\$5,005
1995	0.0326	\$1,715	1.0000	\$1,715	2.5177	\$4,317
1996	0.0883	\$7,600	1.0000	\$7,600	2.4451	\$18,582
1997	0.0260	\$8,368	1.0000	\$8,368	2.1846	\$18,282
1998	0.0208	\$1,731	1.0000	\$1,731	2.1158	\$3,662
1999	0.0688	\$3,632	1.0000	\$3,632	2.0425	\$7,418
2000	0.0392	\$2,234	1.0000	\$2,234	1.9664	\$4,392
2001	0.0324	\$2,276	1.0000	\$2,276	1.8801	\$4,278
2002	0.0319	\$3,132	1.0000	\$3,132	1.7862	\$5,595
2003	0.0282	\$2,961	1.0000	\$2,961	1.6815	\$4,979
2004	0.0227	\$3,427	1.0000	\$3,427	1.5302	\$5,245
2005	0.0147	\$3,910	1.0000	\$3,910	1.3997	\$5,472
2006	0.0326	\$6,387	1.0000	\$6,387	1.2571	\$8,029
2007	0.0099	\$3,566	1.0000	\$3,566	1.1293	\$4,028
2008	0.1973	\$9,813	1.0100	\$9,911	1.0642	\$10,548
2009	0.0345	\$6,483	1.0403	\$6,744	1.0000	\$6,744
Average Frequency	0.0452				Average Severity	\$7,286
					Average Pure Premium	\$329
					Trend Factor	1.0980
					Trended Pure Premium	\$361

American National Property and Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Wind/Hail Loss Ratio

<u>Year</u>	<u>Per Exposure Wind/Hail Loss Provision</u>	<u>Dwelling Exposures</u>	<u>Total Wind/Hail Loss Provision</u>	<u>Trended Earned Premium</u>	<u>Wind/Hail Loss Ratio</u>
2005	\$361	5,292	1,911,921	5,889,161	32.5%
2006	\$361	5,111	1,846,346	5,317,280	34.7%
2007	\$361	4,944	1,786,067	5,028,219	35.5%
2008	\$361	4,862	1,756,353	4,818,928	36.4%
2009	\$361	4,794	1,732,061	4,706,560	36.8%
			<u>9,032,747</u>	<u>25,760,147</u>	<u>35.1%</u>

American National Property And Casualty Company
Homeowners
Arkansas
Rates - Form SH-3

All Peril - PC 1 - Frame - \$150,000 Cov. A

Zone	Present Base Rate	Present Relativity	Proposed Relativity	Relativity Change
001	2,151	0.8981	0.8407	-6.4%
002to001	1,653	0.6902	0.8407	21.8%
002	1,653	0.6902	0.7773	12.6%
003to002	2,872	1.1992	0.7773	-35.2%
003	2,872	1.1992	1.4132	17.9%
005to003	2,578	1.0764	1.4132	31.3%
004	1,981	0.8271	1.0222	23.6%
006to004	2,295	0.9582	1.0222	6.7%
007to004	2,023	0.8447	1.0222	21.0%
005	2,578	1.0764	1.0558	-1.9%
006to005	2,295	0.9582	1.0558	10.2%
006	2,295	0.9582	1.0274	7.2%
004to006	1,981	0.8271	1.0274	24.2%
007to006	2,023	0.8447	1.0274	21.6%
007	2,023	0.8447	1.0766	27.5%
006to007	2,295	0.9582	1.0766	12.4%
008	1,790	0.7474	0.9527	27.5%
009	2,395	1.0000	1.0000	0.0%
010	2,763	1.1537	1.2350	7.1%
003to010	2,872	1.1992	1.2350	3.0%
012	2,451	1.0234	1.1754	14.9%
004to012	1,981	0.8271	1.1754	42.1%
005to012	2,578	1.0764	1.1754	9.2%
017	1,700	0.7098	0.8378	18.0%
024	2,025	0.8455	1.0681	26.3%
026	1,884	0.7866	1.0028	27.5%
033	2,440	1.0188	1.0931	7.3%
037	1,753	0.7319	0.8066	10.2%
002to038	1,653	0.6902	0.7811	13.2%
004to039	1,981	0.8271	1.0544	27.5%
008to040	1,790	0.7474	0.7135	-4.5%
012to041	2,451	1.0234	1.1499	12.4%
012to042	2,451	1.0234	1.0723	4.8%
012to043	2,451	1.0234	1.0700	4.6%
005to043	2,578	1.0764	1.0700	-0.6%
026to044	1,884	0.7866	1.0028	27.5%

American National Property And Casualty Company
Homeowners
Arkansas
Overall Summary - Form SH-3

Zone	Count	Current Average Premium	Proposed Average Premium	Premium Change
001	241	1,128	1,022	-9.4%
002	91	1,127	1,113	-1.3%
003	29	1,208	1,500	24.2%
004	24	921	1,074	16.6%
005	11	930	996	7.1%
006	19	1,020	1,101	8.0%
007	0	0	0	0.0%
008	223	1,056	1,241	17.5%
009	1,151	1,075	1,045	-2.8%
010	9	1,169	1,224	4.7%
012	16	1,281	1,398	9.1%
017	1,274	827	920	11.4%
024	66	921	1,203	30.7%
026	41	929	1,170	25.9%
033	383	936	996	6.4%
037	216	757	847	11.9%
038	88	877	996	13.6%
039	19	1,069	1,345	25.8%
040	31	1,189	1,014	-14.7%
041	157	1,214	1,330	9.6%
042	70	1,080	1,116	3.4%
043	30	1,077	1,096	1.7%
044	197	800	1,005	25.6%
Total	4,386	964	1,023	6.1%

American National Property And Casualty Company
American National General Insurance Company
Homeowners
Arkansas
Dwelling Forms

<u>Form</u>	<u>Current Differential</u>	<u>Proposed Differential</u>	<u>Differential Change</u>
ANPAC SH-7	1.270	1.170	-7.9%
ANGIC SH-3	0.960	0.960	0.0%

**American National Property And Casualty Company
Homeowners
Arkansas
Base Rates - Form SH-4 and SH-6**

Form	Present Base Rate	Proposed Base Rate	Base Rate Change
Remainder of State			
SH-4	168	153	-8.9%
SH-6	219	206	-5.9%
Zones 12, 41, 42, and 43			
SH-4	208	189	-9.1%
SH-6	271	255	-5.9%

**American National General Insurance Company
Homeowners
Arkansas
Contents Forms**

Form	Current Differential	Proposed Differential	Differential Change
All Peril			
ANGIC SH-4	0.960	0.960	0.0%
ANGIC SH-6	0.960	0.960	0.0%

Note: Differentials are applied to corresponding ANPAC Contents Homeowners Base Rates

SERFF Tracking Number: ANPC-126522833 State: Arkansas
 First Filing Company: American National General Insurance Company, State Tracking Number: EFT \$100
 ...
 Company Tracking Number: 03-H-G-10-0232
 TOI: 04.0 Homeowners Sub-TOI: 04.0000 Homeowners Sub-TOI Combinations
 Product Name: Homeowners
 Project Name/Number: /399008

