

SERFF Tracking Number: FCNS-127331730 State: Arkansas
Filing Company: Southern Insurance Company State Tracking Number:
Company Tracking Number: SICAR090111R
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Nonstandard Private Passenger Auto
Project Name/Number: /

Filing at a Glance

Company: Southern Insurance Company

Product Name: Nonstandard Private Passenger SERFF Tr Num: FCNS-127331730 State: Arkansas
Auto

TOI: 19.0 Personal Auto

SERFF Status: Closed-Filed

State Tr Num:

Sub-TOI: 19.0001 Private Passenger Auto
(PPA)

Co Tr Num: SICAR090111R

State Status:

Filing Type: Rate/Rule

Reviewer(s): Alexa Grissom, Nancy
Horton

Author: Rob Marks

Disposition Date: 08/02/2011

Date Submitted: 07/21/2011

Disposition Status: Filed

Effective Date Requested (New): 09/01/2011

Effective Date (New): 09/01/2011

Effective Date Requested (Renewal): 09/01/2011

Effective Date (Renewal):

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Not Filed

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 08/02/2011

State Status Changed:

Deemer Date:

Created By: Rob Marks

Submitted By: Rob Marks

Corresponding Filing Tracking Number:

Filing Description:

Four Corners Insurance Services, on behalf of Southern Insurance Company, is filing revisions to current rates and rules applicable to Southern Insurance Company's Nonstandard Private Passenger Auto Program for the State of Arkansas. Current Southern Insurance Company Arkansas rates and rules were filed with the Arkansas Insurance Department through company filing number SICAR022511R, SERFF Tracking Number FCNS-127003130, effective February 25, 2011.

We are estimating that the revisions proposed within this filing will result in a decrease in the overall rate level of -7.4% based on Southern Insurance Company's Arkansas written premium distribution for the period of May 15, 2010 through March 31, 2011. Please see our rate filing memorandum and filing exhibits under the "Supporting Documentation"

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portion of this filing for more detail concerning the rate and rule revisions proposed.

It is our opinion that the Southern Insurance Company rates proposed are not excessive, inadequate, nor unfairly discriminatory as defined by 23-67-208 of the Arkansas Insurance Code. The rates and rules presented herein will become effective for all new and renewal Southern Insurance Company Arkansas auto policies issued on or after September 1, 2011.

Company and Contact

Filing Contact Information

Robert Marks, Statistical Analyst RMarks@4cis.com
 Four Corners Insurance Services, Inc. 800-223-6973 [Phone] 206 [Ext]
 P.O. Box 80260 866-812-9620 [FAX]
 Phoenix, AZ 85060-0260

Filing Company Information

Southern Insurance Company CoCode: 19216 State of Domicile: Texas
 5525 LBJ Freeway Group Code: Company Type:
 Dallas, TX 75240-6241 Group Name: The Republic Group State ID Number:
 (800) 223-6973 ext. 206[Phone] FEIN Number: 75-6021170

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? No
 Fee Explanation: Arkansas Rate/Rule Filing Fee
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Southern Insurance Company	\$100.00	07/21/2011	49976851

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	08/02/2011	08/02/2011

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Disposition

Disposition Date: 08/02/2011
 Effective Date (New): 09/01/2011
 Effective Date (Renewal):
 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):
Southern Insurance Company	0.000%	-7.400%	\$-16,712	604	\$227,014	8.500%	-36.500%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	A-1 Private Passenger Auto Abstract	Filed	Yes
Supporting Document	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	SIC Arkansas Underwriting/Rate/Rule Manual Eff 9-1-11 Redline Copy	Filed	Yes
Supporting Document	Arkansas Filing Memorandum	Filed	Yes
Supporting Document	Exhibit 1, Summary of Territorial Base Rates and Factors	Filed	Yes
Supporting Document	Exhibit 2, Proposed Rate Change Summary	Filed	Yes
Supporting Document	Exhibit 3, Proposed Changes to Territorial Base Rates	Filed	Yes
Supporting Document	Exhibit 4, Proposed Changes to Driver Class Relativities	Filed	Yes
Supporting Document	Exhibit 5, Summary and Effect of Vehicle Symbol Relativity Changes	Filed	Yes
Supporting Document	Exhibit 6, Summary and Effect of Vehicle Model Year Relativity Changes	Filed	Yes
Supporting Document	Exhibit 7, Effect of Policy and Service Fee Changes	Filed	Yes
Rate	SIC Arkansas Underwriting/Rate/Rule Manual	Filed	Yes
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Rate Information

Rate data applies to filing.

Filing Method:	File and Use
Rate Change Type:	Decrease
Overall Percentage of Last Rate Revision:	-6.500%
Effective Date of Last Rate Revision:	02/25/2011
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):
Southern Insurance Company	0.000%	-7.400%	\$-16,712	604	\$227,014	8.500%	-36.500%

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Rate/Rule Schedule

Schedule Item Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Number:	Filing Attachments
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule I(A), Eligible Risks/Vehicles	Replacement	SICAR022511R	ARMan090111 01.pdf
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule I(B), Maximums	Replacement	SICAR022511R	
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule I(D), Prohibited Vehicles - All Coverages	Replacement	SICAR022511R	
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule I(E), Prohibited Vehicles For Physical Damage Coverage	Withdrawn	SICAR022511R	
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule II(B), Billing & Payment Procedures	Replacement	SICAR022511R	
Filed 08/02/2011	SIC Arkansas Underwriting/Rate/Rule Manual	Rule III(A), Policy Fee	Replacement	SICAR022511R	

**Arkansas Semi-Annual Program
Private Passenger Automobile**

Rates Effective: September 1, 2011



**FOUR CORNERS
INSURANCE SERVICES, INC.**

WWW.4CIS.COM

P.O. Box 80260
Phoenix, Arizona 85060-0260
(602) 280-9500
(800) 223-6973

Underwritten by Southern Insurance Company
A company of The Republic Group





FOUR CORNERS INSURANCE SERVICES



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I. UNDERWRITING RULES

A. ELIGIBLE RISKS / VEHICLES

1. Private passenger automobiles including vehicles leased to an individual for six months or more.
2. Private passenger automobiles including vehicles rented to an individual for six months or more under a rent-to-own contract. Please fax a copy of the rent-to-own contract to Four Corner's Insurance Services including the name of the Insured and policy number to 1-800-828-5349.
3. Pickup trucks and vans not exceeding 3/4 ton capacity and not used commercially.
4. Pickup trucks and vans not exceeding one (1) ton capacity primarily used in farm or ranch operations.
5. Drivers with foreign or international licenses.

B. MAXIMUMS

Vehicle age (liability only) - 35 years

Physical damage - 15 years

Number of vehicles - 3 per policy

C. PROHIBITED RISKS

The following are situations involving the driver, vehicle use, or vehicle type which are ineligible for coverage:

1. Alcohol or drug dependency. More than 1 conviction in the past 36 months, whether convicted while driving or otherwise.
2. Excessive accidents. More than 2 at-fault accidents in 36 months, per driver
3. More than 1 major violation in 36 months, per driver.
4. Vehicles owned by a corporation or partnership.
5. Vehicles garaged out of state.
6. Drivers with more than 10 points.
7. Non-owner policies.

8. Drivers over 75 years of age.

D. PROHIBITED VEHICLES - ALL COVERAGES

1. Any vehicle not found in ISO Automobile Manual pages other than pick-ups and vans.
2. 1989 and older vehicles with a symbol of 19 or higher, 1990 through 2010 vehicles with a symbol of 22 or higher or 2011 and newer vehicles with a symbol of 46 or higher.
3. Emergency vehicles, vehicles used for delivery or taxi service including vehicles used for transporting school children or migrant workers, racing vehicles, driver training cars, collection, mail and newspaper delivery vehicles.
4. Vehicles that the applicant or Insured rents to others.
5. Vehicles used in speed contests.
6. Altered vehicles (unless modified for handicapped operators).
7. Vehicles garaged outside of Arkansas, including vehicles used by students attending school outside of Arkansas.
8. Custom/kit-car vehicles, Antique vehicles, Classic vehicles, Replica vehicles, Dune buggies.
9. Trucks with rated capacity over 1 ton.
10. Vehicles with less than 4 wheels.
11. Motor Homes & Recreational vehicles.
12. Pick-up trucks and vans owned by self-employed individuals.
13. Customized or conversion vans.
14. Vehicles with existing damage - physical damage coverage only.
15. Vehicles with lift kits that are more than 6 inches.
16. Limousines
17. Individually owned private passenger automobiles used for business purposes.

The following vehicles are not acceptable for any coverage: Acura NSX, Chevrolet Camaro Z-28, Chevrolet Camaro IROC - Z, Chevrolet Corvette, Dodge Stealth, Dodge Viper, Ferrari (All models), Ford Mustang Cobra, Ford Mustang GT, Ford Mustang SVO, Lamborghini (All Models), Lotus (All models), Maserati (All Models), Mitsubishi 3000 GT, Nissan (All "Z" series), Porsche (All Models)

Every situation cannot be addressed completely. Four Corners Insurance Services reserves the right to final determination on the acceptability of all risks.

E. SUBMIT ONLY

Call for underwriting approval before an application is submitted on physically handicapped operators.

All persons with Epilepsy, Stroke, Heart Disease, Diabetes, Loss of Eye, and/or Cerebral Palsy must submit with the application a Four Corners Medical Statement form (as provided as part of the Underwriting Guidelines) signed by a physician.

All persons with a loss of limb(s) must submit proof of compensatory vehicle modification. Proof is a written or typed statement signed by the insured.

Applications with a driver(s) over 70 years old must be submitted unbound and with a Medical Statement form signed by a physician. We will notify you whether the risk is acceptable upon review of the physician's statement.

F. Hurricane or Tropical Storm Threat

Once the U.S. Weather Service has advised that a tropical disturbance has reached the coordinates of 80 degrees west longitude and 20 degrees north latitude, no coverage can be bound or increased. Consult posted warning messages for more specific information. This suspension will remain in effect until 24 hours after the storm has reached land and/or no longer poses a threat. Any questions and special needs must be discussed with a Company representative.



II. POLICY ADMINISTRATION



A. POLICY TERM

Coverage is written for a 6 month period.

B. BILLING & PAYMENT PROCEDURES

No coverage is bound or will be afforded if premium remittance is returned for nonsufficient funds or not honored for any reason upon first presentation to the bank. Coverage will be rescinded for this condition.

We offer a pay-in-full option and a direct bill installment payment plan:

1. **Full payment.** Remit the full term premium plus a \$35.00 policy fee and SR22 fee if applicable.

2. **16.67% down payment and 5 billed installments.** The producer is required to collect the down payment and all fees quoted at the time of submission. The down payment required is 16.67% of the policy premium, plus a \$10.00 policy fee increment and SR22 fee if applicable. The insured will be billed for the remainder of the premium balance in five (5) equal installments calculated by taking the full policy premium (not including policy, service and SR-22 fees) less the 16.67% down payment and dividing by 5. A policy fee increment of \$5.00 and a service fee of \$8.00 will be added to each installment.

Example:

6 Month Premium	\$600
Premium Down Payment	\$100
Policy Fee	<u>\$ 10</u>
Total Down Payment	\$110

Monthly Premium Install	\$100
Policy Fee	\$ 5
Service Fee	<u>\$ 8</u>
Total Installment	\$113

The first installment is due 30 days after inception and the bill will be sent at least 15 days prior to the due date. Commissions are paid on the collected premium. Any payments made prior to billing date each month will be deducted from the total policy balance. **A bill is generated and payable each month unless the policy is paid in full. All generated bills are due and payable each month regardless of additional payments made prior to the creation of the monthly bill.**

MVR surcharges and up-rates resulting from incorrect information provided by the applicant will be effective on the policy inception date and will be billed to the insured on their next installment or, if agency bill business, will be billed to the producer. Please encourage the applicant to fully disclose his or her driving record to avoid the need for premium adjustments or cancellation.

C. BINDERS

Risks will be bound on the inception date shown on the application if the application is uploaded to our office within 72 hours of the inception date. If the upload exceeds 72 hours, the risk will be bound on the date the application is received by Four Corners Insurance Services. If a coverage request is mailed to our office the postmark date must be within 72 hours of the requested effective date. If the postmark exceeds 72 hours, the coverage will be bound on the date the request is received by Four Corners Insurance Services.

Once the U.S Weather Service has advised that a tropical disturbance has reached the coordinates of 80 degrees west longitude and 20 degrees north latitude, no coverage can be bound or increased. Consult posted warning messages for more specific information. This suspension of binding authority will remain in effect until 24 hours after the storm has reached land and/or no longer poses a threat. Any questions and special needs must be discussed with a Company representative.

D. APPLICATIONS

- The application must be completed, in full, and the following information must be clearly indicated:
 - Effective date and time of coverage.
 - Original signature of Applicant / Named Insured.
 - Original signature of producer.
 - Producer's Code Number must be written in the space provided.

e. The producer should print the application, have the insured sign the application and retain a copy of the signed application in their file. Upon audit, the producer is required to provide a signed copy of the application at the request of Four Corners Insurance Services.

f. The producer is responsible for supplying the insured with the New Business Declarations Page, ID Cards and a Policy Jacket. The Declarations Page and ID Cards will print along with the application. Four Corners Insurance Services will provide producers with a supply of Policy Jackets.

2. Complete information on **ALL** drivers is required. List all persons living in the household, licensed and unlicensed, 15 years old or older. Be certain to include the following:

- a. Full Name (as it appears on the operator's license).
- b. Operator's License Number.
- c. Date of Birth
- d. Occupation & Employer

E. EXCLUSIONS AND REJECTIONS

The registered Owner/Named Insured of the vehicle to be insured **cannot be excluded**. All rejections must have the insured's original signature, **copies are not acceptable**.

All Driver Exclusions must be signed by the Named Insured.

F. FINANCIAL RESPONSIBILITY FILING

The SR-22 fee is \$20.00 per filing for new business renewals and midterm endorsements. The fee is fully earned and must be collected at the time of the endorsement request. Be sure the application legibly shows the **first, middle and last name** correctly. The State also requires the Insured's **birth date, social security number, and driver's license number**. If a "**Case Number**" has been assigned by the State, it should be provided. Any vehicle to be listed on the SR-22 Filing should show the **make** of the vehicle, **model year**, and **VIN**. If multiple drivers are shown on the application, indicate the driver requiring the SR-22. This information is **ABSOLUTELY NECESSARY** in order to insure the proper filing of the SR-22 form.

The SR-22 Filings for all qualified risks are generally made the same day the application is received.

SR-22 Filings will be made for the State of Arkansas ONLY.

No commission will be paid on SR-22 fees.

G. POLICY RENEWAL

Renewal requests and the appropriate payment must be postmarked by the previous policy's expiration date. Renewal payments received within 30 days after the expiration date may be renewed with a lapse in coverage effective the moment payment is made in the producer's office or the day after the postmark date if mailed directly to our office by the insured. All payments made after the expiration date must include a \$10 late fee.

Payments that are postmarked 31 days or later after the policy's expiration date will be returned and coverage for the Insured must be rewritten.

H. PREMIUM ENDORSEMENTS

Additional coverage is bound at the time and date the endorsement request is signed, provided the request is uploaded within 72 hours after binding.

All premium adjustments, whether additional or return premiums, will be calculated from the effective date of the change.

For endorsements the producer must collect and submit \$50 of the estimated additional premium. We will then change the future installment billings to accommodate the new premium.

If a prohibited vehicle is added midterm, surcharge the developed premium 100%.

I. CANCELLATIONS

- 1. All cancellation refunds if any will be calculated on a daily prorated basis. Return premiums of \$5 and under will be refunded to the insured only upon written request of the insured.
- 2. No flat cancellations are allowed except as follows:

EXCEPTION: Four Corners Insurance Services may consider a flat cancellation in the event of duplicate coverage. This will be considered only if a copy of a policy declarations page is submitted that indicates

proof of duplicate coverages and limits for the same vehicles, drivers, and so forth. Such duplicate coverage is subject to company verification.

3. Non-Sufficient funds Checks: No coverage is bound, or will be afforded, if the initial premium remittance is returned for non-sufficient funds or not honored for any other reason, upon presentation to the bank. Coverage will be rescinded for this condition.
4. Insured requested cancellations will be accepted only under the following conditions:
 - a. Return of the current policy along with a dated and signed statement from the named insured requesting cancellation, OR;
 - b. An original dated, witnessed, and signed statement from the named insured giving us advance written notice of the date cancellation is to take place, OR;
 - c. A complete "Lost Policy Release" form is submitted.

NOTE: The effective date of cancellation of all Insured Request cancellations will be the day after the date requested by the Named Insured, as long as such request is received by Four Corners Insurance Services within 10 days of the requested cancellation date. If received by Four Corners Insurance Services beyond 10 days, such cancellation will become effective the date the request is actually received.

J. REINSTATEMENT PROCEDURES

A CANCELLATION NOTICE IS INCLUDED WITH THE INSURED'S MONTHLY BILLING STATEMENT. THE CANCELLATION EFFECTIVE DATE IS THE PAYMENT DUE DATE.

1. The policy will be cancelled if the premium is not paid to Four Corners Insurance Services prior to the cancellation/due date. A \$10 late fee will be added to the amount due. If full payment, including the \$10 late fee, is postmarked within 15 days after the cancellation/due date, the policy will be reinstated. No reinstatement is allowed if the money is postmarked later than 15 days after the cancellation/due date. If you accept the insured's payment in your office, you must indicate the date and the time you accepted the payment. The payment must be made in your office within 15 days of the cancellation/due date. Do not accept payment later than 15 days after the cancellation/due date.

2. The insured must pay the billed amount in full by the due date or the policy will be cancelled. The insured's cancellation notice is included on the billing statement and mailed at least 15 days prior to the due date. If the payment is made before or on the due date but is short of the full amount due, the payment will be posted against the amount due and the policy will be cancelled. If the remainder of the billed amount plus a \$10 late fee is postmarked within 15 days after the premium due date, the policy will be reinstated without lapse.