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/30/2010	Rate and Rule	ANPAC and ANG Territorial Zone Pages	07/28/2010	AR ANP-ANG HZ 6-10.pdf (Superseded)
06/30/2010	Rate and Rule	ANPAC Rate Pages	08/27/2010	AR ANP HR-1.001-3.008 6-10.pdf (Superseded)
06/30/2010	Rate and Rule	ANG Rate Pages	08/27/2010	AR ANG HR-1.001-3.005 6-10.pdf (Superseded)
07/21/2010	Rate and Rule	Revised SERFF Rate Data	08/27/2010	SERFF RATE INFO ANP-ANG Multiple Company Home.pdf (Superseded)
07/21/2010	Supporting Document	NAIC loss cost data entry document	08/27/2010	RF-1 HO-2.pdf (Superseded) RF-1 GHO-2.pdf (Superseded)
03/01/2010	Supporting Document	NAIC loss cost data entry document	07/21/2010	RF-1 (HO).pdf (Superseded) RF-1 (GHO).pdf (Superseded)

**AMERICAN NATIONAL PROPERTY AND CASUALTY COMPANY
AMERICAN NATIONAL GENERAL INSURANCE COMPANY**

**Homeowners Insurance
Rental Owners Insurance
Zone Definitions**

- Zone 1** - Counties of:
- | | | | |
|--------|---------|--------|--------|
| Baxter | Carroll | Marion | Searcy |
| Boone | Madison | Newton | |
- Zone 2** - Counties of:
- | | | | |
|----------|--------------|----------|-----------|
| Clay | Greene | Jackson | Sharp |
| Cleburne | Independence | Lawrence | Stone |
| Fulton | Izard | Randolph | Van Buren |
- Zone 3** - Counties of:
- | | | |
|--------|----------|-------------|
| Cross | Phillips | St. Francis |
| Lee | Poinsett | White |
| Monroe | Prairie | Woodruff |
- Zone 4** - Counties of:
- | | | | |
|-----------|--------------|--------|--------|
| Hempstead | Little River | Nevada | Scott |
| Howard | Miller | Pike | Sevier |
| Lafayette | Montgomery | Polk | |
- Zone 5** - Counties of:
- | | |
|----------|-----------|
| Arkansas | Jefferson |
|----------|-----------|
- Zone 6** - Counties of:
- | | | | |
|---------|-----------|----------|-------|
| Bradley | Cleveland | Drew | Union |
| Calhoun | Columbia | Lincoln | |
| Clark | Dallas | Ouachita | |
- Zone 7** - Counties of:
- | | | |
|--------|--------|-------|
| Ashley | Chicot | Desha |
|--------|--------|-------|
- Zone 8** - Remainder of Garland County (Excluding Zone 40)
- Zone 9** - Sebastian County
- Zone 10** - Counties of:
- | | |
|------------|-------------|
| Crittenden | Mississippi |
|------------|-------------|
- Zone 12** - Perry County
- Remainder of Pulaski County (Excluding Zones 41, 42, and 43)
- Remainder of Lonoke County (Excluding Zone 43)
- Zone 17** - Counties of:
- | | |
|--------|------------|
| Benton | Washington |
|--------|------------|
- Zone 24** - Craighead County
- Zone 26** - Remainder of Saline County (Excluding Zones 40 and 44)

- Zone 33 -** Crawford County
- Zone 37 -** Counties of:
 Conway Faulkner Pope
- Zone 38 -** Counties of:
 Franklin Johnson Logan Yell
- Zone 39 -** Counties of:
 Grant Hot Springs
- Zone 40 -** Zip Code 71909 in Garland and Saline Counties (Hot Springs Village)
- Zone 41 -** Pulaski Zip Codes:
 72201 72205 72209 72212
 72202 72206 72210 72223
 72204 72207 72211 72227
- Zone 42 -** Pulaski Zip Codes:
 72113 72116 72118 72199
 72114 72117 72120
- Zone 43 -** Pulaski Zip Codes:
 72023 72076 72099
 Lonoke Zip Codes:
 72007 72023 72076 72176
- Zone 44 -** Saline Zip Codes:
 72015 72019 72022

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Frame

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02103	02103	02103	02175	02175	02492	02927	03501	04366	05874
002	01945	01945	01945	02011	02011	02305	02707	03238	04038	05432
003	03536	03536	03536	03656	03656	04190	04922	05887	07341	09876
004	02558	02558	02558	02645	02645	03031	03561	04259	05310	07144
005	02642	02642	02642	02732	02732	03131	03678	04399	05485	07379
006	02571	02571	02571	02658	02658	03047	03579	04281	05337	07181
007	02694	02694	02694	02786	02786	03192	03750	04486	05593	07524
008	02384	02384	02384	02465	02465	02825	03319	03969	04949	06659
009	02502	02502	02502	02587	02587	02965	03483	04166	05194	06988
010	03090	03090	03090	03195	03195	03662	04301	05145	06415	08630
012	02941	02941	02941	03041	03041	03485	04094	04897	06106	08214
017	02096	02096	02096	02167	02167	02484	02918	03490	04351	05854
024	02672	02672	02672	02763	02763	03166	03719	04449	05547	07463
026	02509	02509	02509	02594	02594	02973	03493	04177	05209	07008
033	02736	02736	02736	02829	02829	03242	03809	04555	05680	07642
037	02018	02018	02018	02087	02087	02391	02809	03360	04189	05636
038	01954	01954	01954	02020	02020	02315	02720	03253	04057	05458
039	02638	02638	02638	02728	02728	03126	03672	04392	05476	07368
040	01785	01785	01785	01846	01846	02115	02485	02972	03706	04986
041	02878	02878	02878	02976	02976	03410	04006	04792	05975	08038
042	02684	02684	02684	02775	02775	03181	03736	04469	05572	07496
043	02677	02677	02677	02768	02768	03172	03726	04457	05557	07477
044	02509	02509	02509	02594	02594	02973	03493	04177	05209	07008

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Veneer

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01752	01752	01752	01867	01867	02118	02786	03068	04099	05285
002	01620	01620	01620	01727	01727	01959	02577	02838	03791	04888
003	02945	02945	02945	03140	03140	03561	04685	05159	06892	08886
004	02131	02131	02131	02272	02272	02576	03389	03732	04986	06428
005	02201	02201	02201	02346	02346	02660	03501	03855	05149	06639
006	02142	02142	02142	02283	02283	02589	03407	03751	05011	06461
007	02244	02244	02244	02392	02392	02713	03570	03931	05251	06770
008	01986	01986	01986	02117	02117	02401	03159	03478	04646	05991
009	02084	02084	02084	02222	02222	02520	03315	03650	04876	06288
010	02574	02574	02574	02744	02744	03112	04094	04508	06022	07765
012	02450	02450	02450	02612	02612	02962	03897	04291	05732	07391
017	01746	01746	01746	01861	01861	02111	02777	03058	04085	05267
024	02226	02226	02226	02373	02373	02691	03540	03898	05208	06715
026	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305
033	02279	02279	02279	02430	02430	02755	03625	03992	05332	06876
037	01681	01681	01681	01792	01792	02032	02674	02944	03933	05071
038	01628	01628	01628	01735	01735	01968	02589	02851	03808	04910
039	02197	02197	02197	02343	02343	02656	03495	03849	05141	06629
040	01487	01487	01487	01585	01585	01797	02365	02604	03479	04486
041	02397	02397	02397	02556	02556	02898	03813	04199	05609	07232
042	02236	02236	02236	02383	02383	02703	03556	03916	05231	06745
043	02230	02230	02230	02377	02377	02696	03547	03906	05217	06727
044	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Brick

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01752	01752	01752	01867	01867	02118	02786	03068	04099	05285
002	01620	01620	01620	01727	01727	01959	02577	02838	03791	04888
003	02945	02945	02945	03140	03140	03561	04685	05159	06892	08886
004	02131	02131	02131	02272	02272	02576	03389	03732	04986	06428
005	02201	02201	02201	02346	02346	02660	03501	03855	05149	06639
006	02142	02142	02142	02283	02283	02589	03407	03751	05011	06461
007	02244	02244	02244	02392	02392	02713	03570	03931	05251	06770
008	01986	01986	01986	02117	02117	02401	03159	03478	04646	05991
009	02084	02084	02084	02222	02222	02520	03315	03650	04876	06288
010	02574	02574	02574	02744	02744	03112	04094	04508	06022	07765
012	02450	02450	02450	02612	02612	02962	03897	04291	05732	07391
017	01746	01746	01746	01861	01861	02111	02777	03058	04085	05267
024	02226	02226	02226	02373	02373	02691	03540	03898	05208	06715
026	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305
033	02279	02279	02279	02430	02430	02755	03625	03992	05332	06876
037	01681	01681	01681	01792	01792	02032	02674	02944	03933	05071
038	01628	01628	01628	01735	01735	01968	02589	02851	03808	04910
039	02197	02197	02197	02343	02343	02656	03495	03849	05141	06629
040	01487	01487	01487	01585	01585	01797	02365	02604	03479	04486
041	02397	02397	02397	02556	02556	02898	03813	04199	05609	07232
042	02236	02236	02236	02383	02383	02703	03556	03916	05231	06745
043	02230	02230	02230	02377	02377	02696	03547	03906	05217	06727
044	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Siding

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02103	02103	02103	02175	02175	02492	02927	03501	04366	05874
002	01945	01945	01945	02011	02011	02305	02707	03238	04038	05432
003	03536	03536	03536	03656	03656	04190	04922	05887	07341	09876
004	02558	02558	02558	02645	02645	03031	03561	04259	05310	07144
005	02642	02642	02642	02732	02732	03131	03678	04399	05485	07379
006	02571	02571	02571	02658	02658	03047	03579	04281	05337	07181
007	02694	02694	02694	02786	02786	03192	03750	04486	05593	07524
008	02384	02384	02384	02465	02465	02825	03319	03969	04949	06659
009	02502	02502	02502	02587	02587	02965	03483	04166	05194	06988
010	03090	03090	03090	03195	03195	03662	04301	05145	06415	08630
012	02941	02941	02941	03041	03041	03485	04094	04897	06106	08214
017	02096	02096	02096	02167	02167	02484	02918	03490	04351	05854
024	02672	02672	02672	02763	02763	03166	03719	04449	05547	07463
026	02509	02509	02509	02594	02594	02973	03493	04177	05209	07008
033	02736	02736	02736	02829	02829	03242	03809	04555	05680	07642
037	02018	02018	02018	02087	02087	02391	02809	03360	04189	05636
038	01954	01954	01954	02020	02020	02315	02720	03253	04057	05458
039	02638	02638	02638	02728	02728	03126	03672	04392	05476	07368
040	01785	01785	01785	01846	01846	02115	02485	02972	03706	04986
041	02878	02878	02878	02976	02976	03410	04006	04792	05975	08038
042	02684	02684	02684	02775	02775	03181	03736	04469	05572	07496
043	02677	02677	02677	02768	02768	03172	03726	04457	05557	07477
044	02509	02509	02509	02594	02594	02973	03493	04177	05209	07008

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Fire Resistive

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01752	01752	01752	01867	01867	02118	02786	03068	04099	05285
002	01620	01620	01620	01727	01727	01959	02577	02838	03791	04888
003	02945	02945	02945	03140	03140	03561	04685	05159	06892	08886
004	02131	02131	02131	02272	02272	02576	03389	03732	04986	06428
005	02201	02201	02201	02346	02346	02660	03501	03855	05149	06639
006	02142	02142	02142	02283	02283	02589	03407	03751	05011	06461
007	02244	02244	02244	02392	02392	02713	03570	03931	05251	06770
008	01986	01986	01986	02117	02117	02401	03159	03478	04646	05991
009	02084	02084	02084	02222	02222	02520	03315	03650	04876	06288
010	02574	02574	02574	02744	02744	03112	04094	04508	06022	07765
012	02450	02450	02450	02612	02612	02962	03897	04291	05732	07391
017	01746	01746	01746	01861	01861	02111	02777	03058	04085	05267
024	02226	02226	02226	02373	02373	02691	03540	03898	05208	06715
026	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305
033	02279	02279	02279	02430	02430	02755	03625	03992	05332	06876
037	01681	01681	01681	01792	01792	02032	02674	02944	03933	05071
038	01628	01628	01628	01735	01735	01968	02589	02851	03808	04910
039	02197	02197	02197	02343	02343	02656	03495	03849	05141	06629
040	01487	01487	01487	01585	01585	01797	02365	02604	03479	04486
041	02397	02397	02397	02556	02556	02898	03813	04199	05609	07232
042	02236	02236	02236	02383	02383	02703	03556	03916	05231	06745
043	02230	02230	02230	02377	02377	02696	03547	03906	05217	06727
044	02090	02090	02090	02228	02228	02527	03324	03661	04890	06305

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

1 - 4 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
002	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
003	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
004	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
005	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
006	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
007	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
008	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
009	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
010	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
012	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
017	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
024	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
026	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
033	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
037	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
038	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
039	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
040	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246
041	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
042	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
043	00189	00189	00189	00189	00189	00189	00189	00205	00281	00304
044	00153	00153	00153	00153	00153	00153	00153	00166	00228	00246

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

5 - 99 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
002	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
003	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
004	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
005	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
006	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
007	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
008	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
009	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
010	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
012	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
017	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
024	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
026	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
033	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
037	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
038	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
039	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
040	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275
041	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
042	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
043	00201	00201	00201	00201	00201	00201	00210	00210	00308	00340
044	00163	00163	00163	00163	00163	00163	00170	00170	00250	00275

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
002	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
003	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
004	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
005	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
006	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
007	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
008	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
009	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
010	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
012	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
017	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
024	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
026	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
033	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
037	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
038	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
039	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
040	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331
041	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
042	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
043	00255	00255	00255	00255	00255	00255	00255	00276	00379	00410
044	00206	00206	00206	00206	00206	00206	00206	00223	00307	00331

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 5 - 99 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
002	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
003	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
004	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
005	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
006	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
007	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
008	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
009	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
010	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
012	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
017	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
024	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
026	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
033	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
037	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
038	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
039	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
040	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370
041	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
042	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
043	00272	00272	00272	00272	00272	00272	00284	00284	00416	00458
044	00219	00219	00219	00219	00219	00219	00229	00229	00336	00370