K. ACCOUNTING

1. We will prepare a monthly producer statement. The statement and commission check will be sent to you within 15 days of the closing date.
2. If the producer premium remittance is returned for non-sufficient funds or is not honored for any other reason, upon presentation to the bank, Four Corners Insurance Services reserves the right to withhold the amount of nonsufficient funds from the producer's commission.
3. If the producer fails to send the full down payment and fees, Four Corners Insurance Services reserves the right to withhold the difference from the producer's commission.
4. The producer is responsible for all unearned commissions. Unearned commissions on cancelled policies will be posted to the producer's statement.
5. Four Corners Insurance Services will sweep the producer's account for all monetary activity uploaded to us the previous day. We will sweep for all bill, endorsement, and down payments.

L. CLAIMS

All claims should be reported to:

MOSHER ADMINISTRATIVE SERVICES
P.O. BOX 80394
PHOENIX, ARIZONA 85060-0394

Phone: (602) 248-3188 or (800) 344-5352
Fax: (602) 248-8415.

You may also report your claim online at:
www.mosheradmin.net



III. RATING RULES AND PROCEDURES



The following section provides an explanation of the rating procedures and rates used in the Private Passenger automobile insurance program.

The rates displayed are for a 6 month term.

A. POLICY FEE

There is a \$35.00 policy fee charged to each new policy, regardless of the number of vehicles insured or term of policy. The new policy fee is payable in increments of \$10 due with the new policy down payment and \$5 due with each of the remaining five installment billings. If the new policy premium is paid in full, the entire policy fee must be paid at that time.

The policy fee is \$30.00 for each renewal policy. The renewal policy fee is payable in increments of \$5 due with each of the six renewal installment billings.

There is an \$8.00 service fee assessed to the insured with each installment billing.

A \$10.00 late fee will be charged when an insured's payment is not postmarked on or before the due date. The producer is responsible for collecting the \$10.00 late fee if the insured pays in the producer's office.

No commission will be paid on any policy fee, billing fee, or late fee.

B. DRIVER ASSIGNMENT

1. Single Vehicle - Assign the Driver Classification, driver surcharges and Penalty Point Classification of the operator who develops the highest premium.
2. Multiple Vehicles - Assign the Driver Classification and Penalty Point Classification of the highest rated operator to the highest rated vehicle. Assign the Driver Classification and Point Classification of the second highest rated driver to the next highest rated vehicle, and so forth. After all drivers are assigned any remaining vehicles will be rated with the "EV" (extra vehicle) class.

C. DRIVER CLASSIFICATION

DRIVER AGE	MARRIED MALE	SINGLE MALE	MARRIED FEMALE	SINGLE FEMALE
16	17MM	17SM	17MF	17SF
17	16MM	16SM	16MF	16SF
18	15MM	15SM	15MF	15SF
19-20	14MM	14SM	14MF	14SF
21-22	13MM	13SM	13MF	13SF
23-24	12MM	12SM	12MF	12SF
25	11MM	11SM	11MF	11SF
26-27	10MM	10SM	10MF	10SF
28-29	9MM	9SM	9MF	9SF
30-35	8MM	8SM	8MF	8SF
36-49	7MM	7SM	7MF	7SF
50-54	6MM	6SM	6MF	6SF
55-59	5MM	5SM	5MF	5SF
60-64	4MM	4SM	4MF	4SF
65-69	3MM	3SM	3MF	3SF
70-75	2MM	2SM	2MF	2MF
76+	1MM	1SM	1MF	1SF
Extra Veh.	EV	EV	EV	EV

Single classification includes persons divorced, separated, or married persons living apart.

D. PENALTY POINT CLASSIFICATION

When multiple charges result from a single occurrence, count only the charge with the highest point count. Do not combine points of drivers. The experience period is 36 months.

Any accident or involvement where an insured driver is more than 50% negligent is considered "at fault".

ACCIDENT OR INVOLVEMENT (AT FAULT)	POINTS
FIRST	3
SECOND	4
EACH ADDITIONAL	4

ALCOHOL OR DRUG USE	POINTS
FIRST	2
SECOND	NA
(Includes implied consent conviction)	

MAJOR VIOLATIONS	POINTS
FIRST	5
SECOND	NA
EACH ADDITIONAL	NA

MAJOR VIOLATIONS:

- Negligent homicide
- Manslaughter
- Speed contest or racing
- Hit and run
- Leaving the scene of an accident
- Fleeing to elude police
- Reckless or careless driving
- Driving while license under suspension.

MINOR VIOLATIONS	POINTS
FIRST CONVICTION	1
SECOND CONVICTION	1
EACH ADDITIONAL	2

MINOR VIOLATIONS:

All other violations, except parking, including, but not limited to, no insurance, speeding, illegal turn, failure to provide proof of financial responsibility.

E. UNVERIFIABLE MVR SURCHARGE

A surcharge of 10% will be applied to Bodily Injury and Property Damage Liability premiums, Personal Injury Protection premiums and Physical Damage premiums on the vehicle to which any driver age 19 or older whose prior three year driving history cannot be verified with a Motor Vehicle Report (MVR) is assigned.

F. PENALTY POINTS IN EXCESS OF 10

This applies only to renewals, as more than 10 points is a prohibited risk. Surcharge the zero ("0") point rate for the driver developing over 10 penalty points as follows:

LIABILITY & PIP POINTS IN EXCESS OF 10	
11	350%
12	400%
13	450%
14	500%
15	550%

PHYSICAL DAMAGE IN EXCESS OF 10	
11	300%
12	350%
13	400%
14	450%
15	500%

For points in excess of 15, charge 15-point rate.

G. SYMBOLS

Use the appropriate rating symbol, as defined by the Insurance Service Office (ISO).

H. FOUR WHEEL DRIVE VEHICLES

A 10% surcharge applies to all 4x4 trucks, 4x4 sports utility vehicles, 4x4 utility vehicles and 4x4 multi-purpose vehicles. The surcharge does not apply to all wheel drive sedans, coupes, wagons, vans or hatchbacks. The surcharge applies to Bodily Injury and Property Damage Liability, Personal Injury Protection and Comprehensive and Collision premiums.

I. ACCIDENT PREVENTION COURSE DISCOUNT

The company will allow a 5% discount on the otherwise applicable private passenger automobile premium for Bodily Injury and Property Damage liability, PIP Medical Payments and Collision coverages when the principal operator of the automobile insured who is fifty-five years of age or older successfully completes and every 3 years thereafter, a motor vehicle accident prevention course meeting the Office of Motor Vehicle criteria. A copy of the certificate will be accepted as evidence of course

completion. This discount will not be provided if the accident prevention course was ordered by the court.

J. COLLEGE STUDENT DISCOUNT

5% Discount on Bodily Injury and Property Damage liability, PIP Medical Payments, Comprehensive and Collision coverages for drivers under 25 who graduated from college and has a cumulative grade average of B or 3 on a 4 point scale. The discount applies to each vehicle the eligible driver is assigned to or drives most frequently. An insured is not eligible if he or she is a married operator who has been used to classify a vehicle on the policy. (23-89-210)

K. HOMEOWNER'S DISCOUNT

A 5% discount will apply to Bodily Injury and Property Damage Liability, Comprehensive and Collision premiums if the named insured owns a house, condominium or mobile home. Vacation, commercial or investment property does not qualify. Renters do not qualify.

A copy of the deed, homeowner's insurance declarations page, mortgage payment book or coupon, escrow statement, tax appraisal, or other document showing home ownership must accompany the application.

The insured's name on the homeowner's proof must be the same as the name and mailing address on our policy. Discount applies to all vehicles on the policy.

L. MULTI-CAR DISCOUNT

If more than one vehicle is insured under the same policy, a premium discount of 20% will apply to Bodily Injury and Property Damage Liability, Personal Injury Protection and Comprehensive and Collision premiums.

M. COMBINED TRANSFER AND RENEWAL DISCOUNT

1. New business policies **with no lapse in prior coverage** are eligible for:

A 15% transfer discount on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverage and an 18% transfer discount on Comprehensive and Collision coverage (if the named insured provides proof of prior automobile insurance for a period of 6 months without lapse or if the named insured can provide a valid reason

for not having prior insurance and shows compliance with the financial responsibility laws. Proof of prior insurance must be provided by the producer to Four Corners within 30 days of the policy effective date.

2. New business policies **with a lapse in prior coverage of 1 to 15 days** are eligible for:

A 10% transfer discount on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages and a 12% transfer discount on Comprehensive and Collision coverages (if the named insured provides proof of prior automobile insurance for a period of 6 months without lapse or if the named insured can provide a valid reason for not having prior insurance and shows compliance with the financial responsibility laws. Proof of prior insurance must be provided by the producer to Four Corners within 30 days of the policy effective date.

3. Policies will be re-rated upon renewal. At-fault accidents occurring during the previous policy term will be added at this time. If there have been no at-fault accidents, a 5% premium discount will be applied to Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages renewal up to a maximum of 15% and a 6% premium discount will be applied to Comprehensive and Collision coverages upon every 6 month renewal up to a maximum of 18%. Renewal discounts will be awarded in addition to the transfer discount as long as the combined discount does not exceed 15% for Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages or 18% for Comprehensive and Collision coverages.
4. The total transfer/renewal discount will be reduced by 5% upon renewal on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages and by 6% on Comprehensive and Collision coverages if any at-fault accident is added to the policy in the prior six month policy period. The discount may be earned back if the policy remains at-fault accident free through the next six month policy renewal period.

Transfer/Renewal discounts apply only to Bodily Injury and Property Damage liability, UMBI, UIMBI and Physical Damage coverages.

N. NON-OWNER POLICIES

NOT WRITTEN

O. SPECIAL EQUIPMENT

NOT WRITTEN

Please see policy for explanation of special equipment.

P. RULES APPLICABLE TO UNINSURED, UNDERINSURED MOTORIST COVERAGE

1. A signed rejection form must be completed by the Insured if Uninsured Motorist Coverage and Underinsured Motorist Coverage are not desired. (Complete rejection section of policy application or form: AR SIC UMREJ 0410 01)
2. If more than one vehicle is insured, Uninsured, Underinsured Motorists Coverage must apply to all vehicles insured on the policy.

UNINSURED MOTORISTS BI - 25/50 limits

UNDERINSURED MOTORISTS BI - 25/50 limits (UIMBI coverage cannot be purchased without UMBI coverage.)

UNINSURED MOTORIST PD - \$25,000 w/ \$200 deductible. (UMPD coverage cannot be purchased without UMBI coverage.)

The deductible of two hundred dollars (\$200) shall not apply if:

- (1) The vehicle involved in the accident is insured by the same insurer for both collision and uninsured motorist property damage coverage; and
- (2) The operator of the other vehicle has been positively identified and is solely at fault.

Q. ROUNDING

The premium for each coverage and vehicle shall be rounded to the nearest dollar (\$.50 and over rounds up.)

R. SUMMARY TABLES

COVERAGE	LIMITS	NOTES
Bodily Injury Liability	\$25,000/\$50,000	Arkansas minimum limit – mandatory coverage
Property Damage Liability	\$25,000	Arkansas minimum limit – mandatory coverage
PIP - Medical Payments	\$5,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
PIP – Work Loss	Seventy percent (70%) of the loss of income from work during a period commencing eight (8) days after the date of the accident, and not to exceed fifty-two (52) weeks , but subject to a maximum of one hundred forty dollars (\$140) per week. (per statute)	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
PIP – Accidental Death	\$5,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
Uninsured Motorists Bodily Injury	\$25,000/\$50,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC UMREJ 0410 01"
Underinsured Motorists Bodily Injury	\$25,000/\$50,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC UMREJ 0410 01" Cannot be purchased without Uninsured Motorist Bodily Injury coverage.
Uninsured Motorists Property Damage	\$25,000 less \$200 deductible	Cannot be purchased without Uninsured Motorist Bodily Injury coverage.
Comprehensive & Collision Physical Damage Coverage	ACV less deductible	Optional coverage – cannot be purchased without Bodily Injury and Property Damage Liability coverage.

DRIVER CLASSIFICATION

OPERATOR AGE	MARRIED MALE	SINGLE MALE	MARRIED FEMALE	SINGLE FEMALE
16	17MM	17SM	17MF	17SF
17	16MM	16SM	16MF	16SF
18	15MM	15SM	15MF	15SF
19-20	14MM	14SM	14MF	14SF
21-22	13MM	13SM	13MF	13SF
23-24	12MM	12SM	12MF	12SF
25	11MM	11SM	11MF	11SF
26-27	10MM	10SM	10MF	10SF
28-29	9MM	9SM	9MF	9SF
30-35	8MM	8SM	8MF	8SF
36-49	7MM	7SM	7MF	7SF
50-54	6MM	6SM	6MF	6SF
55-59	5MM	5SM	5MF	5SF
60-64	4MM	4SM	4MF	4SF
65-69	3MM	3SM	3MF	3SF
70-75	2MM	2SM	2MF	2SF
76+	1MM	1SM	1MF	1SF
Extra Vehicle	EV	EV	EV	EV

OPTIONAL DEDUCTIBLES

COMPREHENSIVE DEDUCTIBLE	COLLISION DEDUCTIBLE	DEDUCTIBLE FACTOR
250	250	1.25
500	500	1.00
1000	1000	.80

S. ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
71601	15	71749	22	71921	23	72017	30	72083	38
71602	15	71751	22	71922	23	72020	25	72084	37
71603	15	71752	24	71923	39	72021	30	72086	20
71630	11	71753	24	71929	23	72022	36	72087	36
71631	22	71758	22	71933	23	72023	20	72088	33
71635	11	71762	22	71935	23	72024	30	72099	36
71638	11	71763	22	71937	23	72025	33	72101	25
71639	11	71764	22	71940	23	72026	30	72102	25
71640	11	71765	22	71941	39	72027	33	72103	18
71642	11	71766	22	71942	39	72028	33	72104	39
71643	11	71770	24	71943	23	72029	30	72105	39
71644	11	71801	24	71944	23	72030	33	72106	31
71646	11	71822	23	71945	23	72031	33	72110	31
71647	22	71825	23	71949	33	72032	31	72111	33
71651	22	71826	24	71950	23	72034	31	72112	25
71652	22	71827	24	71952	23	72035	31	72113	21
71653	11	71828	24	71953	23	72036	30	72114	19
71654	11	71831	23	71956	33	72038	30	72116	19
71655	11	71832	23	71957	23	72039	33	72117	19
71656	11	71833	23	71958	23	72040	30	72118	21
71658	11	71834	24	71959	23	72041	30	72120	20
71660	22	71835	24	71960	23	72042	30	72121	26
71661	11	71836	23	71961	23	72044	26	72122	33
71662	11	71837	24	71962	22	72045	25	72125	33
71663	11	71838	23	71964	23	72046	38	72126	33
71665	11	71839	24	71965	23	72047	33	72127	31
71666	11	71841	23	71968	23	72048	30	72128	37
71667	11	71842	23	71969	23	72051	32	72129	37
71670	11	71845	24	71970	23	72052	25	72130	26
71671	22	71846	23	71971	23	72055	30	72131	26
71674	11	71847	23	71972	23	72057	22	72132	15
71675	11	71851	23	71973	23	72058	33	72133	30
71676	11	71852	23	71998	39	72060	30	72134	30
71677	11	71853	23	71999	39	72063	33	72135	21
71678	11	71854	24	72001	33	72064	30	72136	25
71701	22	71855	23	72002	18	72065	38	72137	33
71720	22	71857	24	72003	30	72066	30	72140	30
71722	24	71858	24	72004	30	72067	26	72141	33
71725	22	71859	23	72005	27	72068	25	72142	19
71726	22	71860	24	72006	25	72069	30	72143	25
71730	22	71861	24	72007	25	72070	33	72149	25
71740	24	71862	23	72010	25	72072	30	72150	37
71742	22	71864	24	72011	36	72073	30	72152	15
71743	22	71865	23	72012	25	72076	20	72153	33
71744	22	71866	23	72013	33	72079	15	72156	33
71745	22	71901	8	72014	27	72080	33	72157	33
71747	22	71909	33	72015	36	72081	25	72160	30
71748	22	71913	8	72016	33	72082	25	72165	26

ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
72166	30	72355	13	72440	26	72532	26	72631	32
72167	36	72358	28	72441	29	72533	32	72632	32
72168	38	72360	13	72442	27	72534	26	72633	32
72170	30	72364	5	72443	29	72536	26	72634	32
72173	31	72365	27	72444	29	72537	32	72635	32
72175	30	72366	14	72445	26	72538	26	72638	32
72176	30	72367	14	72447	27	72539	26	72639	32
72179	26	72368	13	72449	29	72540	26	72640	32
72199	17	72369	14	72450	29	72542	26	72641	32
72201	12	72370	28	72453	29	72543	26	72642	32
72202	12	72372	13	72454	29	72544	32	72644	32
72204	12	72373	27	72455	29	72546	26	72645	32
72205	17	72374	14	72456	29	72550	26	72648	32
72206	12	72376	5	72457	26	72553	26	72650	32
72207	17	72379	30	72458	26	72554	26	72651	32
72209	12	72384	5	72459	26	72555	26	72653	32
72210	18	72386	27	72460	26	72556	26	72655	32
72211	21	72390	14	72461	29	72560	32	72658	32
72212	21	72392	13	72464	29	72561	26	72660	32
72223	17	72394	13	72465	26	72562	26	72661	32
72227	17	72395	28	72466	26	72564	26	72662	32
72301	5	72396	27	72467	27	72565	26	72663	32
72310	28	72401	9	72469	26	72566	26	72666	32
72311	13	72404	9	72470	29	72567	26	72668	32
72313	27	72410	26	72471	26	72568	26	72669	32
72315	28	72411	27	72472	27	72569	26	72670	32
72320	13	72412	29	72473	26	72571	26	72675	32
72321	28	72413	29	72476	29	72572	26	72679	33
72324	27	72414	27	72478	29	72573	26	72680	32
72326	13	72415	26	72479	27	72576	26	72682	32
72327	5	72416	26	72482	26	72577	26	72683	32
72328	14	72417	27	72501	26	72578	26	72685	32
72329	28	72419	27	72512	26	72579	26	72686	32
72330	27	72421	26	72513	26	72581	26	72687	32
72331	5	72422	29	72515	26	72583	26	72701	35
72333	14	72424	29	72517	26	72584	26	72703	35
72335	13	72425	29	72519	32	72585	26	72704	35
72338	27	72426	28	72520	26	72587	26	72712	34
72339	5	72428	27	72521	26	72601	32	72714	34
72340	13	72429	27	72522	26	72611	32	72715	34
72341	13	72430	29	72523	26	72616	32	72717	35
72342	14	72432	27	72524	26	72617	32	72718	34
72346	13	72433	26	72526	26	72619	32	72719	34
72347	27	72434	26	72527	26	72623	32	72721	32
72348	13	72435	29	72528	26	72624	32	72722	34
72350	27	72436	29	72529	26	72626	32	72727	35
72351	28	72437	27	72530	26	72628	32	72729	35
72354	27	72438	28	72531	26	72629	33	72730	35

ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
72732	34	72847	33						
72734	34	72851	33						
72736	34	72852	33						
72738	32	72853	33						
72739	34	72854	33						
72740	34	72855	33						
72742	32	72856	33						
72744	35	72857	33						
72745	34	72858	31						
72747	34	72860	33						
72749	35	72863	33						
72751	34	72865	33						
72752	32	72901	10						
72753	35	72903	10						
72756	34	72904	10						
72758	34	72905	16						
72760	32	72908	10						
72761	35	72916	16						
72762	35	72921	10						
72764	35	72923	10						
72768	34	72926	23						
72769	35	72927	33						
72773	32	72928	33						
72774	35	72930	33						
72776	32	72932	16						
72801	31	72933	33						
72802	31	72934	16						
72820	33	72936	16						
72821	33	72937	16						
72823	31	72938	33						
72824	33	72940	16						
72826	33	72941	16						
72827	33	72943	33						
72828	33	72944	33						
72830	33	72946	16						
72832	33	72947	33						
72833	33	72948	16						
72834	33	72949	33						
72835	33	72950	33						
72837	33	72951	33						
72838	33	72952	16						
72839	33	72955	16						
72840	33	72956	10						
72841	33	72958	33						
72842	33	72959	35						
72843	33								
72845	33								
72846	33								

Medical Report for Automobile Insurance

Policy Number

Name of Applicant

Date of Birth

Insurance Agency

I hereby authorize you to complete this report on my physical condition for Four Corners Insurance Services.

Applicant's Signature

Date

To Be Completed By Physician

1. Does your patient have any uncorrected eye vision problems that affect his/her ability to drive?

Yes _____ No _____

If yes, please describe: _____

2. Are there any physical disabilities that might reduce driving ability (paralysis, amputations, weaknesses, arthritis, etc.)?

Yes _____ No _____

If yes, please describe and indicate how long he/she has been driving with this disability: _____

3. Is your patient unable to drive safely due to impaired mental capacity or diminished alertness?

Yes _____ No _____

If yes, please describe: _____

4. Is your patient on any medication that will adversely affect his/her ability to operate a motor vehicle?

Yes _____ No _____

If yes, please describe: _____

5. Are you aware of anything else about your patient which could affect his/her ability to drive safely (alcohol problems, drug problems, emotional problems, diabetes, epilepsy, etc.)?

Yes _____ No _____

If yes, please describe: _____

If additional space is needed for any of the questions above, please use the reverse side of this form.

Physician's Name (Please Print)

Physician's Signature

Street Address

Date

City/State/Zip

(_____) _____
Phone



NOTES



SERFF Tracking Number: FCNS-127331730 State: Arkansas
 Filing Company: Southern Insurance Company State Tracking Number:
 Company Tracking Number: SICAR090111R
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Nonstandard Private Passenger Auto
 Project Name/Number: /

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	A-1 Private Passenger Auto Abstract	Filed	08/02/2011
Comments:			
Attachment:	Form A-1_ed_1-06.pdf		

		Item Status:	Status Date:
Satisfied - Item:	APCS-Auto Premium Comparison Survey	Filed	08/02/2011
Comments:			
Attachment:	PPA Survey FORM APCS.xls		

		Item Status:	Status Date:
Satisfied - Item:	NAIC loss cost data entry document	Filed	08/02/2011
Comments:			
Attachment:	FORM RF-1 Rate Filing Abstract.pdf		

		Item Status:	Status Date:
Bypassed - Item:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	08/02/2011
Bypass Reason:	Not applicable to filing		
Comments:			

		Item Status:	Status Date:

SERFF Tracking Number: FCNS-127331730 State: Arkansas
 Filing Company: Southern Insurance Company State Tracking Number:
 Company Tracking Number: SICAR090111R
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Nonstandard Private Passenger Auto
 Project Name/Number: /
Satisfied - Item: SIC Arkansas Filed 08/02/2011
 Underwriting/Rate/Rule Manual Eff
 9-1-11 Redline Copy

Comments:

We are providing a redline copy of our manual showing all proposed changes. Deleted material is struckthrough and highlighted in red. New language is underlined and highlighted in blue.

Attachment:

ARMan090111redline 01.pdf

	Item Status:	Status Date:
Satisfied - Item: Arkansas Filing Memorandum	Filed	08/02/2011

Comments:

Provides explanation of the proposed changes and how the proposed rate level was determined. Provides a description of all filing exhibits.

Attachment:

Arkansas Filing Memo 090111.pdf

	Item Status:	Status Date:
Satisfied - Item: Exhibit 1, Summary of Territorial Base Rates and Factors	Filed	08/02/2011

Comments:

Attachment:

Exh 1, Summary of Territorial Base Rates and Factors.pdf

	Item Status:	Status Date:
Satisfied - Item: Exhibit 2, Proposed Rate Change Summary	Filed	08/02/2011

Comments:

Attachment:

Exh 2, Proposed Rate Change Summary.pdf

	Item Status:	Status

SERFF Tracking Number: FCNS-127331730 State: Arkansas
 Filing Company: Southern Insurance Company State Tracking Number:
 Company Tracking Number: SICAR090111R
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
 Product Name: Nonstandard Private Passenger Auto
 Project Name/Number: /

Satisfied - Item: Exhibit 3, Proposed Changes to Territorial Base Rates Filed **Date:** 08/02/2011

Comments:

Attachment:

Exh 3, Proposed Changes to Territorial Base Rates.pdf

Item Status: **Status**
Date:
Satisfied - Item: Exhibit 4, Proposed Changes to Driver Class Relativities Filed **Date:** 08/02/2011

Comments:

Attachment:

Exh 4, Proposed Changes to Driver Class Relativities.pdf

Item Status: **Status**
Date:
Satisfied - Item: Exhibit 5, Summary and Effect of Vehicle Symbol Relativity Changes Filed **Date:** 08/02/2011

Comments:

Attachment:

Exh 5, Summary and Effect of Vehicle Symbol Relativities.pdf

Item Status: **Status**
Date:
Satisfied - Item: Exhibit 6, Summary and Effect of Vehicle Model Year Relativity Changes Filed **Date:** 08/02/2011

Comments:

Attachment:

Exh 6, Summary and Effect of Vehicle Model Year Relativity Changes.pdf

Item Status: **Status**
Date:
Satisfied - Item: Exhibit 7, Effect of Policy and Filed **Date:** 08/02/2011

SERFF Tracking Number: FCNS-127331730 *State:* Arkansas
Filing Company: Southern Insurance Company *State Tracking Number:*
Company Tracking Number: SICAR090111R
TOI: 19.0 Personal Auto *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)
Product Name: Nonstandard Private Passenger Auto
Project Name/Number: /
Service Fee Changes

Comments:

Attachment:

Exh 7, Summary of Fee Changes.pdf

ARKANSAS INSURANCE DEPARTMENT

FORM A-1 PRIVATE PASSENGER AUTOMOBILE 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 private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name Southern Insurance Company
 NAIC # (including group #) 19216

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance? Yes No
 If yes, list the areas: _____

2. Do you furnish a market for young drivers? Yes No

3. Do require collateral business to support a youthful driver? Yes No

4. Do you insure drivers with an international or foreign driver's license? Yes No

5. Specify the percentage you allow in credit or discounts for the following:

- a. Driver over 55 5%
- b. Good Student Discount 0%
- c. Multi-car Discount 20%
- d. Accident Free Discount* 15%

Please Specify Qualification for Discount:
 Renewal discount awarded every 6 months in increments of 5%
 up to a maximum of 15% with no at fault accidents

- e. Anti-Theft Discount 0%
- f. Other (specify) New Business Transfer Discount (BIPD) 10-15%
 New Business Transfer Discount (Comp and Collision) 12-18%
 College Student Discount 5%
 Homeowner's Discount 5%

6. Do you have an installment payment plan for automobile insurance? Yes No
 If so, what is the fee for installment payments?
\$8.00

7. Does your company utilize a tiered rating plan? Yes No
 If so, list the programs and percentage difference and current volume for each plan:

Program	Percentage Difference	Volume
---------	-----------------------	--------

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



 Signature
 Douglas C. Johnson

 Printed Name
 Assistant Vice President – Actuarial/Statistical Department

 Title
 602-200-3287

 Telephone Number
 djohnson@4cis.com

 Email address

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	SICAR090111R
-----------	---	---------------------

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

	Company Name		Company NAIC Number
3.	A.	Southern Insurance Company	B. 19216

	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.	19.0 Personal Auto	B. 19.0001 Private Passenger Auto (PPA)

5.			FOR LOSS COSTS ONLY				
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
COVERAGE (See Instructions)	Indicated % Rate Level Change	Requested % Rate Level Change	Expected Loss Ratio	Loss Cost Modification Factor	Selected Loss Cost Multiplier	Expense Constant (If Applicable)	Co. Current Loss Cost Multiplier
BI/PD	0.0%	-8.4%	N/A	N/A	N/A	N/A	N/A
PIP	0.0%	0.0%					
UMBI	0.0%	0.0%					
UIMBI	0.0%	0.0%					
UMPD	0.0%	0.0%					
Comprehensive (OTC)	0.0%	6.5%					
Collision	0.0%	-7.7%					
TOTAL OVERALL EFFECT	0.0%	-7.4%					

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
2008	N/A	N/A	N/A	N/A	N/A	N/A	93.3%
2009	N/A	N/A	N/A	N/A	N/A	N/A	76.0%
2010	125	N/A	N/A	14	0	0.0%	96.1%
2011	604	-6.5%	2/25/11	45	26.29	58.4%	78.3%

7.		
	Expense Constants	Selected Provisions
	A. Total Production Expense	19.4%
	B. General Expense	0.5%
	C. Taxes, License & Fees	2.5%
	D. Underwriting Profit & Contingencies	8.4%
	E. Other (explain) ULAE	7.5%
	F. TOTAL	38.3%

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 8.5% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____

10. -36.5% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____

PC RLC

U:LossCostDraft/DataEntry.doc

**Arkansas Semi-Annual Program
Private Passenger Automobile**

Rates Effective: ~~February 25~~September 1, 2011



**FOUR CORNERS
INSURANCE SERVICES, INC.**

WWW.4CIS.COM

P.O. Box 80260
Phoenix, Arizona 85060-0260
(602) 280-9500
(800) 223-6973

Underwritten by Southern Insurance Company
A company of The Republic Group





FOUR CORNERS INSURANCE SERVICES



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I. UNDERWRITING RULES

A. ELIGIBLE RISKS / VEHICLES

1. Private passenger automobiles including vehicles leased to an individual for six months or more.
2. Private passenger automobiles including vehicles rented to an individual for six months or more under a rent-to-own contract. Please fax a copy of the rent-to-own contract to Four Corner's Insurance Services including the name of the Insured and policy number to 1-800-828-5349.
- ~~3~~ 4. Pickup trucks and vans not exceeding 3/4 ton capacity and not used commercially.
- ~~3-4.~~ Pickup trucks and vans not exceeding one (1) ton capacity primarily used in farm or ranch operations.
45. Drivers with foreign or international licenses.

B. MAXIMUMS

Vehicle age (liability only) - ~~25-35~~ years

Physical damage - 15 years

Number of vehicles - 3 per policy

C. PROHIBITED RISKS

The following are situations involving the driver, vehicle use, or vehicle type which are ineligible for coverage:

1. Alcohol or drug dependency. More than 1 conviction in the past 36 months, whether convicted while driving or otherwise.
2. Excessive accidents. More than 2 at-fault accidents in 36 months, per driver
3. More than 1 major violation in 36 months, per driver.
4. Vehicles owned by a corporation or partnership.
5. Vehicles garaged out of state.
6. Drivers with more than 10 points.
7. Non-owner policies.

8. Drivers over 75 years of age.

D. PROHIBITED VEHICLES - ALL COVERAGES

1. Any vehicle not found in ISO Automobile Manual pages other than pick-ups and vans.
2. 1989 and older vehicles with a symbol of 19 or higher, 1990 through 2010 vehicles with a symbol of 22 or higher or 2011 and newer vehicles with a symbol of 46 or higher. ~~Vehicles with a symbol of 19 or higher for 1989 and prior vehicles or vehicles with a symbol of 22 or higher for 1990 through 2010 vehicles or with a symbol of 46 or higher for 2011 and later vehicles.~~
3. Emergency vehicles, vehicles used for delivery or taxi service including vehicles used for transporting school children or migrant workers, racing vehicles, driver training cars, collection, mail and newspaper delivery vehicles.
4. Vehicles that the applicant or Insured rentsed to others.
5. Vehicles used in speed contests.
6. Altered vehicles (unless modified for handicapped operators).
7. Vehicles garaged outside of Arkansas, including vehicles used by students attending school outside of Arkansas.
8. Custom/kit-car vehicles, Antique vehicles, Classic vehicles, Replica vehicles, Dune buggies.
9. Trucks with rated capacity over 1 ton.
10. Vehicles with less than 4 wheels.
11. Motor Homes & Recreational vehicles.
12. Pick-up trucks and vans owned by self-employed individuals.
13. Customized or conversion vans.
14. Vehicles with existing damage - physical damage coverage only.
15. Vehicles with lift kits that are more than 6 inches.
- ~~16.~~ 16. ~~All cars with plastic, aluminum or fiberglass bodies.~~ Limousines
- ~~17.~~ 17. Individually owned private passenger automobiles used for business purposes.

The following vehicles are not acceptable for any coverage: Acura NSX, Chevrolet Camaro Z-28,

Chevrolet Camaro IROC – Z, Chevrolet Corvette, Dodge Stealth, Dodge Viper, Ferrari (All models), Ford Mustang Cobra, Ford Mustang GT, Ford Mustang SVO, Lamborghini (All Models), Lotus (All models), Maserati (All Models), Mitsubishi 3000 GT, Nissan (All "Z" series), Porsche (All Models)

	Prius, Sienna Hybrid, Supra
Volkswagen	Baja, Cabriolet, Cabrio, Corrado, GTI, Scirocco
Yugo	All Models

E. PROHIBITED VEHICLES FOR PHYSICAL DAMAGE COVERAGE

Make	Model
Acura	NSX
Alfa Romeo	All Models
Am General	All Models
Aston Martin	All Models
Austin	Austin-Healey, Jensen-Healey
Avanti	All Models
BMW	All Models Except 100 & 300 Series
Buick	Grand National
Cadillac	Allante, Brougham, Escalade Hybrid, Fleetwood, V series, XLR
Chevrolet	Camaro Z-28, Camaro IROC-Z, Impala Police, Malibu Hybrid, Silverado Hybrid, Tahoe Hybrid
Chrysler	Aspen Hybrid, Conquest, Limousine, Prowler, Town & Country Natrium
Daewoo	All Models
Dodge	Conquest, Durango Hybrid, Stealth
Ford	Cobra, Crown Victoria Police intercepter, Escape Hybrid, GT, Mustang Cobra, Mustang SVO, Mustang 8 Cyl, Taurus SHO, Probe GT
GMC	Sierra Hybrid, Yukon Hybrid
Honda	Accord Hybrid, Civic Hybrid, Insight
Hummer	All Models
Jaguar	All Models
Jeep	CJ5, CJ7, Scrambler
Lancia	Scorpion, Zagato
Lexus	All SC Models, GS450 Hybrid, LS600h Hybrid, RX400h Hybrid
Lincoln	MKX
Mazda	RX-7, RX-8
Mercedes	All Models
Mitsubishi	Starion
Mercury	Mariner Hybrid
Nissan	Altima Hybrid
Pininfarina	All Models
Plymouth	Conquest
Pontiac	Firebird (All Models) Trans Am (All Models)
Renault	Gordini
Saturn	Aura Green Line Hybrid, VUE Green Line Hybrid
Sterling	All Models
Toyota	Camry Hybrid, Highlander Hybrid,

Every situation cannot be addressed completely. Four Corners Insurance Services reserves the right to final determination on the acceptability of all risks.

FE. SUBMIT ONLY

Call for underwriting approval before an application is submitted on physically handicapped operators.

All persons with Epilepsy, Stroke, Heart Disease, Diabetes, Loss of Eye, and/or Cerebral Palsy must submit with the application a Four Corners Medical Statement form (as provided as part of the Underwriting Guidelines) signed by a physician.

All persons with a loss of limb(s) must submit proof of compensatory vehicle modification. Proof is a written or typed statement signed by the insured.

Applications with a driver(s) over 70 years old must be submitted unbound and with a Medical Statement form signed by a physician. We will notify you whether the risk is acceptable upon review of the physician's statement.