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Frame

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02461	02461	02461	02545	02545	02916	03425	04096	05108	06873
002	02276	02276	02276	02353	02353	02697	03167	03788	04724	06355
003	04137	04137	04137	04278	04278	04902	05759	06888	08589	11555
004	02993	02993	02993	03095	03095	03546	04166	04983	06213	08358
005	03091	03091	03091	03196	03196	03663	04303	05147	06417	08633
006	03008	03008	03008	03110	03110	03565	04187	05009	06244	08402
007	03152	03152	03152	03260	03260	03735	04388	05249	06544	08803
008	02789	02789	02789	02884	02884	03305	03883	04644	05790	07791
009	02927	02927	02927	03027	03027	03469	04075	04874	06077	08176
010	03615	03615	03615	03738	03738	04285	05032	06020	07506	10097
012	03441	03441	03441	03558	03558	04077	04790	05729	07144	09610
017	02452	02452	02452	02535	02535	02906	03414	04083	05091	06849
024	03126	03126	03126	03233	03233	03704	04351	05205	06490	08732
026	02936	02936	02936	03035	03035	03478	04087	04887	06095	08199
033	03201	03201	03201	03310	03310	03793	04457	05329	06646	08941
037	02361	02361	02361	02442	02442	02797	03287	03931	04901	06594
038	02286	02286	02286	02363	02363	02709	03182	03806	04747	06386
039	03086	03086	03086	03192	03192	03657	04296	05139	06407	08621
040	02088	02088	02088	02160	02160	02475	02907	03477	04336	05834
041	03367	03367	03367	03482	03482	03990	04687	05607	06991	09404
042	03140	03140	03140	03247	03247	03722	04371	05229	06519	08770
043	03132	03132	03132	03239	03239	03711	04359	05215	06502	08748
044	02936	02936	02936	03035	03035	03478	04087	04887	06095	08199

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Veneer

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02050	02050	02050	02184	02184	02478	03260	03590	04796	06183
002	01895	01895	01895	02021	02021	02292	03015	03320	04435	05719
003	03446	03446	03446	03674	03674	04166	05481	06036	08064	10397
004	02493	02493	02493	02658	02658	03014	03965	04366	05834	07521
005	02575	02575	02575	02745	02745	03112	04096	04510	06024	07768
006	02506	02506	02506	02671	02671	03029	03986	04389	05863	07559
007	02625	02625	02625	02799	02799	03174	04177	04599	06144	07921
008	02324	02324	02324	02477	02477	02809	03696	04069	05436	07009
009	02438	02438	02438	02600	02600	02948	03879	04271	05705	07357
010	03012	03012	03012	03210	03210	03641	04790	05274	07046	09085
012	02867	02867	02867	03056	03056	03466	04559	05020	06706	08647
017	02043	02043	02043	02177	02177	02470	03249	03578	04779	06162
024	02604	02604	02604	02776	02776	03148	04142	04561	06093	07857
026	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377
033	02666	02666	02666	02843	02843	03223	04241	04671	06238	08045
037	01967	01967	01967	02097	02097	02377	03129	03444	04602	05933
038	01905	01905	01905	02030	02030	02303	03029	03336	04455	05745
039	02570	02570	02570	02741	02741	03108	04089	04503	06015	07756
040	01740	01740	01740	01854	01854	02102	02767	03047	04070	05249
041	02804	02804	02804	02991	02991	03391	04461	04913	06563	08461
042	02616	02616	02616	02788	02788	03163	04161	04582	06120	07892
043	02609	02609	02609	02781	02781	03154	04150	04570	06104	07871
044	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Brick

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02050	02050	02050	02184	02184	02478	03260	03590	04796	06183
002	01895	01895	01895	02021	02021	02292	03015	03320	04435	05719
003	03446	03446	03446	03674	03674	04166	05481	06036	08064	10397
004	02493	02493	02493	02658	02658	03014	03965	04366	05834	07521
005	02575	02575	02575	02745	02745	03112	04096	04510	06024	07768
006	02506	02506	02506	02671	02671	03029	03986	04389	05863	07559
007	02625	02625	02625	02799	02799	03174	04177	04599	06144	07921
008	02324	02324	02324	02477	02477	02809	03696	04069	05436	07009
009	02438	02438	02438	02600	02600	02948	03879	04271	05705	07357
010	03012	03012	03012	03210	03210	03641	04790	05274	07046	09085
012	02867	02867	02867	03056	03056	03466	04559	05020	06706	08647
017	02043	02043	02043	02177	02177	02470	03249	03578	04779	06162
024	02604	02604	02604	02776	02776	03148	04142	04561	06093	07857
026	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377
033	02666	02666	02666	02843	02843	03223	04241	04671	06238	08045
037	01967	01967	01967	02097	02097	02377	03129	03444	04602	05933
038	01905	01905	01905	02030	02030	02303	03029	03336	04455	05745
039	02570	02570	02570	02741	02741	03108	04089	04503	06015	07756
040	01740	01740	01740	01854	01854	02102	02767	03047	04070	05249
041	02804	02804	02804	02991	02991	03391	04461	04913	06563	08461
042	02616	02616	02616	02788	02788	03163	04161	04582	06120	07892
043	02609	02609	02609	02781	02781	03154	04150	04570	06104	07871
044	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Siding

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02461	02461	02461	02545	02545	02916	03425	04096	05108	06873
002	02276	02276	02276	02353	02353	02697	03167	03788	04724	06355
003	04137	04137	04137	04278	04278	04902	05759	06888	08589	11555
004	02993	02993	02993	03095	03095	03546	04166	04983	06213	08358
005	03091	03091	03091	03196	03196	03663	04303	05147	06417	08633
006	03008	03008	03008	03110	03110	03565	04187	05009	06244	08402
007	03152	03152	03152	03260	03260	03735	04388	05249	06544	08803
008	02789	02789	02789	02884	02884	03305	03883	04644	05790	07791
009	02927	02927	02927	03027	03027	03469	04075	04874	06077	08176
010	03615	03615	03615	03738	03738	04285	05032	06020	07506	10097
012	03441	03441	03441	03558	03558	04077	04790	05729	07144	09610
017	02452	02452	02452	02535	02535	02906	03414	04083	05091	06849
024	03126	03126	03126	03233	03233	03704	04351	05205	06490	08732
026	02936	02936	02936	03035	03035	03478	04087	04887	06095	08199
033	03201	03201	03201	03310	03310	03793	04457	05329	06646	08941
037	02361	02361	02361	02442	02442	02797	03287	03931	04901	06594
038	02286	02286	02286	02363	02363	02709	03182	03806	04747	06386
039	03086	03086	03086	03192	03192	03657	04296	05139	06407	08621
040	02088	02088	02088	02160	02160	02475	02907	03477	04336	05834
041	03367	03367	03367	03482	03482	03990	04687	05607	06991	09404
042	03140	03140	03140	03247	03247	03722	04371	05229	06519	08770
043	03132	03132	03132	03239	03239	03711	04359	05215	06502	08748
044	02936	02936	02936	03035	03035	03478	04087	04887	06095	08199

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS BASE RATES

All Peril

SH-7 ELITE

Fire Resistive

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02050	02050	02050	02184	02184	02478	03260	03590	04796	06183
002	01895	01895	01895	02021	02021	02292	03015	03320	04435	05719
003	03446	03446	03446	03674	03674	04166	05481	06036	08064	10397
004	02493	02493	02493	02658	02658	03014	03965	04366	05834	07521
005	02575	02575	02575	02745	02745	03112	04096	04510	06024	07768
006	02506	02506	02506	02671	02671	03029	03986	04389	05863	07559
007	02625	02625	02625	02799	02799	03174	04177	04599	06144	07921
008	02324	02324	02324	02477	02477	02809	03696	04069	05436	07009
009	02438	02438	02438	02600	02600	02948	03879	04271	05705	07357
010	03012	03012	03012	03210	03210	03641	04790	05274	07046	09085
012	02867	02867	02867	03056	03056	03466	04559	05020	06706	08647
017	02043	02043	02043	02177	02177	02470	03249	03578	04779	06162
024	02604	02604	02604	02776	02776	03148	04142	04561	06093	07857
026	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377
033	02666	02666	02666	02843	02843	03223	04241	04671	06238	08045
037	01967	01967	01967	02097	02097	02377	03129	03444	04602	05933
038	01905	01905	01905	02030	02030	02303	03029	03336	04455	05745
039	02570	02570	02570	02741	02741	03108	04089	04503	06015	07756
040	01740	01740	01740	01854	01854	02102	02767	03047	04070	05249
041	02804	02804	02804	02991	02991	03391	04461	04913	06563	08461
042	02616	02616	02616	02788	02788	03163	04161	04582	06120	07892
043	02609	02609	02609	02781	02781	03154	04150	04570	06104	07871
044	02445	02445	02445	02607	02607	02957	03889	04283	05721	07377

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
15,000	0.450	220,000	1.365
20,000	0.469	225,000	1.390
25,000	0.488	230,000	1.414
30,000	0.507	235,000	1.439
35,000	0.525	240,000	1.463
40,000	0.544	245,000	1.485
45,000	0.563	250,000	1.507
50,000	0.582	260,000	1.549
55,000	0.601	270,000	1.591
60,000	0.620	280,000	1.639
65,000	0.639	290,000	1.687
70,000	0.658	300,000	1.721
75,000	0.676	350,000	1.911
80,000	0.695	400,000	2.102
85,000	0.714	450,000	2.294
90,000	0.733	500,000	2.500
95,000	0.751	550,000	2.699
100,000	0.769	600,000	2.897
105,000	0.795	650,000	3.096
110,000	0.821	700,000	3.284
115,000	0.839	750,000	3.482
120,000	0.866	800,000	3.680
125,000	0.893	850,000	3.877
130,000	0.910	900,000	4.075
135,000	0.937	950,000	4.273
140,000	0.955	1,000,000	4.470
145,000	0.982	1,100,000	4.865
150,000	1.000	1,200,000	5.261
155,000	1.028	1,300,000	5.656
160,000	1.054	1,400,000	6.029
165,000	1.081	1,500,000	6.423
170,000	1.107	1,600,000	6.816
175,000	1.134	1,700,000	7.211
180,000	1.161	1,800,000	7.605
185,000	1.187	1,900,000	7.999
190,000	1.213	2,000,000	8.394
195,000	1.239	2,100,000	8.788
200,000	1.265	2,200,000	9.183
205,000	1.290	2,300,000	9.578
210,000	1.315	2,400,000	9.974
215,000	1.340	2,500,000	10.369
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
60,000	0.620	245,000	1.485
65,000	0.639	250,000	1.507
70,000	0.658	260,000	1.549
75,000	0.676	270,000	1.591
80,000	0.695	280,000	1.639
85,000	0.714	290,000	1.687
90,000	0.733	300,000	1.721
95,000	0.751	350,000	1.911
100,000	0.769	400,000	2.102
105,000	0.795	450,000	2.294
110,000	0.821	500,000	2.500
115,000	0.839	550,000	2.699
120,000	0.866	600,000	2.897
125,000	0.893	650,000	3.096
130,000	0.910	700,000	3.284
135,000	0.937	750,000	3.482
140,000	0.955	800,000	3.680
145,000	0.982	850,000	3.877
150,000	1.000	900,000	4.075
155,000	1.028	950,000	4.273
160,000	1.054	1,000,000	4.470
165,000	1.081	1,100,000	4.865
170,000	1.107	1,200,000	5.261
175,000	1.134	1,300,000	5.656
180,000	1.161	1,400,000	6.029
185,000	1.187	1,500,000	6.423
190,000	1.213	1,600,000	6.816
195,000	1.239	1,700,000	7.211
200,000	1.265	1,800,000	7.605
205,000	1.290	1,900,000	7.999
210,000	1.315	2,000,000	8.394
215,000	1.340	2,100,000	8.788
220,000	1.365	2,200,000	9.183
225,000	1.390	2,300,000	9.578
230,000	1.414	2,400,000	9.974
235,000	1.439	2,500,000	10.369
240,000	1.463		
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34

MINIMUM DEDUCT \$1000 \$1000 \$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail		-----					
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

	\$500	\$1000	\$2000	\$3000	\$5000
All Peril	-----	-----	-----	-----	-----

	0.33	0.00	-0.15	-0.25	-0.35
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MAX PREM ADJ			\$75	\$150	\$300
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ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34

MINIMUM DEDUCT \$1000 \$1000 \$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL PROPERTY AND CASUALTY CO
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-7 ELITE

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail							
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National Property And Casualty Company	B.	408-28401

		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.	4.0 Homeowners	B.	4.0000 Homeowners Sub-TOI Combinations

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
SH-3 & SH-7	26.0%	Capped 12.3% Uncapped 25.3%					
SH-4 & SH-6	-4.6%	0.0%					
TOTAL OVERALL EFFECT	25.5%	Capped 12.1% Uncapped 24.9%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	5263	N/A	N/A	3738	1174	31.4%	49.3%
2006	5267	N/A	N/A	3748	2511	67.0%	60.5%
2007	5142	-0.0%	3/1/07	3728	1635	43.8%	55.4%
2008	5021	-2.9%	5/14/08	3893	11869	304.9%	102.2%
2009	4950	9.6%	6/24/09	3789	2643	69.8%	90.3%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 20.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____ 037 _____

10. -50.6% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____ 002 _____

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National General Insurance Company	B.	408-39942

		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.	4.0 Homeowners	B.	4.0000 Homeowners Sub-TOI Combinations

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
SH-3	26.0%	Capped 11.6% Uncapped 20.4%					
SH-4 & SH-6	-4.6%	-8.0%					
TOTAL OVERALL EFFECT	25.5%	Capped 11.2% Uncapped 19.7%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	279	N/A	N/A	277	-35	-12.6%	234.6%
2006	210	N/A	N/A	249	124	49.7%	94.9%
2007	119	48.8%	3/1/07	235	56	23.7%	43.1%
2008	188	-44.1%	5/14/08	179	299	166.4%	81.8%
2009	314	1.0%	6/24/09	167	97	58.0%	80.7%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 20.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____008_____

10. -28.5% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____009_____

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National Property And Casualty Company	B.		408-28401

		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.	4.0 Homeowners	B.		4.0000 Homeowners Sub-TOI Combinations

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
SH-3 & SH-7	43.2%	25.3%					
SH-4 & SH-6	-4.6%	0.0%					
TOTAL OVERALL EFFECT	42.4%	24.9%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	5263	N/A	N/A	3738	1174	31.4%	49.3%
2006	5267	N/A	N/A	3748	2511	67.0%	60.5%
2007	5142	-0.0%	3/1/07	3728	1635	43.8%	55.4%
2008	5021	-2.9%	5/14/08	3893	11869	304.9%	102.2%
2009	4950	9.6%	6/24/09	3789	2643	69.8%	90.3%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 166.5% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____037_____