GF. Hurricane or Tropical Storm Threat

Once the U.S. Weather Service has advised that a tropical disturbance has reached the coordinates of 80 degrees west longitude and 20 degrees north latitude, no coverage can be bound or increased. Consult posted warning messages for more specific information. This suspension will remain in effect until 24 hours after the storm has reached land and/or no longer poses a threat. Any questions and special needs must be discussed with a Company representative.



II. POLICY ADMINISTRATION



A. POLICY TERM

Coverage is written for a 6 month period.

B. BILLING & PAYMENT PROCEDURES

No coverage is bound or will be afforded if premium remittance is returned for nonsufficient funds or not honored for any reason upon first presentation to the bank. Coverage will be rescinded for this condition.

We offer a pay-in-full option and a direct bill installment payment plan:

1. **Full payment.** Remit the full term premium plus a \$~~30~~35.00 policy fee, ~~\$8.00 service fee~~ and SR22 fee if applicable.

2. **16.67% down payment and 5 billed installments.** The producer is required to collect the down payment and all fees quoted at the time of submission. The down payment required is 16.67% of the policy premium, plus a \$~~5~~10.00 policy fee increment, ~~\$8.00 service fee~~ and SR22 fee if applicable. The insured will be billed for the remainder of the premium balance in five (5) equal installments calculated by taking the full policy premium (not including policy, service and SR-22 fees) less the 16.67% down payment and dividing by 5. A policy fee increment of \$5.00 and a service fee of \$8.00 will be added to each installment.

Example:

6 Month Premium	\$600
Premium Down Payment	\$100
Policy Fee	\$ 5 <u>10</u>
Service Fee	\$ 8
Total Down Payment	\$ 143 <u>110</u>

Monthly Premium Install	\$100
Policy Fee	\$ 5
Service Fee	\$ 8
Total Installment	\$113

The first installment is due 30 days after inception and the bill will be sent at least 15 days prior to the due date. Commissions are paid on the collected premium. Any payments made prior to billing date each month will be deducted from the total policy balance. **A bill is generated and payable each month unless the policy is paid in full. All generated bills are**

due and payable each month regardless of additional payments made prior to the creation of the monthly bill.

MVR surcharges and up-rates resulting from incorrect information provided by the applicant will be effective on the policy inception date and will be billed to the insured on their next installment or, if agency bill business, will be billed to the producer. Please encourage the applicant to fully disclose his or her driving record to avoid the need for premium adjustments or cancellation.

C. BINDERS

Risks will be bound on the inception date shown on the application if the application is uploaded to our office within 72 hours of the inception date. If the upload exceeds 72 hours, the risk will be bound on the date the application is received by Four Corners Insurance Services. If a coverage request is mailed to our office the postmark date must be within 72 hours of the requested effective date. If the postmark exceeds 72 hours, the coverage will be bound on the date the request is received by Four Corners Insurance Services.

Once the U.S Weather Service has advised that a tropical disturbance has reached the coordinates of 80 degrees west longitude and 20 degrees north latitude, no coverage can be bound or increased. Consult posted warning messages for more specific information. This suspension of binding authority will remain in effect until 24 hours after the storm has reached land and/or no longer poses a threat. Any questions and special needs must be discussed with a Company representative.

D. APPLICATIONS

1. The application must be completed, in full, and the following information must be clearly indicated:
 - a. Effective date and time of coverage.
 - b. Original signature of Applicant / Named Insured.
 - c. Original signature of producer.

- d. Producer's Code Number must be written in the space provided.
 - e. The producer should print the application, have the insured sign the application and retain a copy of the signed application in their file. Upon audit, the producer is required to provide a signed copy of the application at the request of Four Corners Insurance Services.
 - f. The producer is responsible for supplying the insured with the New Business Declarations Page, ID Cards and a Policy Jacket. The Declarations Page and ID Cards will print along with the application. Four Corners Insurance Services will provide producers with a supply of Policy Jackets.
2. Complete information on **ALL** drivers is required. List all persons living in the household, licensed and unlicensed, 15 years old or older. Be certain to include the following:
- a. Full Name (as it appears on the operator's license).
 - b. Operator's License Number.
 - c. Date of Birth
 - d. Occupation & Employer

E. EXCLUSIONS AND REJECTIONS

The registered Owner/Named Insured of the vehicle to be insured **cannot be excluded**. All rejections must have the insured's original signature, **copies are not acceptable**.

All Driver Exclusions must be signed by the Named Insured.

F. FINANCIAL RESPONSIBILITY FILING

The SR-22 fee is \$20.00 per filing for new business renewals and midterm endorsements. The fee is fully earned and must be collected at the time of the endorsement request. Be sure the application legibly shows the **first, middle and last name** correctly. The State also requires the Insured's **birth date, social security number, and driver's license number**. If a "**Case Number**" has been assigned by the State, it should be provided. Any vehicle to be listed on the SR-22 Filing should show the **make** of the vehicle, **model year**, and **VIN**. If multiple drivers are shown on the application, indicate the driver requiring the SR-22. This information is

ABSOLUTELY NECESSARY in order to insure the proper filing of the SR-22 form.

The SR-22 Filings for all qualified risks are generally made the same day the application is received.

SR-22 Filings will be made for the State of Arkansas ONLY.

No commission will be paid on SR-22 fees.

G. POLICY RENEWAL

Renewal requests and the appropriate payment must be postmarked by the previous policy's expiration date. Renewal payments received within 30 days after the expiration date may be renewed with a lapse in coverage effective the moment payment is made in the producer's office or the day after the postmark date if mailed directly to our office by the insured. All payments made after the expiration date must include a \$10 late fee.

Payments that are postmarked 31 days or later after the policy's expiration date will be returned and coverage for the Insured must be rewritten.

H. PREMIUM ENDORSEMENTS

Additional coverage is bound at the time and date the endorsement request is signed, provided the request is uploaded within 72 hours after binding.

All premium adjustments, whether additional or return premiums, will be calculated from the effective date of the change.

For endorsements the producer must collect and submit \$50 of the estimated additional premium. We will then change the future installment billings to accommodate the new premium.

If a prohibited vehicle is added midterm, surcharge the developed premium 100%.

I. CANCELLATIONS

1. All cancellation refunds if any will be calculated on a daily prorated basis. Return premiums of \$5 and under will be refunded to the insured only upon written request of the insured.
2. No flat cancellations are allowed except as follows:

EXCEPTION: Four Corners Insurance Services may consider a flat cancellation in the event of duplicate coverage. This will be considered only if a copy of a policy declarations page is submitted that indicates proof of duplicate coverages and limits for the same vehicles, drivers, and so forth. Such duplicate coverage is subject to company verification.

3. Non-Sufficient funds Checks: No coverage is bound, or will be afforded, if the initial premium remittance is returned for non-sufficient funds or not honored for any other reason, upon presentation to the bank. Coverage will be rescinded for this condition.
4. Insured requested cancellations will be accepted only under the following conditions:
 - a. Return of the current policy along with a dated and signed statement from the named insured requesting cancellation, OR;
 - b. An original dated, witnessed, and signed statement from the named insured giving us advance written notice of the date cancellation is to take place, OR;
 - c. A complete "Lost Policy Release" form is submitted.

NOTE: The effective date of cancellation of all Insured Request cancellations will be the day after the date requested by the Named Insured, as long as such request is received by Four Corners Insurance Services within 10 days of the requested cancellation date. If received by Four Corners Insurance Services beyond 10 days, such cancellation will become effective the date the request is actually received.

J. REINSTATEMENT PROCEDURES

A CANCELLATION NOTICE IS INCLUDED WITH THE INSURED'S MONTHLY BILLING STATEMENT. THE CANCELLATION EFFECTIVE DATE IS THE PAYMENT DUE DATE.

1. The policy will be cancelled if the premium is not paid to Four Corners Insurance Services prior to the cancellation/due date. A \$10 late fee will be added to the amount due. If full payment, including the \$10 late fee, is postmarked within 15 days after the cancellation/due date, the policy will be reinstated. No reinstatement is allowed if the money is postmarked later than 15 days after the cancellation/due date. If you accept the insured's payment in your office, you must indicate the date and the time you accepted the payment. The payment

must be made in your office within 15 days of the cancellation/due date. Do not accept payment later than 15 days after the cancellation/due date.

2. The insured must pay the billed amount in full by the due date or the policy will be cancelled. The insured's cancellation notice is included on the billing statement and mailed at least 15 days prior to the due date. If the payment is made before or on the due date but is short of the full amount due, the payment will be posted against the amount due and the policy will be cancelled. If the remainder of the billed amount plus a \$10 late fee is postmarked within 15 days after the premium due date, the policy will be reinstated without lapse.

K. ACCOUNTING

1. We will prepare a monthly producer statement. The statement and commission check will be sent to you within 15 days of the closing date.
2. If the producer premium remittance is returned for non-sufficient funds or is not honored for any other reason, upon presentation to the bank, Four Corners Insurance Services reserves the right to withhold the amount of nonsufficient funds from the producer's commission.
3. If the producer fails to send the full down payment and fees, Four Corners Insurance Services reserves the right to withhold the difference from the producer's commission.
4. The producer is responsible for all unearned commissions. Unearned commissions on cancelled policies will be posted to the producer's statement.
5. Four Corners Insurance Services will sweep the producer's account for all monetary activity uploaded to us the previous day. We will sweep for all bill, endorsement, and down payments.

L. CLAIMS

All claims should be reported to:

MOSHER ADMINISTRATIVE SERVICES
P.O. BOX 80394
PHOENIX, ARIZONA 85060-0394

Phone: (602) 248-3188 or (800) 344-5352
Fax: (602) 248-8415.

You may also report your claim online at:
www.mosheradmin.net

III. RATING RULES AND PROCEDURES

The following section provides an explanation of the rating procedures and rates used in the Private Passenger automobile insurance program.

The rates displayed are for a 6 month term.

A. POLICY FEE

There is a ~~\$30~~^{\$35}.00 policy fee charged to each new policy, regardless of the number of vehicles insured or term of policy. The new policy fee is payable in increments of ~~\$5-10~~ due with the new policy down payment and \$5 due with each of the remaining five installment billings. If the new policy premium is paid in full, the entire policy fee must be paid at that time.

The policy fee is \$30.00 for each renewal policy. The renewal policy fee is payable in increments of \$5 due with each of the six renewal installment billings.

There is an \$8.00 service fee assessed to the insured ~~on the down payment and~~ with each installment billing.

A \$10.00 late fee will be charged when an insured's payment is not postmarked on or before the due date. The producer is responsible for collecting the \$10.00 late fee if the insured pays in the producer's office.

No commission will be paid on any policy fee, billing fee, or late fee.

B. DRIVER ASSIGNMENT

1. Single Vehicle - Assign the Driver Classification, driver surcharges and Penalty Point Classification of the operator who develops the highest premium.
2. Multiple Vehicles - Assign the Driver Classification and Penalty Point Classification of the highest rated operator to the highest rated vehicle. Assign the Driver Classification and Point Classification of the second highest rated driver to the next highest rated vehicle, and so forth. After all drivers are assigned any remaining vehicles will be rated with the "EV" (extra vehicle) class.

C. DRIVER CLASSIFICATION

DRIVER AGE	MARRIED MALE	SINGLE MALE	MARRIED FEMALE	SINGLE FEMALE
16	17MM	17SM	17MF	17SF
17	16MM	16SM	16MF	16SF
18	15MM	15SM	15MF	15SF
19-20	14MM	14SM	14MF	14SF
21-22	13MM	13SM	13MF	13SF
23-24	12MM	12SM	12MF	12SF
25	11MM	11SM	11MF	11SF
26-27	10MM	10SM	10MF	10SF
28-29	9MM	9SM	9MF	9SF
30-35	8MM	8SM	8MF	8SF
36-49	7MM	7SM	7MF	7SF
50-54	6MM	6SM	6MF	6SF
55-59	5MM	5SM	5MF	5SF
60-64	4MM	4SM	4MF	4SF
65-69	3MM	3SM	3MF	3SF
70-75	2MM	2SM	2MF	2MF
76+	1MM	1SM	1MF	1SF
Extra Veh.	EV	EV	EV	EV

Single classification includes persons divorced, separated, or married persons living apart.

D. PENALTY POINT CLASSIFICATION

When multiple charges result from a single occurrence, count only the charge with the highest point count. Do not combine points of drivers. The experience period is 36 months.

Any accident or involvement where an insured driver is more than 50% negligent is considered "at fault".

ACCIDENT OR INVOLVEMENT (AT FAULT)	POINTS
FIRST	3
SECOND	4
EACH ADDITIONAL	4

ALCOHOL OR DRUG USE	POINTS
FIRST	2
SECOND	NA
(Includes implied consent conviction)	

MAJOR VIOLATIONS	POINTS
FIRST	5
SECOND	NA
EACH ADDITIONAL	NA

MAJOR VIOLATIONS:

- Negligent homicide
- Manslaughter
- Speed contest or racing
- Hit and run
- Leaving the scene of an accident
- Fleeing to elude police
- Reckless or careless driving
- Driving while license under suspension.

MINOR VIOLATIONS	POINTS
FIRST CONVICTION	1
SECOND CONVICTION	1
EACH ADDITIONAL	2

MINOR VIOLATIONS:

All other violations, except parking, including, but not limited to, no insurance, speeding, illegal turn, failure to provide proof of financial responsibility.

E. UNVERIFIABLE MVR SURCHARGE

A surcharge of 10% will be applied to Bodily Injury and Property Damage Liability premiums, Personal Injury Protection premiums and Physical Damage premiums on the vehicle to which any driver age 19 or older whose prior three year driving history cannot be verified with a Motor Vehicle Report (MVR) is assigned.

F. PENALTY POINTS IN EXCESS OF 10

This applies only to renewals, as more than 10 points is a prohibited risk. Surcharge the zero (“0”) point rate for the driver developing over 10 penalty points as follows:

LIABILITY & PIP POINTS IN EXCESS OF 10	
11	350%
12	400%
13	450%
14	500%
15	550%

PHYSICAL DAMAGE IN EXCESS OF 10	
11	300%
12	350%
13	400%
14	450%
15	500%

For points in excess of 15, charge 15-point rate.

G. SYMBOLS

Use the appropriate rating symbol, as defined by the Insurance Service Office (ISO).

H. FOUR WHEEL DRIVE VEHICLES

A 10% surcharge applies to all 4x4 trucks, 4x4 sports utility vehicles, 4x4 utility vehicles and 4x4 multi-purpose vehicles. The surcharge does not apply to all wheel drive sedans, coupes, wagons, vans or hatchbacks. The surcharge applies to Bodily Injury and Property Damage Liability, Personal Injury Protection and Comprehensive and Collision premiums.

I. ACCIDENT PREVENTION COURSE DISCOUNT

The company will allow a 5% discount on the otherwise applicable private passenger automobile premium for Bodily Injury and Property Damage liability, PIP Medical Payments and Collision coverages when the principal operator of the automobile insured who is fifty-five years of age or older successfully completes and every 3 years thereafter, a motor vehicle accident prevention course meeting the Office of Motor Vehicle criteria. A copy of the certificate will be accepted as evidence of course

completion. This discount will not be provided if the accident prevention course was ordered by the court.

J. COLLEGE STUDENT DISCOUNT

5% Discount on Bodily Injury and Property Damage liability, PIP Medical Payments, Comprehensive and Collision coverages for drivers under 25 who graduated from college and has a cumulative grade average of B or 3 on a 4 point scale. The discount applies to each vehicle the eligible driver is assigned to or drives most frequently. An insured is not eligible if he or she is a married operator who has been used to classify a vehicle on the policy. (23-89-210)

K. HOMEOWNER'S DISCOUNT

A 5% discount will apply to Bodily Injury and Property Damage Liability, Comprehensive and Collision premiums if the named insured owns a house, condominium or mobile home. Vacation, commercial or investment property does not qualify. Renters do not qualify.

A copy of the deed, homeowner's insurance declarations page, mortgage payment book or coupon, escrow statement, tax appraisal, or other document showing home ownership must accompany the application.

The insured's name on the homeowner's proof must be the same as the name and mailing address on our policy. Discount applies to all vehicles on the policy.

L. MULTI-CAR DISCOUNT

If more than one vehicle is insured under the same policy, a premium discount of 20% will apply to Bodily Injury and Property Damage Liability, Personal Injury Protection and Comprehensive and Collision premiums.

M. COMBINED TRANSFER AND RENEWAL DISCOUNT

1. New business policies **with no lapse in prior coverage** are eligible for:

A 15% transfer discount on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverage and an 18% transfer discount on Comprehensive and Collision coverage (if the named insured provides proof of prior automobile insurance for a period of 6 months without lapse or if the named insured can provide a valid reason

for not having prior insurance and shows compliance with the financial responsibility laws. Proof of prior insurance must be provided by the producer to Four Corners within 30 days of the policy effective date.

2. New business policies **with a lapse in prior coverage of 1 to 15 days** are eligible for:

A 10% transfer discount on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages and a 12% transfer discount on Comprehensive and Collision coverages (if the named insured provides proof of prior automobile insurance for a period of 6 months without lapse or if the named insured can provide a valid reason for not having prior insurance and shows compliance with the financial responsibility laws. Proof of prior insurance must be provided by the producer to Four Corners within 30 days of the policy effective date.

3. Policies will be re-rated upon renewal. At-fault accidents occurring during the previous policy term will be added at this time. If there have been no at-fault accidents, a 5% premium discount will be applied to Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages renewal up to a maximum of 15% and a 6% premium discount will be applied to Comprehensive and Collision coverages upon every 6 month renewal up to a maximum of 18%. Renewal discounts will be awarded in addition to the transfer discount as long as the combined discount does not exceed 15% for Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages or 18% for Comprehensive and Collision coverages.
4. The total transfer/renewal discount will be reduced by 5% upon renewal on Bodily Injury and Property Damage Liability, UMBI, UIMBI and UMPD coverages and by 6% on Comprehensive and Collision coverages if any at-fault accident is added to the policy in the prior six month policy period. The discount may be earned back if the policy remains at-fault accident free through the next six month policy renewal period.