10. -50.6% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____002_____

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Frame

The premiums shown include section II limits of
\$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02019	02019	02019	02088	02088	02392	02810	03361	04191	05639
002	01867	01867	01867	01931	01931	02213	02599	03108	03876	05215
003	03395	03395	03395	03510	03510	04022	04725	05652	07047	09481
004	02456	02456	02456	02539	02539	02910	03419	04089	05098	06858
005	02536	02536	02536	02623	02623	03006	03531	04223	05266	07084
006	02468	02468	02468	02552	02552	02925	03436	04110	05124	06894
007	02586	02586	02586	02675	02675	03064	03600	04307	05369	07223
008	02289	02289	02289	02366	02366	02712	03186	03810	04751	06393
009	02402	02402	02402	02484	02484	02846	03344	03999	04986	06708
010	02966	02966	02966	03067	03067	03516	04129	04939	06158	08285
012	02823	02823	02823	02919	02919	03346	03930	04701	05862	07885
017	02012	02012	02012	02080	02080	02385	02801	03350	04177	05620
024	02565	02565	02565	02652	02652	03039	03570	04271	05325	07164
026	02409	02409	02409	02490	02490	02854	03353	04010	05001	06728
033	02627	02627	02627	02716	02716	03112	03657	04373	05453	07336
037	01937	01937	01937	02004	02004	02295	02697	03226	04021	05411
038	01876	01876	01876	01939	01939	02222	02611	03123	03895	05240
039	02532	02532	02532	02619	02619	03001	03525	04216	05257	07073
040	01714	01714	01714	01772	01772	02030	02386	02853	03558	04787
041	02763	02763	02763	02857	02857	03274	03846	04600	05736	07716
042	02577	02577	02577	02664	02664	03054	03587	04290	05349	07196
043	02570	02570	02570	02657	02657	03045	03577	04279	05335	07178
044	02409	02409	02409	02490	02490	02854	03353	04010	05001	06728

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Veneer

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01682	01682	01682	01792	01792	02033	02675	02945	03935	05074
002	01555	01555	01555	01658	01658	01881	02474	02724	03639	04692
003	02827	02827	02827	03014	03014	03419	04498	04953	06616	08531
004	02046	02046	02046	02181	02181	02473	03253	03583	04787	06171
005	02113	02113	02113	02252	02252	02554	03361	03701	04943	06373
006	02056	02056	02056	02192	02192	02485	03271	03601	04811	06203
007	02154	02154	02154	02296	02296	02604	03427	03774	05041	06499
008	01907	01907	01907	02032	02032	02305	03033	03339	04460	05751
009	02001	02001	02001	02133	02133	02419	03182	03504	04681	06036
010	02471	02471	02471	02634	02634	02988	03930	04328	05781	07454
012	02352	02352	02352	02508	02508	02844	03741	04119	05503	07095
017	01676	01676	01676	01787	01787	02027	02666	02936	03922	05056
024	02137	02137	02137	02278	02278	02583	03398	03742	05000	06446
026	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053
033	02188	02188	02188	02333	02333	02645	03480	03832	05119	06601
037	01614	01614	01614	01720	01720	01951	02567	02826	03776	04868
038	01563	01563	01563	01666	01666	01889	02485	02737	03656	04714
039	02109	02109	02109	02249	02249	02550	03355	03695	04935	06364
040	01428	01428	01428	01522	01522	01725	02270	02500	03340	04307
041	02301	02301	02301	02454	02454	02782	03660	04031	05385	06943
042	02147	02147	02147	02288	02288	02595	03414	03759	05022	06475
043	02141	02141	02141	02282	02282	02588	03405	03750	05008	06458
044	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Brick

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01682	01682	01682	01792	01792	02033	02675	02945	03935	05074
002	01555	01555	01555	01658	01658	01881	02474	02724	03639	04692
003	02827	02827	02827	03014	03014	03419	04498	04953	06616	08531
004	02046	02046	02046	02181	02181	02473	03253	03583	04787	06171
005	02113	02113	02113	02252	02252	02554	03361	03701	04943	06373
006	02056	02056	02056	02192	02192	02485	03271	03601	04811	06203
007	02154	02154	02154	02296	02296	02604	03427	03774	05041	06499
008	01907	01907	01907	02032	02032	02305	03033	03339	04460	05751
009	02001	02001	02001	02133	02133	02419	03182	03504	04681	06036
010	02471	02471	02471	02634	02634	02988	03930	04328	05781	07454
012	02352	02352	02352	02508	02508	02844	03741	04119	05503	07095
017	01676	01676	01676	01787	01787	02027	02666	02936	03922	05056
024	02137	02137	02137	02278	02278	02583	03398	03742	05000	06446
026	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053
033	02188	02188	02188	02333	02333	02645	03480	03832	05119	06601
037	01614	01614	01614	01720	01720	01951	02567	02826	03776	04868
038	01563	01563	01563	01666	01666	01889	02485	02737	03656	04714
039	02109	02109	02109	02249	02249	02550	03355	03695	04935	06364
040	01428	01428	01428	01522	01522	01725	02270	02500	03340	04307
041	02301	02301	02301	02454	02454	02782	03660	04031	05385	06943
042	02147	02147	02147	02288	02288	02595	03414	03759	05022	06475
043	02141	02141	02141	02282	02282	02588	03405	03750	05008	06458
044	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Siding

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	02019	02019	02019	02088	02088	02392	02810	03361	04191	05639
002	01867	01867	01867	01931	01931	02213	02599	03108	03876	05215
003	03395	03395	03395	03510	03510	04022	04725	05652	07047	09481
004	02456	02456	02456	02539	02539	02910	03419	04089	05098	06858
005	02536	02536	02536	02623	02623	03006	03531	04223	05266	07084
006	02468	02468	02468	02552	02552	02925	03436	04110	05124	06894
007	02586	02586	02586	02675	02675	03064	03600	04307	05369	07223
008	02289	02289	02289	02366	02366	02712	03186	03810	04751	06393
009	02402	02402	02402	02484	02484	02846	03344	03999	04986	06708
010	02966	02966	02966	03067	03067	03516	04129	04939	06158	08285
012	02823	02823	02823	02919	02919	03346	03930	04701	05862	07885
017	02012	02012	02012	02080	02080	02385	02801	03350	04177	05620
024	02565	02565	02565	02652	02652	03039	03570	04271	05325	07164
026	02409	02409	02409	02490	02490	02854	03353	04010	05001	06728
033	02627	02627	02627	02716	02716	03112	03657	04373	05453	07336
037	01937	01937	01937	02004	02004	02295	02697	03226	04021	05411
038	01876	01876	01876	01939	01939	02222	02611	03123	03895	05240
039	02532	02532	02532	02619	02619	03001	03525	04216	05257	07073
040	01714	01714	01714	01772	01772	02030	02386	02853	03558	04787
041	02763	02763	02763	02857	02857	03274	03846	04600	05736	07716
042	02577	02577	02577	02664	02664	03054	03587	04290	05349	07196
043	02570	02570	02570	02657	02657	03045	03577	04279	05335	07178
044	02409	02409	02409	02490	02490	02854	03353	04010	05001	06728

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-3 SPECIAL

Fire Resistive

The premiums shown include section II limits of
 \$300,000 Liability and \$2,000 Medical Payments