Transfer/Renewal discounts apply only to Bodily Injury and Property Damage liability, UMBI, UIMBI and Physical Damage coverages.

N. NON-OWNER POLICIES

NOT WRITTEN

O. SPECIAL EQUIPMENT

NOT WRITTEN

Please see policy for explanation of special equipment.

P. RULES APPLICABLE TO UNINSURED, UNDERINSURED MOTORIST COVERAGE

1. A signed rejection form must be completed by the Insured if Uninsured Motorist Coverage and Underinsured Motorist Coverage are not desired. (Complete rejection section of policy application or form: AR SIC UMREJ 0410 01)
2. If more than one vehicle is insured, Uninsured, Underinsured Motorists Coverage must apply to all vehicles insured on the policy.

UNINSURED MOTORISTS BI - 25/50 limits

UNDERINSURED MOTORISTS BI - 25/50 limits (UIMBI coverage cannot be purchased without UMBI coverage.)

UNINSURED MOTORIST PD - \$25,000 w/ \$200 deductible. (UMPD coverage cannot be purchased without UMBI coverage.)

The deductible of two hundred dollars (\$200) shall not apply if:

- (1) The vehicle involved in the accident is insured by the same insurer for both collision and uninsured motorist property damage coverage; and
- (2) The operator of the other vehicle has been positively identified and is solely at fault.

Q. ROUNDING

The premium for each coverage and vehicle shall be rounded to the nearest dollar (\$.50 and over rounds up.)

R. SUMMARY TABLES

COVERAGE	LIMITS	NOTES
Bodily Injury Liability	\$25,000/\$50,000	Arkansas minimum limit – mandatory coverage
Property Damage Liability	\$25,000	Arkansas minimum limit – mandatory coverage
PIP - Medical Payments	\$5,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
PIP – Work Loss	Seventy percent (70%) of the loss of income from work during a period commencing eight (8) days after the date of the accident, and not to exceed fifty-two (52) weeks , but subject to a maximum of one hundred forty dollars (\$140) per week. (per statute)	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
PIP – Accidental Death	\$5,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC PIPREJ 0410 01"
Uninsured Motorists Bodily Injury	\$25,000/\$50,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC UMREJ 0410 01"
Underinsured Motorists Bodily Injury	\$25,000/\$50,000	Optional coverage must be rejected in writing if not desired. Complete coverage rejection section on Arkansas application or complete form "AR SIC UMREJ 0410 01" Cannot be purchased without Uninsured Motorist Bodily Injury coverage.
Uninsured Motorists Property Damage	\$25,000 less \$200 deductible	Cannot be purchased without Uninsured Motorist Bodily Injury coverage.
Comprehensive & Collision Physical Damage Coverage	ACV less deductible	Optional coverage – cannot be purchased without Bodily Injury and Property Damage Liability coverage.

DRIVER CLASSIFICATION

OPERATOR AGE	MARRIED MALE	SINGLE MALE	MARRIED FEMALE	SINGLE FEMALE
16	17MM	17SM	17MF	17SF
17	16MM	16SM	16MF	16SF
18	15MM	15SM	15MF	15SF
19-20	14MM	14SM	14MF	14SF
21-22	13MM	13SM	13MF	13SF
23-24	12MM	12SM	12MF	12SF
25	11MM	11SM	11MF	11SF
26-27	10MM	10SM	10MF	10SF
28-29	9MM	9SM	9MF	9SF
30-35	8MM	8SM	8MF	8SF
36-49	7MM	7SM	7MF	7SF
50-54	6MM	6SM	6MF	6SF
55-59	5MM	5SM	5MF	5SF
60-64	4MM	4SM	4MF	4SF
65-69	3MM	3SM	3MF	3SF
70-75	2MM	2SM	2MF	2SF
76+	1MM	1SM	1MF	1SF
Extra Vehicle	EV	EV	EV	EV

OPTIONAL DEDUCTIBLES

COMPREHENSIVE DEDUCTIBLE	COLLISION DEDUCTIBLE	DEDUCTIBLE FACTOR
250	250	1.25
500	500	1.00
1000	1000	.80

S. ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
71601	15	71749	22	71921	23	72017	30	72083	38
71602	15	71751	22	71922	23	72020	25	72084	37
71603	15	71752	24	71923	39	72021	30	72086	20
71630	11	71753	24	71929	23	72022	36	72087	36
71631	22	71758	22	71933	23	72023	20	72088	33
71635	11	71762	22	71935	23	72024	30	72099	36
71638	11	71763	22	71937	23	72025	33	72101	25
71639	11	71764	22	71940	23	72026	30	72102	25
71640	11	71765	22	71941	39	72027	33	72103	18
71642	11	71766	22	71942	39	72028	33	72104	39
71643	11	71770	24	71943	23	72029	30	72105	39
71644	11	71801	24	71944	23	72030	33	72106	31
71646	11	71822	23	71945	23	72031	33	72110	31
71647	22	71825	23	71949	33	72032	31	72111	33
71651	22	71826	24	71950	23	72034	31	72112	25
71652	22	71827	24	71952	23	72035	31	72113	21
71653	11	71828	24	71953	23	72036	30	72114	19
71654	11	71831	23	71956	33	72038	30	72116	19
71655	11	71832	23	71957	23	72039	33	72117	19
71656	11	71833	23	71958	23	72040	30	72118	21
71658	11	71834	24	71959	23	72041	30	72120	20
71660	22	71835	24	71960	23	72042	30	72121	26
71661	11	71836	23	71961	23	72044	26	72122	33
71662	11	71837	24	71962	22	72045	25	72125	33
71663	11	71838	23	71964	23	72046	38	72126	33
71665	11	71839	24	71965	23	72047	33	72127	31
71666	11	71841	23	71968	23	72048	30	72128	37
71667	11	71842	23	71969	23	72051	32	72129	37
71670	11	71845	24	71970	23	72052	25	72130	26
71671	22	71846	23	71971	23	72055	30	72131	26
71674	11	71847	23	71972	23	72057	22	72132	15
71675	11	71851	23	71973	23	72058	33	72133	30
71676	11	71852	23	71998	39	72060	30	72134	30
71677	11	71853	23	71999	39	72063	33	72135	21
71678	11	71854	24	72001	33	72064	30	72136	25
71701	22	71855	23	72002	18	72065	38	72137	33
71720	22	71857	24	72003	30	72066	30	72140	30
71722	24	71858	24	72004	30	72067	26	72141	33
71725	22	71859	23	72005	27	72068	25	72142	19
71726	22	71860	24	72006	25	72069	30	72143	25
71730	22	71861	24	72007	25	72070	33	72149	25
71740	24	71862	23	72010	25	72072	30	72150	37
71742	22	71864	24	72011	36	72073	30	72152	15
71743	22	71865	23	72012	25	72076	20	72153	33
71744	22	71866	23	72013	33	72079	15	72156	33
71745	22	71901	8	72014	27	72080	33	72157	33
71747	22	71909	33	72015	36	72081	25	72160	30
71748	22	71913	8	72016	33	72082	25	72165	26

ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
72166	30	72355	13	72440	26	72532	26	72631	32
72167	36	72358	28	72441	29	72533	32	72632	32
72168	38	72360	13	72442	27	72534	26	72633	32
72170	30	72364	5	72443	29	72536	26	72634	32
72173	31	72365	27	72444	29	72537	32	72635	32
72175	30	72366	14	72445	26	72538	26	72638	32
72176	30	72367	14	72447	27	72539	26	72639	32
72179	26	72368	13	72449	29	72540	26	72640	32
72199	17	72369	14	72450	29	72542	26	72641	32
72201	12	72370	28	72453	29	72543	26	72642	32
72202	12	72372	13	72454	29	72544	32	72644	32
72204	12	72373	27	72455	29	72546	26	72645	32
72205	17	72374	14	72456	29	72550	26	72648	32
72206	12	72376	5	72457	26	72553	26	72650	32
72207	17	72379	30	72458	26	72554	26	72651	32
72209	12	72384	5	72459	26	72555	26	72653	32
72210	18	72386	27	72460	26	72556	26	72655	32
72211	21	72390	14	72461	29	72560	32	72658	32
72212	21	72392	13	72464	29	72561	26	72660	32
72223	17	72394	13	72465	26	72562	26	72661	32
72227	17	72395	28	72466	26	72564	26	72662	32
72301	5	72396	27	72467	27	72565	26	72663	32
72310	28	72401	9	72469	26	72566	26	72666	32
72311	13	72404	9	72470	29	72567	26	72668	32
72313	27	72410	26	72471	26	72568	26	72669	32
72315	28	72411	27	72472	27	72569	26	72670	32
72320	13	72412	29	72473	26	72571	26	72675	32
72321	28	72413	29	72476	29	72572	26	72679	33
72324	27	72414	27	72478	29	72573	26	72680	32
72326	13	72415	26	72479	27	72576	26	72682	32
72327	5	72416	26	72482	26	72577	26	72683	32
72328	14	72417	27	72501	26	72578	26	72685	32
72329	28	72419	27	72512	26	72579	26	72686	32
72330	27	72421	26	72513	26	72581	26	72687	32
72331	5	72422	29	72515	26	72583	26	72701	35
72333	14	72424	29	72517	26	72584	26	72703	35
72335	13	72425	29	72519	32	72585	26	72704	35
72338	27	72426	28	72520	26	72587	26	72712	34
72339	5	72428	27	72521	26	72601	32	72714	34
72340	13	72429	27	72522	26	72611	32	72715	34
72341	13	72430	29	72523	26	72616	32	72717	35
72342	14	72432	27	72524	26	72617	32	72718	34
72346	13	72433	26	72526	26	72619	32	72719	34
72347	27	72434	26	72527	26	72623	32	72721	32
72348	13	72435	29	72528	26	72624	32	72722	34
72350	27	72436	29	72529	26	72626	32	72727	35
72351	28	72437	27	72530	26	72628	32	72729	35
72354	27	72438	28	72531	26	72629	33	72730	35

ARKANSAS TERRITORY TABLE

Territories are assigned by the Zip Code of the garaging address of the vehicle

ZIP CODE	TERR								
72732	34	72847	33						
72734	34	72851	33						
72736	34	72852	33						
72738	32	72853	33						
72739	34	72854	33						
72740	34	72855	33						
72742	32	72856	33						
72744	35	72857	33						
72745	34	72858	31						
72747	34	72860	33						
72749	35	72863	33						
72751	34	72865	33						
72752	32	72901	10						
72753	35	72903	10						
72756	34	72904	10						
72758	34	72905	16						
72760	32	72908	10						
72761	35	72916	16						
72762	35	72921	10						
72764	35	72923	10						
72768	34	72926	23						
72769	35	72927	33						
72773	32	72928	33						
72774	35	72930	33						
72776	32	72932	16						
72801	31	72933	33						
72802	31	72934	16						
72820	33	72936	16						
72821	33	72937	16						
72823	31	72938	33						
72824	33	72940	16						
72826	33	72941	16						
72827	33	72943	33						
72828	33	72944	33						
72830	33	72946	16						
72832	33	72947	33						
72833	33	72948	16						
72834	33	72949	33						
72835	33	72950	33						
72837	33	72951	33						
72838	33	72952	16						
72839	33	72955	16						
72840	33	72956	10						
72841	33	72958	33						
72842	33	72959	35						
72843	33								
72845	33								
72846	33								

Medical Report for Automobile Insurance

Policy Number

Name of Applicant

Date of Birth

Insurance Agency

I hereby authorize you to complete this report on my physical condition for Four Corners Insurance Services.

Applicant's Signature

Date

To Be Completed By Physician

1. Does your patient have any uncorrected eye vision problems that affect his/her ability to drive?

Yes _____ No _____

If yes, please describe: _____

2. Are there any physical disabilities that might reduce driving ability (paralysis, amputations, weaknesses, arthritis, etc.)?

Yes _____ No _____

If yes, please describe and indicate how long he/she has been driving with this disability: _____

3. Is your patient unable to drive safely due to impaired mental capacity or diminished alertness?

Yes _____ No _____

If yes, please describe: _____

4. Is your patient on any medication that will adversely affect his/her ability to operate a motor vehicle?

Yes _____ No _____

If yes, please describe: _____

5. Are you aware of anything else about your patient which could affect his/her ability to drive safely (alcohol problems, drug problems, emotional problems, diabetes, epilepsy, etc.)?

Yes _____ No _____

If yes, please describe: _____

If additional space is needed for any of the questions above, please use the reverse side of this form.

Physician's Name (Please Print)

Physician's Signature

Street Address

Date

City/State/Zip

(_____) _____
Phone



NOTES



FILING MEMORANDUM

General Filing Information

Southern Insurance Company (SIC), through Four Corners Insurance Services, is filing revisions to their Nonstandard Private Passenger Auto program for the State of Arkansas. The private passenger auto rates offered through this program and contained in this filing are independent of rates published by any rating/advisory organization. The rates and factors within this filing revise those filed in SIC's rate/rule filing, Company Filing Number SICAR022511R, with an effective date of February 25, 2011. Based on Southern Insurance Company's Arkansas current rate level written premium distributions for the period of May 15, 2010 through March 31, 2011, the proposed changes will result in an estimated 7.8% decrease to liability rates for existing customers and an estimated decrease of 3.7% to physical damage rates for existing customers. Based on current written premium distribution, it is estimated that existing overall Arkansas premium will decrease by 7.4%, amounting to a decrease in overall written premium of \$16,712 over the experience period observed.

The principal elements of this filing are as follows:

1. Adjustments to Bodily Injury/Property Damage, Comprehensive (Other Than Collision) and Collision coverage territorial base rates;
2. Adjustments to Bodily Injury/Property Damage, Comprehensive (OTC) and Collision coverage driver class relativities;
3. Adjustments to Comprehensive (OTC) and Collision vehicle symbol factors for 2010 and prior model year vehicles;
4. Adjustments to Comprehensive and Collision vehicle model year relativities;
5. We are eliminating the \$8 service fee that is currently due with the initial down payment or full payment of new policy premiums;
6. We are increasing the total new business policy fee to \$35 from the current \$30. If the new policy premium is paid in full, the entire \$35 policy fee is due with the payment. If the premium is paid in installments, \$10 of the policy fee is due with the down payment and \$5 is due with each of 5 installments. The policy fee for renewal policies remains \$30 and will be collected in increments of \$5 over 6 payments.

Along with a complete copy of SIC's revised manual, we are providing a "redline" copy of the underwriting rules and manual pages under the "Supporting Documentation" section of this filing. The "redline" copy of the manual pages displays deleted material struck through and highlighted in red and new language underlined and highlighted in blue.

Rate Level

Southern Insurance Company's Arkansas premium and loss experience from May 15, 2010, when new business was first accepted, through March 31, 2011 is included in our rate exhibits. Overall and by coverage rate indications are not included as our Arkansas loss experience is extremely limited to date. Proposed rate and factor adjustments are based on competitive rate

analysis of nine nonstandard auto carriers currently active in the state. We reviewed the current Arkansas rates, factors and rate plans used by Hallmark Insurance Company, Alfa Vision, Mendota, Traders Insurance Co., Santa Fe Auto, Equity, InsureMax, Safeway Insurance Company and United Auto Insurance Company. Based on our proposed rate position in the Arkansas market relative to these nine companies, it is our opinion that the Southern Insurance Company rates proposed herein are not excessive, inadequate nor unfairly discriminatory as defined by 23-67-208 of the Arkansas Insurance Code.

We are providing a number of exhibits in support of this filing. The following exhibits are found under the "Supporting Documentation" section:

Exhibit 1 (Pages 1-10), Summary of Territorial Base Rates and Factors. Pages 1 through 9 of the exhibit are a summary of all proposed territorial base rates and factors applying to Bodily Injury/Property Damage, PIP Medical Expense, PIP Income Loss, PIP Accidental Death, Uninsured Motorist Bodily Injury, Underinsured Motorist Bodily Injury, Uninsured Motorist Property Damage, Comprehensive and Collision coverages. Page 10 shows the Southern Insurance Company Arkansas step-by-step premium calculation formula by coverage including applicable rounding rules. All Revised rates, factors, surcharges and discounts are included in this exhibit.

Exhibit 2 (Page 1), Proposed Rate Change Summary. This exhibit shows the proposed estimated effect of changes to each rating element based on current written premium distribution and summarizes the changes by coverage. Liability, physical damage and overall premium effect summaries are also displayed.

Exhibit 2 (Page 2), Rate Change Summary by Territory and Coverage. This exhibit breaks down the estimated impact of all proposed changes by rating territory and coverage.

Exhibit 3, Proposed Changes to Territorial Base Rates. These exhibits show premium and loss distributions by rating territory for each coverage and the estimated effects of proposed changes to Bodily Injury/Property Damage, Comprehensive and Collision territorial base rates. No territorial base rate changes are proposed for Personal Injury Protection, UMBI, UIMBI or UMPD.

Exhibit 4, Proposed Changes to Driver Class Relativities. This exhibit displays the current and proposed Bodily Injury/Property Damage, Comprehensive and Collision driver class relativities and the percentage change between them. No changes are proposed to driver class relativities applicable to other coverages.

Exhibit 5, Summary and Effect of Vehicle Symbol Relativity Changes. This exhibit summarizes changes to Comprehensive and Collision vehicle symbol relativities for 2010 and older vehicles. Southern Insurance Company is making no revision to 2011 and future model year vehicle symbol relativities at this time.

Exhibit 6, Summary and Effect of Vehicle Model Year Relativity Changes. This exhibit summarizes changes to model year relativities applicable to Comprehensive and Collision coverage.

Exhibit 7, Effect of Policy and Service Fee Changes. This exhibit shows the effect of increasing SIC's policy fee for new business policies from \$30 to \$35 and eliminating the \$8 service fee currently required with the down payment. The collection of the policy fee is

deferred over the course of the six month policy term. The end result of the proposed changes is that SIC will collect \$3 less (\$10 versus the current \$13) in fees with the initial down payment for a new policy and will collect a total of \$75 in fees rather than the current \$78 if the policy completes the six month term. The effect that the change would have had on Arkansas policy fees collected between May 15, 2010 and March 31, 2011 is also displayed. Fees for renewal policies remain unchanged.