Base Deductible \$1000

Based on \$150,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	01682	01682	01682	01792	01792	02033	02675	02945	03935	05074
002	01555	01555	01555	01658	01658	01881	02474	02724	03639	04692
003	02827	02827	02827	03014	03014	03419	04498	04953	06616	08531
004	02046	02046	02046	02181	02181	02473	03253	03583	04787	06171
005	02113	02113	02113	02252	02252	02554	03361	03701	04943	06373
006	02056	02056	02056	02192	02192	02485	03271	03601	04811	06203
007	02154	02154	02154	02296	02296	02604	03427	03774	05041	06499
008	01907	01907	01907	02032	02032	02305	03033	03339	04460	05751
009	02001	02001	02001	02133	02133	02419	03182	03504	04681	06036
010	02471	02471	02471	02634	02634	02988	03930	04328	05781	07454
012	02352	02352	02352	02508	02508	02844	03741	04119	05503	07095
017	01676	01676	01676	01787	01787	02027	02666	02936	03922	05056
024	02137	02137	02137	02278	02278	02583	03398	03742	05000	06446
026	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053
033	02188	02188	02188	02333	02333	02645	03480	03832	05119	06601
037	01614	01614	01614	01720	01720	01951	02567	02826	03776	04868
038	01563	01563	01563	01666	01666	01889	02485	02737	03656	04714
039	02109	02109	02109	02249	02249	02550	03355	03695	04935	06364
040	01428	01428	01428	01522	01522	01725	02270	02500	03340	04307
041	02301	02301	02301	02454	02454	02782	03660	04031	05385	06943
042	02147	02147	02147	02288	02288	02595	03414	03759	05022	06475
043	02141	02141	02141	02282	02282	02588	03405	03750	05008	06458
044	02006	02006	02006	02139	02139	02426	03191	03515	04694	06053

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
002	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
003	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
004	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
005	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
006	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
007	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
008	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
009	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
010	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
012	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
017	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
024	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
026	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
033	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
037	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
038	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
039	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
040	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236
041	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
042	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
043	00181	00181	00181	00181	00181	00181	00181	00197	00270	00292
044	00147	00147	00147	00147	00147	00147	00147	00159	00219	00236

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-4 TENANT

5 - 99 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
002	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
003	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
004	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
005	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
006	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
007	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
008	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
009	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
010	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
012	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
017	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
024	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
026	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
033	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
037	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
038	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
039	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
040	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264
041	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
042	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
043	00193	00193	00193	00193	00193	00193	00202	00202	00296	00326
044	00156	00156	00156	00156	00156	00156	00163	00163	00240	00264

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 1 - 4 Units

The premiums shown include section II limits of
 \$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
002	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
003	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
004	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
005	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
006	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
007	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
008	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
009	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
010	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
012	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
017	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
024	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
026	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
033	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
037	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
038	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
039	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
040	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318
041	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
042	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
043	00245	00245	00245	00245	00245	00245	00245	00265	00364	00394
044	00198	00198	00198	00198	00198	00198	00198	00214	00295	00318

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS BASE RATES

All Peril

SH-6 CONDOMINIUM 5 - 99 Units

The premiums shown include section II limits of
\$100,000 Liability and \$1,000 Medical Payments

Base Deductible \$1000

Based on \$20,000 coverage

ZONE	PROTECTION CLASSES									
	01	02	03	04	05	06	07	08	09	10
001	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
002	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
003	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
004	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
005	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
006	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
007	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
008	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
009	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
010	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
012	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
017	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
024	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
026	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
033	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
037	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
038	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
039	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
040	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355
041	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
042	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
043	00261	00261	00261	00261	00261	00261	00273	00273	00399	00440
044	00210	00210	00210	00210	00210	00210	00220	00220	00323	00355

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS	AMOUNT OF COVERAGE	RELATIVITY FACTORS
15,000	0.450	220,000	1.365
20,000	0.469	225,000	1.390
25,000	0.488	230,000	1.414
30,000	0.507	235,000	1.439
35,000	0.525	240,000	1.463
40,000	0.544	245,000	1.485
45,000	0.563	250,000	1.507
50,000	0.582	260,000	1.549
55,000	0.601	270,000	1.591
60,000	0.620	280,000	1.639
65,000	0.639	290,000	1.687
70,000	0.658	300,000	1.721
75,000	0.676	350,000	1.911
80,000	0.695	400,000	2.102
85,000	0.714	450,000	2.294
90,000	0.733	500,000	2.500
95,000	0.751	550,000	2.699
100,000	0.769	600,000	2.897
105,000	0.795	650,000	3.096
110,000	0.821	700,000	3.284
115,000	0.839	750,000	3.482
120,000	0.866	800,000	3.680
125,000	0.893	850,000	3.877
130,000	0.910	900,000	4.075
135,000	0.937	950,000	4.273
140,000	0.955	1,000,000	4.470
145,000	0.982	1,100,000	4.865
150,000	1.000	1,200,000	5.261
155,000	1.028	1,300,000	5.656
160,000	1.054	1,400,000	6.029
165,000	1.081	1,500,000	6.423
170,000	1.107	1,600,000	6.816
175,000	1.134	1,700,000	7.211
180,000	1.161	1,800,000	7.605
185,000	1.187	1,900,000	7.999
190,000	1.213	2,000,000	8.394
195,000	1.239	2,100,000	8.788
200,000	1.265	2,200,000	9.183
205,000	1.290	2,300,000	9.578
210,000	1.315	2,400,000	9.974
215,000	1.340	2,500,000	10.369
		EACH ADDITIONAL	
		5,000	0.025

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS COVERAGE AMOUNT RELATIVITY FACTORS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

AMOUNT OF COVERAGE	RELATIVITY FACTORS
10,000	0.675
15,000	0.846
20,000	1.000
25,000	1.114
30,000	1.234
35,000	1.349
40,000	1.464
45,000	1.579
50,000	1.694
55,000	1.809
60,000	1.924
65,000	2.039
70,000	2.154
75,000	2.269
80,000	2.384
85,000	2.499
90,000	2.614
95,000	2.729
100,000	2.844
EACH ADDITIONAL 1,000	0.023