Arkansas BI/PD Liability Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-11

Base Premium	
BI & PD	
Territory	Base
5	173
8	195
9	190
10	192
11	155
12	310
13	235
14	155
15	220
16	200
17	295
18	290
19	275
20	258
21	275
22	155
23	194
24	155
25	159
26	159
27	183
28	173
29	175
30	181
31	168
32	172
33	161
34	165
35	165
36	235
37	223
38	247
39	155

BIPD Limits	
Limit	Factor
25/50/25	1.00

Driver Points	
Points	Relativity
0	1.000
1	1.025
2	1.140
3	1.300
4	1.400
5	1.650
6	1.780
7	1.950
8	2.100
9	2.500
10	2.900
11	3.500
12	4.000
13	4.500
14	5.000
15	5.500

Surcharge/Discount Factors	
	Factor
Four Wheel Drive Surcharge	1.100
Unverifiable Driving Rec. Surcharge	1.100
Accident Prevention Course Discount	0.950
College Student Discount	0.950
Homeowner's Discount	0.950
Multi-Car Discount	0.800

Transfer/Renewal Discount	
Transfer Discount:	
0 days lapse	15%
1-15 days lapse	10%
Renewal Discount: 5% every six months accident free up to a maximum of 15%	

BI & PD Driver Classification Chart

Driver Age	Single Male		Married Male		Single Female		Married Female	
	Class	Factor	Class	Factor	Class	Factor	Class	Factor
16	17SM	8.700	17MM	6.510	17SF	7.390	17MF	5.420
17	16SM	8.150	16MM	5.970	16SF	7.060	16MF	4.550
18	15SM	5.750	15MM	4.220	15SF	4.430	15MF	3.565
19-20	14SM	3.560	14MM	2.910	14SF	3.030	14MF	1.980
21-22	13SM	2.360	13MM	1.810	13SF	2.140	13MF	1.430
23-24	12SM	2.000	12MM	1.525	12SF	1.595	12MF	1.266
25	11SM	1.440	11MM	1.156	11SF	1.330	11MF	1.155
26-27	10SM	1.400	10MM	1.156	10SF	1.330	10MF	1.155
28-29	9SM	1.400	9MM	1.156	9SF	1.330	9MF	1.155
30-35	8SM	1.156	8MM	1.050	8SF	1.156	8MF	1.050
36-49	7SM	1.156	7MM	1.050	7SF	1.156	7MF	1.050
50-54	6SM	1.051	6MM	1.000	6SF	1.050	6MF	1.000
55-59	5SM	1.051	5MM	1.000	5SF	1.050	5MF	1.000
60-64	4SM	1.100	4MM	1.050	4SF	1.100	4MF	1.050
65-69	3SM	1.100	3MM	1.250	3SF	1.100	3MF	1.200
70-75	2SM	2.410	2MM	1.920	2SF	1.980	2MF	1.750
76+	1SM	3.230	1MM	2.680	1SF	2.410	1MF	2.170
Extra Veh.	EV	1.000	EV	1.000	EV	1.000	EV	1.000

Arkansas PIP Medical Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-11

Base Premium	
Territory	PIP Med Base
5	138
8	145
9	135
10	135
11	132
12	173
13	138
14	138
15	150
16	135
17	164
18	150
19	154
20	155
21	155
22	129
23	128
24	124
25	134
26	133
27	132
28	132
29	132
30	135
31	123
32	127
33	126
34	125
35	140
36	140
37	130
38	140
39	135

Driver Points	
Points	PIP Med Relativity
0	1.000
1	1.025
2	1.140
3	1.300
4	1.400
5	1.650
6	1.780
7	1.950
8	2.100
9	2.500
10	2.900
11	3.500
12	4.000
13	4.500
14	5.000
15	5.500

Surcharge/Discount Factors	
	Factor
Four Wheel Drive Surcharge	1.100
Unverifiable Driving Rec. Surcharge	1.100
Multi-Car Discount	0.800
Accident Prevention Course Discount	0.950
College Student Discount	0.950

PIP Med. Limits	
Limit	Factor
\$5,000	1.00

PIP Med Driver Classification Chart

Driver Age
16
17
18
19-20
21-22
23-24
25
26-27
28-29
30-35
36-49
50-54
55-59
60-64
65-69
70-75
76+
Extra Veh.

Single Male	
Class	Factor
17SM	5.000
16SM	5.000
15SM	5.000
14SM	5.000
13SM	3.330
12SM	3.330
11SM	1.150
10SM	1.150
9SM	1.150
8SM	1.080
7SM	1.000
6SM	1.000
5SM	1.000
4SM	1.000
3SM	1.000
2SM	1.000
1SM	1.000
EV	1.000

Married Male	
Class	Factor
17MM	5.000
16MM	5.000
15MM	5.000
14MM	5.000
13MM	3.330
12MM	3.330
11MM	1.130
10MM	1.130
9MM	1.130
8MM	1.080
7MM	1.000
6MM	1.000
5MM	1.000
4MM	1.000
3MM	1.000
2MM	1.000
1MM	1.000
EV	1.000

Single Female	
Class	Factor
17SF	5.000
16SF	5.000
15SF	5.000
14SF	5.000
13SF	2.720
12SF	2.720
11SF	1.150
10SF	1.150
9SF	1.150
8SF	1.060
7SF	1.000
6SF	1.000
5SF	1.000
4SF	1.000
3SF	1.000
2SF	1.000
1SF	1.000
EV	1.000

Married Female	
Class	Factor
17MF	5.000
16MF	5.000
15MF	5.000
14MF	5.000
13MF	2.720
12MF	2.720
11MF	1.130
10MF	1.130
9MF	1.130
8MF	1.060
7MF	1.000
6MF	1.000
5MF	1.000
4MF	1.000
3MF	1.000
2MF	1.000
1MF	1.000
EV	1.000

Arkansas PIP Income Loss Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-11

Base Premium	
PIP Income Loss Territory	Base
5	33
8	33
9	33
10	40
11	33
12	40
13	33
14	33
15	33
16	37
17	33
18	33
19	33
20	35
21	33
22	33
23	30
24	30
25	30
26	30
27	30
28	30
29	30
30	30
31	30
32	30
33	30
34	30
35	30
36	35
37	33
38	34
39	31

Driver Points	
PIP Income Loss Points	Relativity
0	1.000
1	1.025
2	1.140
3	1.300
4	1.400
5	1.650
6	1.780
7	1.950
8	2.100
9	2.500
10	2.900
11	3.500
12	4.000
13	4.500
14	5.000
15	5.500

Surcharge/Discount Factors	
	Factor
Four Wheel Drive Surcharge	1.100
Unverifiable Driving Rec. Surcharge	1.100
Multi-Car Discount	0.800

PIP Work Loss Limits	
Limit	Factor
* per statute	1.00

* Seventy percent (70%) of the loss of income from work during a period commencing eight (8) days after the date of the accident, and not to exceed fifty-two (52) weeks , but subject to a maximum of one hundred forty dollars (\$140) per week.

PIP Income Loss Driver Classification Chart

Driver Age	Single Male		Married Male		Single Female		Married Female	
	Class	Factor	Class	Factor	Class	Factor	Class	Factor
16	17SM	2.000	17MM	2.000	17SF	2.000	17MF	2.000
17	16SM	2.000	16MM	2.000	16SF	2.000	16MF	2.000
18	15SM	2.000	15MM	2.000	15SF	2.000	15MF	2.000
19-20	14SM	1.500	14MM	1.500	14SF	1.500	14MF	1.500
21-22	13SM	1.200	13MM	1.200	13SF	1.200	13MF	1.200
23-24	12SM	1.000	12MM	1.000	12SF	1.000	12MF	1.000
25	11SM	1.000	11MM	1.000	11SF	1.000	11MF	1.000
26-27	10SM	1.000	10MM	1.000	10SF	1.000	10MF	1.000
28-29	9SM	1.000	9MM	1.000	9SF	1.000	9MF	1.000
30-35	8SM	1.000	8MM	1.000	8SF	1.000	8MF	1.000
36-49	7SM	1.000	7MM	1.000	7SF	1.000	7MF	1.000
50-54	6SM	1.000	6MM	1.000	6SF	1.000	6MF	1.000
55-59	5SM	1.000	5MM	1.000	5SF	1.000	5MF	1.000
60-64	4SM	1.000	4MM	1.000	4SF	1.000	4MF	1.000
65-69	3SM	1.000	3MM	1.000	3SF	1.000	3MF	1.000
70-75	2SM	1.000	2MM	1.000	2SF	1.000	2MF	1.000
76+	1SM	1.000	1MM	1.000	1SF	1.000	1MF	1.000
Extra Veh.	EV	1.000	EV	1.000	EV	1.000	EV	1.000

Arkansas PIP Accidental Death Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-11

Base Premium	
PIP Acc. Death	
Territory	Base
5	33
8	35
9	33
10	37
11	33
12	42
13	33
14	33
15	35
16	36
17	36
18	35
19	36
20	40
21	36
22	33
23	33
24	33
25	33
26	33
27	33
28	33
29	33
30	33
31	33
32	33
33	33
34	34
35	33
36	37
37	33
38	38
39	35

Driver Points	
PIP Acc. Death	
Points	Relativity
0	1.000
1	1.025
2	1.140
3	1.300
4	1.400
5	1.650
6	1.780
7	1.950
8	2.100
9	2.500
10	2.900
11	3.500
12	4.000
13	4.500
14	5.000
15	5.500

Surcharge/Discount Factors	
	Factor
Four Wheel Drive Surcharge	1.100
Unverifiable Driving Rec. Surcharge	1.100
Multi-Car Discount	0.800

PIP Acc. Death	
Limit	Factor
\$5,000	1.00

PIP Acc. Death Driver Classification Chart

Driver Age	Single Male		Married Male		Single Female		Married Female	
	Class	Factor	Class	Factor	Class	Factor	Class	Factor
16	17SM	2.000	17MM	2.000	17SF	2.000	17MF	2.000
17	16SM	2.000	16MM	2.000	16SF	2.000	16MF	2.000
18	15SM	2.000	15MM	2.000	15SF	2.000	15MF	2.000
19-20	14SM	1.500	14MM	1.500	14SF	1.500	14MF	1.500
21-22	13SM	1.200	13MM	1.200	13SF	1.200	13MF	1.200
23-24	12SM	1.000	12MM	1.000	12SF	1.000	12MF	1.000
25	11SM	1.000	11MM	1.000	11SF	1.000	11MF	1.000
26-27	10SM	1.000	10MM	1.000	10SF	1.000	10MF	1.000
28-29	9SM	1.000	9MM	1.000	9SF	1.000	9MF	1.000
30-35	8SM	1.000	8MM	1.000	8SF	1.000	8MF	1.000
36-49	7SM	1.000	7MM	1.000	7SF	1.000	7MF	1.000
50-54	6SM	1.000	6MM	1.000	6SF	1.000	6MF	1.000
55-59	5SM	1.000	5MM	1.000	5SF	1.000	5MF	1.000
60-64	4SM	1.000	4MM	1.000	4SF	1.000	4MF	1.000
65-69	3SM	1.000	3MM	1.000	3SF	1.000	3MF	1.000
70-75	2SM	1.000	2MM	1.000	2SF	1.000	2MF	1.000
76+	1SM	1.000	1MM	1.000	1SF	1.000	1MF	1.000
Extra Veh.	EV	1.000	EV	1.000	EV	1.000	EV	1.000

Arkansas UMBI Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-1

Base Premium	
Territory	UMBI Base
5	39
8	44
9	36
10	35
11	31
12	46
13	39
14	39
15	56
16	35
17	48
18	48
19	53
20	46
21	44
22	29
23	29

Base Premium	
Territory	UMBI Base
24	30
25	31
26	33
27	35
28	35
29	40
30	33
31	33
32	35
33	30
34	30
35	31
36	37
37	35
38	43
39	30

UMBI Limits	
Limit	Factor
25/50	1.00

Transfer/Renewal Discount	
Transfer Discount:	
0 days lapse	15%
1-15 days lapse	10%
Renewal Discount: 5% every six months accident free up to a maximum of 15%	

UMBI Driver Classification Chart

Driver Age
16
17
18
19-20
21-22
23-24
25
26-27
28-29
30-35
36-49
50-54
55-59
60-64
65-69
70-75
76+
Extra Veh.

Single Male	
Class	Factor
17SM	1.530
16SM	1.530
15SM	1.530
14SM	1.530
13SM	1.530
12SM	1.000
11SM	1.000
10SM	1.000
9SM	1.000
8SM	1.000
7SM	1.000
6SM	1.000
5SM	1.000
4SM	1.000
3SM	1.000
2SM	1.000
1SM	1.000
EV	1.000

Married Male	
Class	Factor
17MM	1.530
16MM	1.530
15MM	1.530
14MM	1.530
13MM	1.530
12MM	1.000
11MM	1.000
10MM	1.000
9MM	1.000
8MM	1.000
7MM	1.000
6MM	1.000
5MM	1.000
4MM	1.000
3MM	1.000
2MM	1.000
1MM	1.000
EV	1.000

Single Female	
Class	Factor
17SF	1.530
16SF	1.530
15SF	1.530
14SF	1.530
13SF	1.530
12SF	1.000
11SF	1.000
10SF	1.000
9SF	1.000
8SF	1.000
7SF	1.000
6SF	1.000
5SF	1.000
4SF	1.000
3SF	1.000
2SF	1.000
1SF	1.000
EV	1.000

Married Female	
Class	Factor
17MF	1.530
16MF	1.530
15MF	1.530
14MF	1.530
13MF	1.530
12MF	1.000
11MF	1.000
10MF	1.000
9MF	1.000
8MF	1.000
7MF	1.000
6MF	1.000
5MF	1.000
4MF	1.000
3MF	1.000
2MF	1.000
1MF	1.000
EV	1.000

Arkansas UIMBI Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-1

Base Premium	
Territory	UIMBI Base
5	20
8	17
9	20
10	21
11	21
12	17
13	14
14	14
15	12
16	20
17	15
18	14
19	11
20	13
21	19
22	24
23	23

Base Premium	
Territory	UIMBI Base
24	22
25	22
26	20
27	19
28	21
29	13
30	21
31	21
32	18
33	22
34	25
35	26
36	21
37	21
38	14
39	24

UIMBI Limits	
Limit	Factor
25/50	1.00

Transfer/Renewal Discount	
Transfer Discount:	
0 days lapse	15%
1-15 days lapse	10%
Renewal Discount: 5% every six months accident free up to a maximum of 15%	

UIMBI Driver Classification Chart

Driver Age
16
17
18
19-20
21-22
23-24
25
26-27
28-29
30-35
36-49
50-54
55-59
60-64
65-69
70-75
76+
Extra Veh.

Single Male	
Class	Factor
17SM	1.530
16SM	1.530
15SM	1.530
14SM	1.530
13SM	1.530
12SM	1.000
11SM	1.000
10SM	1.000
9SM	1.000
8SM	1.000
7SM	1.000
6SM	1.000
5SM	1.000
4SM	1.000
3SM	1.000
2SM	1.000
1SM	1.000
EV	1.000

Married Male	
Class	Factor
17MM	1.530
16MM	1.530
15MM	1.530
14MM	1.530
13MM	1.530
12MM	1.000
11MM	1.000
10MM	1.000
9MM	1.000
8MM	1.000
7MM	1.000
6MM	1.000
5MM	1.000
4MM	1.000
3MM	1.000
2MM	1.000
1MM	1.000
EV	1.000

Single Female	
Class	Factor
17SF	1.530
16SF	1.530
15SF	1.530
14SF	1.530
13SF	1.530
12SF	1.000
11SF	1.000
10SF	1.000
9SF	1.000
8SF	1.000
7SF	1.000
6SF	1.000
5SF	1.000
4SF	1.000
3SF	1.000
2SF	1.000
1SF	1.000
EV	1.000

Married Female	
Class	Factor
17MF	1.530
16MF	1.530
15MF	1.530
14MF	1.530
13MF	1.530
12MF	1.000
11MF	1.000
10MF	1.000
9MF	1.000
8MF	1.000
7MF	1.000
6MF	1.000
5MF	1.000
4MF	1.000
3MF	1.000
2MF	1.000
1MF	1.000
EV	1.000

Arkansas UMPD Rates and Relativities Summary

Southern Insurance Company 6 month Rates - Effective 9-1-1

Base Premium	
Territory	UMPD Base
5	35
8	34
9	33
10	33
11	35
12	37
13	35
14	35
15	34
16	32
17	35
18	35
19	35
20	34
21	34
22	35
23	34

Base Premium	
Territory	UMPD Base
24	34
25	34
26	34
27	33
28	34
29	34
30	35
31	33
32	34
33	33
34	35
35	32
36	34
37	34
38	34
39	32

UMPD Limits	
Limit	Factor
25,000	1.00

\$200 Deductible

Transfer/Renewal Discount	
Transfer Discount:	
0 days lapse	15%
1-15 days lapse	10%
Renewal Discount: 5% every six months accident free up to a maximum of 15%	

Arkansas "Other Than Collision" Rates and Relativities Summary
Southern Insurance Company 6 month Rates - Effective 9-1-11

OTC Base Premium	
Territory	Base
5	130
8	122
9	101
10	96
11	114
12	137
13	124
14	120
15	126
16	91
17	99
18	91
19	132
20	105
21	104
22	112
23	119
24	117
25	112
26	112
27	99
28	130
29	113
30	102
31	110
32	112
33	112
34	112
35	90
36	112
37	105
38	105
39	112

OTC Driver Points		
Points	Relativity	
0	1.000	
1	1.025	
2	1.100	
3	1.190	
4	1.250	
5	1.400	
6	1.475	
7	1.550	
8	1.700	
9	1.950	
10	2.200	
11	3.000	
12	3.500	
13	4.000	
14	4.500	
15	5.000	

Model Year		
Year	Relativity	
2013	1.150	
2012	1.100	
2011	1.050	
2010	1.000	
2009	0.950	
2008	0.921	
2007	0.871	
2006	0.777	
2005	0.777	
2004	0.705	
2003	0.647	
2002	0.612	
2001	0.568	
2000	0.547	
99 & Prior	0.518	

OTC Symbol 89/90 to 2010		
Symbol	Relativity	
1/1-6	1.000	
2/7	1.000	
3/8	1.000	
4/	1.000	
5/	1.000	
6/10	1.036	
7/11	1.173	
8/	1.201	
10/	1.302	
11/12	1.388	
12/	1.468	
13/13	1.554	
14/	1.669	
15/14	1.734	
16/15	1.921	
17/	1.971	
18/	2.108	
19/16	2.173	
20/17	2.302	
21/18	2.424	

OTC Deductible Relativities		
250/250	1.25	
500/500	1.00	
1000/1000	0.80	

OTC Symbol 2011 and later		
Symbol	Relativity	
1	0.530	
2	0.660	
3	0.810	
4	1.000	
5	1.140	
6	1.260	
7	1.400	
8	1.500	
10	1.620	
11	1.720	
12	1.830	
13	1.910	
14	2.000	
15	2.100	
16	2.190	
17	2.290	
18	2.400	
19	2.480	
20	2.570	
21	2.660	
22	2.740	
23	2.830	
24	2.910	
25	3.000	
26	3.070	
27	3.160	
28	3.240	
29	3.310	
30	3.400	
31	3.480	
32	3.550	
33	3.620	
34	3.710	
35	3.780	
36	3.880	
37	4.000	
38	4.120	
39	4.220	
40	4.340	
41	4.450	
42	4.570	
43	4.670	
44	4.790	
45	4.900	

Surcharge/Discount Factors	
	Factor
4 Wheel Drive Surch.	1.10
Unverifiable Drv. Rec.	1.10
College Student Discount	0.95
Homeowner's Discount	0.95
Multi-Car Discount	0.80

Transfer/Renewal Discount		
Transfer Discount:		
0 days lapse	18%	
1-15 days lapse	12%	
Renewal Discount: 6% every six months accident free up to a maximum of 18%		

Comprehensive Driver Classification Chart								
Driver Age	Single Male		Married Male		Single Female		Married Female	
	Class	Factor	Class	Factor	Class	Factor	Class	Factor
16	17SM	4.500	17MM	4.000	17SF	3.350	17MF	5.050
17	16SM	4.500	16MM	4.000	16SF	3.350	16MF	5.050
18	15SM	3.780	15MM	3.310	15SF	3.120	15MF	3.150
19-20	14SM	3.300	14MM	2.150	14SF	2.100	14MF	2.300
21-22	13SM	2.350	13MM	1.760	13SF	1.500	13MF	1.430
23-24	12SM	1.985	12MM	1.585	12SF	1.450	12MF	1.210
25	11SM	1.530	11MM	1.205	11SF	1.430	11MF	1.210
26-27	10SM	1.530	10MM	1.205	10SF	1.430	10MF	1.210
28-29	9SM	1.530	9MM	1.205	9SF	1.430	9MF	1.210
30-35	8SM	1.205	8MM	1.100	8SF	1.210	8MF	1.100
36-49	7SM	1.205	7MM	1.100	7SF	1.210	7MF	1.100
50-54	6SM	1.065	6MM	1.000	6SF	1.060	6MF	1.000
55-59	5SM	1.065	5MM	1.000	5SF	1.060	5MF	1.000
60-64	4SM	1.100	4MM	1.045	4SF	1.100	4MF	1.040
65-69	3SM	1.100	3MM	1.045	3SF	1.100	3MF	1.040
70-75	2SM	1.210	2MM	1.150	2SF	1.210	2MF	1.100
76+	1SM	1.210	1MM	1.150	1SF	1.210	1MF	1.100
Ex. Veh.	EV	1.000	EV	1.000	EV	1.000	EV	1.000

Arkansas Collision Rates and Relativities Summary
Southern Insurance Company 6 month Rates - Effective 9-1-11

Coll Base Premium	
Territory	Base
5	302
8	285
9	236
10	271
11	267
12	400
13	271
14	281
15	295
16	246
17	361
18	313
19	309
20	316
21	242
22	262
23	285
24	276
25	263
26	261
27	230
28	300
29	263
30	267
31	256
32	263
33	263
34	262
35	210
36	347
37	311
38	352
39	263

Coll Driver Points		
Points	Relativity	
0	1.000	
1	1.025	
2	1.100	
3	1.190	
4	1.250	
5	1.400	
6	1.475	
7	1.550	
8	1.700	
9	1.950	
10	2.200	
11	3.000	
12	3.500	
13	4.000	
14	4.500	
15	5.000	

Model Year		
Year	Relativity	
2013	1.150	
2012	1.100	
2011	1.050	
2010	1.000	
2009	0.948	
2008	0.917	
2007	0.865	
2006	0.772	
2005	0.772	
2004	0.702	
2003	0.649	
2002	0.606	
2001	0.566	
2000	0.545	
99 & Prior	0.514	

Coll Symbol 89/90 to 2010		
Symbol	Relativity	
1/1-6	1.000	
2/7	1.000	
3/8	1.000	
4/	1.000	
5/	1.000	
6/10	1.031	
7/11	1.166	
8/	1.200	
10/	1.298	
11/12	1.382	
12/	1.465	
13/13	1.548	
14/	1.665	
15/14	1.732	
16/15	1.914	
17/	1.963	
18/	2.098	
19/16	2.163	
20/17	2.298	
21/18	2.415	

Coll Deductible Relativities		
Deductible	Relativity	
250/250	1.25	
500/500	1.00	
1000/1000	0.80	

Coll Symbol 2011 and later		
Symbol	Relativity	
1	0.570	
2	0.710	
3	0.870	
4	1.000	
5	1.060	
6	1.100	
7	1.140	
8	1.190	
10	1.250	
11	1.300	
12	1.340	
13	1.380	
14	1.400	
15	1.440	
16	1.470	
17	1.510	
18	1.550	
19	1.580	
20	1.610	
21	1.650	
22	1.690	
23	1.730	
24	1.750	
25	1.790	
26	1.820	
27	1.840	
28	1.880	
29	1.910	
30	1.950	
31	1.970	
32	2.000	
33	2.040	
34	2.060	
35	2.090	
36	2.130	
37	2.170	
38	2.210	
39	2.230	
40	2.270	
41	2.300	
42	2.340	
43	2.360	
44	2.390	
45	2.420	

Surcharge/Discount Factors	
	Factor
4 Wheel Drive Surch.	1.10
Unverifiable Drv. Rec.	1.10
Accident Prevention Course Discount	0.95
College Student Discount	0.95
Homeowner's Discount	0.95
Multi-Car Discount	0.80

Transfer/Renewal Discount	
Transfer Discount:	
0 days lapse	18%
1-15 days lapse	12%
Renewal Discount: 6% every six months accident free up to a maximum of 18%	

Collision Driver Classification Chart								
Driver Age	Single Male		Married Male		Single Female		Married Female	
	Class	Factor	Class	Factor	Class	Factor	Class	Factor
16	17SM	5.500	17MM	4.300	17SF	3.900	17MF	4.200
17	16SM	5.500	16MM	4.300	16SF	3.900	16MF	4.200
18	15SM	5.500	15MM	3.700	15SF	3.900	15MF	2.900
19-20	14SM	3.800	14MM	3.000	14SF	3.100	14MF	2.000
21-22	13SM	2.305	13MM	2.150	13SF	1.485	13MF	1.430
23-24	12SM	1.980	12MM	1.585	12SF	1.436	12MF	1.206
25	11SM	1.525	11MM	1.206	11SF	1.428	11MF	1.206
26-27	10SM	1.525	10MM	1.206	10SF	1.428	10MF	1.206
28-29	9SM	1.525	9MM	1.206	9SF	1.428	9MF	1.206
30-35	8SM	1.206	8MM	1.100	8SF	1.206	8MF	1.098
36-49	7SM	1.206	7MM	1.100	7SF	1.206	7MF	1.098
50-54	6SM	1.065	6MM	1.000	6SF	1.065	6MF	1.000
55-59	5SM	1.065	5MM	1.000	5SF	1.065	5MF	1.000
60-64	4SM	1.100	4MM	1.045	4SF	1.100	4MF	1.043
65-69	3SM	1.100	3MM	1.045	3SF	1.100	3MF	1.043
70-75	2SM	1.500	2MM	1.520	2SF	1.206	2MF	1.400
76+	1SM	1.500	1MM	1.520	1SF	1.206	1MF	1.400
Ex. Veh.	EV	1.000	EV	1.000	EV	1.000	EV	1.000

Arkansas Rating Sequence Worksheet

(rounding rules for each step shown in parenthesis)

Rating Element	BIPD	PIP Medical	PIP Work Loss	PIP Acc. Death	UMBI	UIMBI	UMPD	Comprehensive	Collision
Territorial Base Rate	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Increased Limit Factor	x _____ (penny)								
Driver Class Factor	x _____ (penny)	x _____ (penny)	x _____ (penny)	x _____ (penny)	x _____ (dollar)	x _____ (dollar)		x _____ (penny)	x _____ (penny)
Vehicle Symbol Factor								x _____ (penny)	x _____ (penny)
Model Year Factor								x _____ (penny)	x _____ (penny)
Driver Point Surcharge Factor	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)				x _____ (penny)	x _____ (penny)
Deductible Factor								x _____ (dollar)	x _____ (dollar)
Four Wheel Drive Surcharge	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)				x _____ (dollar)	x _____ (dollar)
Unverifiable Driving Record Surcharge	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)				x _____ (dollar)	x _____ (dollar)
Transfer/Renewal Discount	x _____ (dollar)				x _____ (dollar)				
Multi-Car Discount	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)	x _____ (dollar)				x _____ (dollar)	x _____ (dollar)
Accident Prevention Course - age 55+	x _____ (dollar)	x _____ (dollar)							x _____ (dollar)
College Student Discount - Single <25	x _____ (dollar)	x _____ (dollar)						x _____ (dollar)	x _____ (dollar)
Homeowner's Discount	x _____ (dollar)							x _____ (dollar)	x _____ (dollar)
Total Coverage Premium	\$ _____								

Round .005 and .50 up

Proposed Rate Change Summary

Rating Element	BI/PD Coverage	PIP Medical	PIP Inc. Loss	PIP Acc. Death	UMBI Coverage	UIMBI Coverage	UMPD Coverage	Total Liability	Comprehensive	Collision	Total Phys. Dam.	Overall Premium Change
A. Territorial Base Rate Changes	0.900	1.000	1.000	1.000	1.000	1.000	1.000		1.142	0.946		
B. Driver Class Relativity Changes	1.018	1.000	1.000	1.000	1.000	1.000			0.980	0.976		
C. Physical Damage Vehicle Symbol Relativity Adjustment									0.902	0.938		
D. Physical Damage Base Model Year Relativity Adjustment									1.055	1.065		
E. Est. Total Rate Level Adjustment	0.916	1.000	1.000	1.000	1.000	1.000	1.000		1.065	0.923		
F. 5/10-3/11 Current Level Written Premium @ 3/31/11	189,119	755	63	69	7,010	1,846	6,166	205,028	6,242	15,744	21,986	227,014
G. Premium @ Proposed	173,211	755	63	69	7,010	1,846	6,166	189,120	6,646	14,537	21,182	210,302
H. Premium Change	-15,908	0	0	0	0	0	0	-15,908	404	-1,207	-804	-16,712
I. Total Effect (line H / line F)	-8.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-7.8%	6.5%	-7.7%	-3.7%	-7.4%

Rate Change Summary by Territory and Coverage

Territory	BIPD	PIP-Med	PIP-Inc Loss	PIP-AD	UMBI	UIMBI	UMPD	Comp	Collision	% Change by Terr.
5 Crittenden County, Crawfordsville, Marion, West Memphis	-18.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.0%	7.5%	-16.3%
8 SW Garland Co, Hot Springs	-15.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-8.2%	-6.7%	-14.8%
9 Jonesboro	-8.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-2.9%	-7.5%	-8.7%
10 Fort Smith, Van Buren	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.4%
11 SE Arkansas, Crossett, Mc Gehee, Monticello	-8.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-4.2%	4.2%	-6.4%
12 South Little Rock	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.1%
13 Lee & St. Francis Counties, Forest City, Madison	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.2%
14 Phillips County, Elaine, Helena	-32.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-32.2%	-37.4%	-29.2%
15 Western Jefferson County, Pine Bluff, White Hall	-7.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-19.0%	-34.9%	-6.7%
16 Crawford & Sebastian Counties, Cedarville, Greenwood	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.8%
17 Little Rock, North Little Rock	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.8%
18 Alexandar, SW Little Rock	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.8%
19 North Little Rock, Scott	-4.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-8.8%	-28.9%	-7.1%
20 Cabot, Lonoke	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	0.8%
21 Little Rock, Maumelle, North Little Rock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	12.8%	-24.3%	-1.8%
22 South Central Arkansas, Camden, El Dorado, Warren	-9.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-5.9%	8.8%	-2.9%
23 SW Arkansas, Ashdown, Locksburg, Murfreesboro, Texarkana	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	-0.9%
24 SW Arkansas, Magnolia, Perrytown,	-8.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-9.8%	-6.5%	-8.5%
25 New Port, Searcy	-9.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-18.4%	-15.0%	-10.0%
26 Batesville, Cherokee Village, Highland, Horseshoe Bend	-9.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.6%	-5.7%	-9.2%
27 Cross & Poinsett Counties, Trumann, Wynne	-9.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-11.2%	-7.7%	-9.1%
28 Mississippi County, Blytheville, Osceola	-11.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-6.5%	-10.6%
29 NE Arkansas, Pocahontas, Piggott, Paragould	-17.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-12.2%	-7.0%	-13.9%
30 Brinkley, Carlisle, Stuttgart	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.5%
31 Conway, Morrilton, Russellville	-8.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	15.3%	-15.6%	-7.5%
32 Northern Arkansas, Bull Shoals, Harrison, Marshall, Mountian Home	-11.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-3.3%	-12.7%	-10.8%
33 West Cental Arkansas, Clarksville	-8.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	8.8%	-7.0%	-7.6%
34 Benton County, Belle Vista, Rodgers, Huntsville	-13.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	3.4%	-3.9%	-12.9%
35 Washington County, Fayetteville, Goshen, Springdale	-8.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.3%	0.9%	-6.1%
36 Southern Saline County, Benton, Bryant, Haskell	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.2%
37 Grant County, Prattsville, Sheridan	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.2%
38 Coy, England	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.7%	-2.4%	1.4%
39 Arkadelphia, Caddo Valley, Donaldson, Malvern, Rockport	-12.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-5.9%	9.2%	-12.0%
Overall Change by Coverage	-8.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.5%	-7.7%	-7.4%

* Percentages include estimated overall changes to base rates, driver class relativities, symbol relativities and model year relativities.

Effect of Territorial Base Rate Changes

Semi-Annual Premiums
25/50/25 Bodily Injury/Property Damage

(1) Area	(2) Current Territory	(3) 5/10-3/11 Curr. Lev. W. Prem.	(4) 5/10 - 3/11 Curr. Lev. E. Prem.	(5) Experience as of 3/11 Incurred Loss	(6) Loss Ratio	(7) Current Base Rate	(8) Proposed Base Rate	(9) Percent Change
Crittenden County, Crawfordsville, Marion, West Memphis	5	768	357	0	0.0%	215	173	-19.5%
SW Garland Co, Hot Springs	8	3,431	823	0	0.0%	235	195	-17.0%
Jonesboro	9	1,452	532	0	0.0%	212	190	-10.4%
Fort Smith, Van Buren	10	636	454	0	0.0%	192	192	0.0%
SE Arkansas, Crossett, Mc Gehee, Monticello	11	545	534	0	0.0%	173	155	-10.4%
South Little Rock	12	6,588	1,947	0	0.0%	310	310	0.0%
Lee & St. Francis Counties, Forest City, Madison	13	0	0	0	0.0%	235	235	0.0%
Phillips County, Elaine, Helena	14	615	95	0	0.0%	235	155	-34.0%
Western Jefferson County, Pine Bluff, White Hall	15	4,963	3,241	0	0.0%	242	220	-9.1%
Crawford & Sabastian Counties, Cedarville, Greenwood	16	112	121	0	0.0%	200	200	0.0%
Little Rock, North Little Rock	17	1,376	459	0	0.0%	295	295	0.0%
Alexandar, SW Little Rock	18	117	116	0	0.0%	290	290	0.0%
North Little Rock, Scott	19	9,157	2,562	0	0.0%	294	275	-6.5%
Cabot, Lonoke	20	3,790	1,333	2,000	150.0%	258	258	0.0%
Little Rock, Maumelle, North Little Rock	21	9,076	2,606	5,000	191.9%	280	275	-1.8%
South Central Arkansas, Camden, El Dorado, Warren	22	2,408	176	0	0.0%	174	155	-10.9%
SW Arkansas, Ashdown, Locksburg, Murfreesboro, Texarkana	23	499	98	0	0.0%	194	194	0.0%
SW Arkansas, Magnolia, Perrytown,	24	12,238	3,427	0	0.0%	173	155	-10.4%
New Port, Searcy	25	2,440	107	0	0.0%	179	159	-11.2%
Batesville, Cherokee Village, Highland, Horseshoe Bend	26	1,679	194	0	0.0%	179	159	-11.2%
Cross & Poinsett Counties, Trumann, Wynne	27	235	17	0	0.0%	205	183	-10.7%
Mississippi County, Blytheville, Osceola	28	570	158	0	0.0%	200	173	-13.5%
NE Arkansas, Pocahontas, Piggott, Paragould	29	1,920	754	0	0.0%	215	175	-18.6%
Brinkley, Carlisle, Stuttgart	30	932	215	0	0.0%	181	181	0.0%
Conway, Morrilton, Russellville	31	36,113	6,914	0	0.0%	187	168	-10.2%
Northern Arkansas, Bull Shoals, Harrison, Marshall, Mountian Home	32	8,662	2,172	0	0.0%	197	172	-12.7%
West Cental Arkansas, Clarksville	33	9,899	2,671	0	0.0%	180	161	-10.6%
Benton County, Belle Vista, Rodgers, Huntsville	34	26,749	7,773	0	0.0%	194	165	-14.9%
Washington County, Fayetteville, Goshen, Springdale	35	41,272	8,030	19,290	240.2%	184	165	-10.3%
Southern Saline County, Benton, Bryant, Haskell	36	0	0	0	0.0%	235	235	0.0%
Grant County, Prattsville, Sheridan	37	0	0	0	0.0%	223	223	0.0%
Coy, England	38	45	45	0	0.0%	247	247	0.0%
Arkadelphia, Caddo Valley, Donaldson, Malvern, Rockport	39	833	177	0	0.0%	180	155	-13.9%