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	All Peril							
15,000 & UNDER	n/a	0.00	-0.15	-0.29	-0.57	0.00	0.00	-0.15
20,000	n/a	0.00	-0.15	-0.29	-0.56	0.00	0.00	-0.15
25,000	n/a	0.00	-0.15	-0.28	-0.55	0.00	0.00	-0.15
30,000	n/a	0.00	-0.14	-0.28	-0.55	0.00	0.00	-0.14
35,000	n/a	0.00	-0.14	-0.28	-0.54	0.00	0.00	-0.14
40,000	n/a	0.00	-0.14	-0.27	-0.54	0.00	0.00	-0.14
45,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
50,000	n/a	0.00	-0.14	-0.27	-0.53	0.00	0.00	-0.14
55,000	n/a	0.00	-0.14	-0.26	-0.52	0.00	0.00	-0.14
60,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
65,000	n/a	0.00	-0.13	-0.26	-0.52	0.00	0.00	-0.13
70,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
75,000	n/a	0.00	-0.13	-0.26	-0.51	0.00	0.00	-0.13
80,000	n/a	0.00	-0.13	-0.25	-0.51	0.00	0.00	-0.13
85,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
90,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
95,000	n/a	0.00	-0.13	-0.25	-0.50	0.00	0.00	-0.13
100,000	n/a	0.00	-0.13	-0.25	-0.49	0.00	0.00	-0.13
105,000	n/a	0.00	-0.12	-0.24	-0.48	0.00	-0.01	-0.14
110,000	n/a	0.00	-0.12	-0.23	-0.47	0.00	-0.02	-0.15
115,000	n/a	0.00	-0.12	-0.23	-0.46	0.00	-0.02	-0.15
120,000	n/a	0.00	-0.12	-0.22	-0.44	0.00	-0.02	-0.15
125,000	n/a	0.00	-0.11	-0.22	-0.43	0.00	-0.03	-0.17
130,000	n/a	0.00	-0.11	-0.21	-0.43	0.00	-0.03	-0.17
135,000	n/a	0.00	-0.10	-0.21	-0.41	0.00	-0.04	-0.18
140,000	n/a	0.00	-0.10	-0.20	-0.40	0.00	-0.04	-0.18
145,000	n/a	0.00	-0.10	-0.20	-0.39	0.00	-0.05	-0.19
150,000	n/a	0.00	-0.10	-0.19	-0.39	0.00	-0.05	-0.19
155,000	n/a	0.00	-0.10	-0.18	-0.37	0.00	-0.05	-0.20
160,000	n/a	0.00	-0.09	-0.18	-0.37	0.00	-0.05	-0.20
165,000	n/a	0.00	-0.09	-0.18	-0.36	0.00	-0.06	-0.21
170,000	n/a	0.00	-0.09	-0.18	-0.35	0.00	-0.06	-0.22
175,000	n/a	0.00	-0.09	-0.17	-0.34	0.00	-0.06	-0.22
200,000	n/a	0.00	-0.08	-0.15	-0.31	0.00	-0.08	-0.24
250,000	n/a	0.00	-0.07	-0.13	-0.26	-0.01	-0.10	-0.26
300,000	n/a	0.00	-0.06	-0.11	-0.23	-0.03	-0.11	-0.27
350,000	n/a	0.00	-0.05	-0.10	-0.20	-0.04	-0.12	-0.28
400,000	n/a	0.00	-0.05	-0.09	-0.18	-0.05	-0.13	-0.29
500,000	n/a	0.00	-0.04	-0.08	-0.14	-0.06	-0.14	-0.30
600,000	n/a	0.00	-0.03	-0.06	-0.13	-0.06	-0.15	-0.31
750,000	n/a	0.00	-0.03	-0.05	-0.11	-0.07	-0.16	-0.32
1,000,000	n/a	0.00	-0.02	-0.04	-0.09	-0.09	-0.16	-0.32
1,500,000	n/a	0.00	-0.02	-0.03	-0.06	-0.09	-0.17	-0.33
2,000,000	n/a	0.00	-0.02	-0.03	-0.05	-0.09	-0.17	-0.34
2,500,000 & OVER	n/a	0.00	-0.01	-0.02	-0.03	-0.09	-0.17	-0.34
MINIMUM DEDUCT						\$1000	\$1000	\$2000

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
 HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-3 SPECIAL

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
 042 043 044

AMOUNT OF COVERAGE	\$500	\$1000	\$2000	\$3000	\$5000	.5%	1%	2%
	1% Wind & Hail		-----					
15,000 & UNDER	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
20,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
25,000	0.06	0.00	-0.15	n/a	n/a	n/a	n/a	n/a
30,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
35,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
40,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
45,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
50,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
55,000	0.06	0.00	-0.14	n/a	n/a	n/a	n/a	n/a
60,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
65,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
70,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
75,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
80,000	0.06	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
85,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
90,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
95,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
100,000	0.05	0.00	-0.13	n/a	n/a	n/a	n/a	n/a
105,000	0.05	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
110,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
115,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
120,000	0.04	-0.01	-0.12	n/a	n/a	n/a	n/a	n/a
125,000	0.04	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
130,000	0.03	-0.02	-0.11	n/a	n/a	n/a	n/a	n/a
135,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
140,000	0.03	-0.02	-0.10	n/a	n/a	n/a	n/a	n/a
145,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
150,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
155,000	0.02	-0.03	-0.10	n/a	n/a	n/a	n/a	n/a
160,000	0.02	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
165,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
170,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
175,000	0.01	-0.03	-0.09	n/a	n/a	n/a	n/a	n/a
200,000	0.00	-0.04	-0.09	n/a	n/a	n/a	n/a	n/a
250,000	-0.02	-0.05	-0.09	n/a	n/a	n/a	n/a	n/a
300,000	-0.02	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
350,000	-0.03	-0.06	-0.09	n/a	n/a	n/a	n/a	n/a
400,000	-0.04	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
500,000	-0.05	-0.07	-0.09	n/a	n/a	n/a	n/a	n/a
600,000	-0.05	-0.08	-0.09	n/a	n/a	n/a	n/a	n/a
750,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,000,000	-0.06	-0.08	-0.10	n/a	n/a	n/a	n/a	n/a
1,500,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,000,000	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a
2,500,000 & OVER	-0.06	-0.09	-0.10	n/a	n/a	n/a	n/a	n/a

MINIMUM DEDUCT
 NON-Wind/Hail

Wind/Hail \$1000 \$1000 \$2000

Wind/Hail DEDUCTIBLE CAN NOT BE LOWER THAN NON-Wind/Hail DEDUCTIBLE

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-4 TENANT

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

AMERICAN NATIONAL GENERAL INSURANCE COMPANY
HOMEOWNERS DEDUCTIBLE ADJUSTMENTS

All Peril

SH-6 CONDOMINIUM

ZONE 001 002 003 004 005 006 007 008 009 010 012 017 024 026 033 037 038 039 040 041
042 043 044

\$500 \$1000 \$2000 \$3000 \$5000
All Peril -----

0.33 0.00 -0.15 -0.25 -0.35

MAX PREM ADJ \$75 \$150 \$300

ALL PERIL DEDUCTIBLE FACTORS SAME FOR ALL ZONES.

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **03-H-G-10-0232**

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.	American National General Insurance Company	B.	408-39942

		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.	4.0 Homeowners	B.	4.0000 Homeowners Sub-TOI Combinations

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
SH-3	43.2%	20.4%					
SH-4 & SH-6	-4.6%	-8.0%					
TOTAL OVERALL EFFECT	42.4%	19.7%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2005	279	N/A	N/A	277	-35	-12.6%	234.6%
2006	210	N/A	N/A	249	124	49.7%	94.9%
2007	119	48.8%	3/1/07	235	56	23.7%	43.1%
2008	188	-44.1%	5/14/08	179	299	166.4%	81.8%
2009	314	1.0%	6/24/09	167	97	58.0%	80.7%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.6%
B. General Expense	0.9%
C. Taxes, License & Fees	3.0%
D. Underwriting Profit & Contingencies	11.9%
E. Other (explain) Reinsure Exp	4.3%
F. TOTAL	36.7%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 76.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____ 008 _____

10. -28.5% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____ 009 _____

**Rate Data for Homeowners SERFF Filings
American National Property And Casualty Company & American National General
Insurance Company**

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

9.3%

Effective Date of Last Rate Revision:

6/24/09 NB & RB

Company Rate Information

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):
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ANPAC

25.5%	Capped 12.1% Uncapped 24.9%	Capped \$543,346 Uncapped \$1,116,375	4,931	\$4,484,631	Capped 20.0% Uncapped 166.5%	-50.6%
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ANG

25.5%	Capped 11.2% Uncapped 19.7%	Capped \$23,183 Uncapped \$40,856	324	\$207,187	Capped 20.0% Uncapped 76.0%	-28.5%
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Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated	25.5%
Overall Percentage Rate Impact for this Filing	Capped 12.1% Uncapped 24.7%
Effect of Rate Filing – Written Premium Change for this Program	Capped \$566,529 Uncapped \$1,157,231
Effect of Rate Filing – Number of Policyholders Affected	5,255