54.6%

Estimated Effect of Changes

-10.0%

Effect of Territorial Base Rate Changes
Semi-Annual Premiums
500 Ded. Comprehensive Coverage, Model Year 2010, Cost New \$8,001 to \$9,000

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Area	Current Territory	5/10-3/11 Curr. Lev. W. Prem.	5/10 - 3/11 Curr. Lev. E. Prem.	Experience as of 3/11 Incurred Loss	Loss Ratio	Current M.Y. 2010 Rate	Proposed M.Y. 2010 Base Rate	Percent Change
Crittenden County, Crawfordsville, Marion, West Memphis	5	0	0	0	0.0%	120	130	8.3%
SW Garland Co, Hot Springs	8	0	0	0	0.0%	124	122	-1.6%
Jonesboro	9	0	0	0	0.0%	97	101	4.1%
Fort Smith, Van Buren	10	0	0	0	0.0%	96	96	0.0%
SE Arkansas, Crossett, Mc Gehee, Monticello	11	0	0	0	0.0%	111	114	2.7%
South Little Rock	12	222	34	0	0.0%	137	137	0.0%
Lee & St. Francis Counties, Forest City, Madison	13	0	0	0	0.0%	124	124	0.0%
Phillips County, Elaine, Helena	14	0	0	0	0.0%	165	120	-27.3%
Western Jefferson County, Pine Bluff, White Hall	15	25	25	0	0.0%	145	126	-13.1%
Crawford & Sabastian Counties, Cedarville, Greenwood	16	0	0	0	0.0%	91	91	0.0%
Little Rock, North Little Rock	17	0	0	0	0.0%	99	99	0.0%
Alexandar, SW Little Rock	18	0	0	0	0.0%	91	91	0.0%
North Little Rock, Scott	19	513	130	0	0.0%	135	132	-2.2%
Cabot, Lonoke	20	219	36	0	0.0%	105	105	0.0%
Little Rock, Maumelle, North Little Rock	21	374	60	0	0.0%	86	104	20.9%
South Central Arkansas, Camden, El Dorado, Warren	22	751	40	0	0.0%	111	112	0.9%
SW Arkansas, Ashdown, Locksburg, Murfreesboro, Texarkana	23	152	40	0	0.0%	119	119	0.0%
SW Arkansas, Magnolia, Perrytown,	24	622	52	0	0.0%	121	117	-3.3%
New Port, Searcy	25	161	2	0	0.0%	128	112	-12.5%
Batesville, Cherokee Village, Highland, Horseshoe Bend	26	0	0	0	0.0%	98	112	14.3%
Cross & Poinsett Counties, Trumann, Wynne	27	0	0	0	0.0%	104	99	-4.8%
Mississippi County, Blytheville, Osceola	28	0	0	0	0.0%	130	130	0.0%
NE Arkansas, Pocahontas, Piggott, Paragould	29	136	54	0	0.0%	120	113	-5.8%
Brinkley, Carlisle, Stuttgart	30	0	0	0	0.0%	102	102	0.0%
Conway, Morrilton, Russelville	31	916	112	0	0.0%	89	110	23.6%
Northern Arkansas, Bull Shoals, Harrison, Marshall, Mountian Home	32	228	51	0	0.0%	108	112	3.7%
West Cental Arkansas, Clarksville	33	133	11	0	0.0%	96	112	16.7%
Benton County, Belle Vista, Rodgers, Huntsville	34	0	0	0	0.0%	101	112	10.9%
Washington County, Fayetteville, Goshen, Springdale	35	1,792	286	0	0.0%	67	90	34.3%
Southern Saline County, Benton, Bryant, Haskell	36	0	0	0	0.0%	112	112	0.0%
Grant County, Prattsville, Sheridan	37	0	0	0	0.0%	105	105	0.0%
Coy, England	38	0	0	0	0.0%	105	105	0.0%
Arkadelphia, Caddo Valley, Donaldson, Malvern, Rockport	39	0	0	0	0.0%	111	112	0.9%

0.0%

Estimated Effect of Changes

14.2%

ARKANSAS
Southern Insurance Company
Summary of Proposed Driver Class Relativities
BIPD Coverage

Driver Age	Current Driver Class	Curr. Level W. Prem. 5/10-3/11	5/10-3/11 Experience			Current Factor	Proposed Factor	% Change
			Curr. Level Earned Premium	Inc. Loss as of 3/31/11	Loss Ratio			
Single Male								
16	17SM	0	0	0	0.0	8.700	8.700	0.0%
17	16SM	0	0	0	0.0	8.150	8.150	0.0%
18	15SM	0	0	0	0.0	5.750	5.750	0.0%
19-20	14SM	3,310	402	0	0.0	3.560	3.560	0.0%
21-22	13SM	3,848	758	0	0.0	2.360	2.360	0.0%
23-24	12SM	7,084	1,473	0	0.0	1.920	2.000	4.2%
25	11SM	2,404	633	0	0.0	1.340	1.440	7.5%
26-27	10SM	2,391	694	0	0.0	1.330	1.400	5.3%
28-29	9SM	2,887	934	0	0.0	1.330	1.400	5.3%
30-35	8SM	8,869	2,008	0	0.0	1.220	1.156	-5.2%
36-49	7SM	10,934	3,017	0	0.0	1.150	1.156	0.5%
50-54	6SM	1,706	384	0	0.0	1.196	1.051	-12.1%
55-59	5SM	2,542	709	0	0.0	1.196	1.051	-12.1%
60-64	4SM	1,263	395	0	0.0	1.210	1.100	-9.1%
65-69	3SM	367	260	0	0.0	1.300	1.100	-15.4%
70-75	2SM	464	332	0	0.0	2.410	2.410	0.0%
76+	1SM	0	0	0	0.0	3.230	3.230	0.0%
			11,999	0	0.0			
Married Male								
16	17MM	0	0	0	0.0	6.510	6.510	0.0%
17	16MM	0	0	0	0.0	5.970	5.970	0.0%
18	15MM	0	0	0	0.0	4.220	4.220	0.0%
19-20	14MM	653	196	0	0.0	2.910	2.910	0.0%
21-22	13MM	491	184	0	0.0	1.810	1.810	0.0%
23-24	12MM	2,674	1,018	0	0.0	1.405	1.525	8.5%
25	11MM	1,007	241	0	0.0	1.145	1.156	1.0%
26-27	10MM	3,783	944	0	0.0	1.145	1.156	1.0%
28-29	9MM	4,131	1,158	0	0.0	1.145	1.156	1.0%
30-35	8MM	12,312	3,327	19,290	579.8	1.000	1.050	5.0%
36-49	7MM	12,616	3,356	0	0.0	1.000	1.050	5.0%
50-54	6MM	3,695	833	0	0.0	1.000	1.000	0.0%
55-59	5MM	1,743	330	0	0.0	1.000	1.000	0.0%
60-64	4MM	698	205	0	0.0	1.000	1.050	5.0%
65-69	3MM	533	209	0	0.0	1.250	1.250	0.0%
70-75	2MM	0	0	0	0.0	1.920	1.920	0.0%
76+	1MM	0	0	0	0.0	2.680	2.680	0.0%
			12,001	19,290	160.7			
Single Female								
16	17SF	205	199	0	0.0	7.390	7.390	0.0%
17	16SF	0	0	0	0.0	7.060	7.060	0.0%
18	15SF	744	121	0	0.0	4.430	4.430	0.0%
19-20	14SF	2,401	551	0	0.0	3.030	3.030	0.0%
21-22	13SF	5,167	1,061	0	0.0	2.140	2.140	0.0%
23-24	12SF	9,425	2,066	0	0.0	1.595	1.595	0.0%
25	11SF	2,840	613	2,000	326.3	1.290	1.330	3.1%
26-27	10SF	5,927	1,408	0	0.0	1.290	1.330	3.1%
28-29	9SF	3,802	587	0	0.0	1.290	1.330	3.1%
30-35	8SF	11,892	3,011	0	0.0	1.200	1.156	-3.7%
36-49	7SF	14,438	4,141	0	0.0	1.110	1.156	4.1%
50-54	6SF	3,282	1,020	0	0.0	1.085	1.050	-3.2%
55-59	5SF	881	270	0	0.0	1.085	1.050	-3.2%
60-64	4SF	1,499	456	0	0.0	1.085	1.100	1.4%
65-69	3SF	480	370	0	0.0	1.130	1.100	-2.7%
70-75	2SF	0	0	0	0.0	1.980	1.980	0.0%
76+	1SF	0	0	0	0.0	2.410	2.410	0.0%
			15,874	2,000	12.6			
Married Female								
16	17MF	0	0	0	0.0	5.420	5.420	0.0%
17	16MF	0	0	0	0.0	4.550	4.550	0.0%
18	15MF	0	0	0	0.0	3.565	3.565	0.0%
19-20	14MF	727	26	0	0.0	1.980	1.980	0.0%
21-22	13MF	2,300	956	0	0.0	1.430	1.430	0.0%
23-24	12MF	2,527	447	0	0.0	1.266	1.266	0.0%
25	11MF	805	206	0	0.0	1.040	1.155	11.1%
26-27	10MF	3,428	691	0	0.0	1.040	1.155	11.1%
28-29	9MF	3,100	586	0	0.0	1.040	1.155	11.1%
30-35	8MF	6,740	1,789	5,000	279.5	1.000	1.050	5.0%
36-49	7MF	12,228	2,812	0	0.0	1.000	1.050	5.0%
50-54	6MF	1,070	473	0	0.0	1.000	1.000	0.0%
55-59	5MF	808	251	0	0.0	1.000	1.000	0.0%
60-64	4MF	0	0	0	0.0	1.000	1.050	5.0%
65-69	3MF	0	0	0	0.0	1.350	1.200	-11.1%
70-75	2MF	0	0	0	0.0	1.750	1.750	0.0%
76+	1MF	0	0	0	0.0	2.170	2.170	0.0%
			8,237	5,000	60.7			
Overall Effect of BIPD Class Changes								1.8%

ARKANSAS
Southern Insurance Company
Summary of Proposed Driver Class Relativities
Comprehensive Coverage

Driver Age	Current Driver Class	Curr. Level W. Prem. 5/10-3/11	5/10-3/11 Experience			Current Factor	Proposed Factor	% Change
			Curr. Level Earned Premium	Inc. Loss as of 3/31/11	Loss Ratio			
Single Male								
16	17SM	0	0	0	0.0	4.500	4.500	0.0%
17	16SM	0	0	0	0.0	4.500	4.500	0.0%
18	15SM	0	0	0	0.0	3.780	3.780	0.0%
19-20	14SM	0	0	0	0.0	3.300	3.300	0.0%
21-22	13SM	0	0	0	0.0	2.000	2.350	17.5%
23-24	12SM	193	26	0	0.0	1.850	1.985	7.3%
25	11SM	0	0	0	0.0	1.610	1.530	-5.0%
26-27	10SM	-16	27	0	0.0	1.580	1.530	-3.2%
28-29	9SM	0	0	0	0.0	1.580	1.530	-3.2%
30-35	8SM	267	29	0	0.0	1.390	1.205	-13.3%
36-49	7SM	229	21	0	0.0	1.180	1.205	2.1%
50-54	6SM	35	20	0	0.0	1.180	1.065	-9.7%
55-59	5SM	139	10	0	0.0	1.090	1.065	-2.3%
60-64	4SM	0	0	0	0.0	1.090	1.100	0.9%
65-69	3SM	0	0	0	0.0	1.090	1.100	0.9%
70-75	2SM	0	0	0	0.0	1.200	1.210	0.8%
76+	1SM	0	0	0	0.0	1.200	1.210	0.8%
			133	0	0.0			
Married Male								
16	17MM	0	0	0	0.0	4.000	4.000	0.0%
17	16MM	0	0	0	0.0	4.000	4.000	0.0%
18	15MM	0	0	0	0.0	3.310	3.310	0.0%
19-20	14MM	0	0	0	0.0	2.150	2.150	0.0%
21-22	13MM	0	0	0	0.0	1.700	1.760	3.5%
23-24	12MM	302	64	0	0.0	1.500	1.585	5.7%
25	11MM	214	42	0	0.0	1.350	1.205	-10.7%
26-27	10MM	0	0	0	0.0	1.350	1.205	-10.7%
28-29	9MM	149	17	0	0.0	1.290	1.205	-6.6%
30-35	8MM	506	54	0	0.0	1.210	1.100	-9.1%
36-49	7MM	488	126	0	0.0	1.000	1.100	10.0%
50-54	6MM	0	0	0	0.0	1.000	1.000	0.0%
55-59	5MM	80	11	0	0.0	0.940	1.000	6.4%
60-64	4MM	0	0	0	0.0	0.940	1.045	11.2%
65-69	3MM	42	6	0	0.0	0.940	1.045	11.2%
70-75	2MM	0	0	0	0.0	1.150	1.150	0.0%
76+	1MM	0	0	0	0.0	1.150	1.150	0.0%
			320	0	0.0			
Single Female								
16	17SF	0	0	0	0.0	3.350	3.350	0.0%
17	16SF	0	0	0	0.0	3.350	3.350	0.0%
18	15SF	0	0	0	0.0	3.120	3.120	0.0%
19-20	14SF	0	0	0	0.0	2.500	2.100	-16.0%
21-22	13SF	316	8	0	0.0	1.750	1.500	-14.3%
23-24	12SF	264	61	0	0.0	1.500	1.450	-3.3%
25	11SF	0	0	0	0.0	1.400	1.430	2.1%
26-27	10SF	119	23	0	0.0	1.400	1.430	2.1%
28-29	9SF	0	0	0	0.0	1.400	1.430	2.1%
30-35	8SF	249	6	0	0.0	1.330	1.210	-9.0%
36-49	7SF	657	56	0	0.0	1.210	1.210	0.0%
50-54	6SF	94	15	0	0.0	1.130	1.060	-6.2%
55-59	5SF	0	0	0	0.0	1.075	1.060	-1.4%
60-64	4SF	77	4	0	0.0	1.075	1.100	2.3%
65-69	3SF	0	0	0	0.0	1.075	1.100	2.3%
70-75	2SF	0	0	0	0.0	1.200	1.210	0.8%
76+	1SF	0	0	0	0.0	1.200	1.210	0.8%
			173	0	0.0			
Married Female								
16	17MF	0	0	0	0.0	5.050	5.050	0.0%
17	16MF	0	0	0	0.0	5.050	5.050	0.0%
18	15MF	0	0	0	0.0	3.150	3.150	0.0%
19-20	14MF	0	0	0	0.0	2.300	2.300	0.0%
21-22	13MF	0	0	0	0.0	1.450	1.430	-1.4%
23-24	12MF	107	17	0	0.0	1.290	1.210	-6.2%
25	11MF	114	17	0	0.0	1.210	1.210	0.0%
26-27	10MF	0	0	0	0.0	1.210	1.210	0.0%
28-29	9MF	0	0	0	0.0	1.210	1.210	0.0%
30-35	8MF	454	94	0	0.0	1.210	1.100	-9.1%
36-49	7MF	1,060	161	0	0.0	1.075	1.100	2.3%
50-54	6MF	0	0	0	0.0	1.075	1.000	-7.0%
55-59	5MF	104	14	0	0.0	1.000	1.000	0.0%
60-64	4MF	0	0	0	0.0	1.000	1.040	4.0%
65-69	3MF	0	0	0	0.0	1.000	1.040	4.0%
70-75	2MF	0	0	0	0.0	1.150	1.100	-4.3%
76+	1MF	0	0	0	0.0	1.150	1.100	-4.3%
			303	0	0.0			
Overall Effect of Comprehensive Class Changes								-2.0%

ARKANSAS
Southern Insurance Company
Summary of Proposed Driver Class Relativities
Collision Coverage

Driver Age	Current Driver Class	Curr. Level W. Prem. 5/10-3/11	5/10-3/11 Experience			Current Factor	Proposed Factor	% Change
			Curr. Level Earned Premium	Inc. Loss as of 3/31/11	Loss Ratio			
Single Male								
16	17SM	0	0	0	0.0	5.500	5.500	0.0%
17	16SM	0	0	0	0.0	5.500	5.500	0.0%
18	15SM	0	0	0	0.0	5.500	5.500	0.0%
19-20	14SM	0	0	0	0.0	3.800	3.800	0.0%
21-22	13SM	0	0	0	0.0	2.680	2.305	-14.0%
23-24	12SM	630	89	0	0.0	2.350	1.980	-15.7%
25	11SM	0	0	0	0.0	1.582	1.525	-3.6%
26-27	10SM	103	59	0	0.0	1.500	1.525	1.7%
28-29	9SM	0	0	0	0.0	1.401	1.525	8.9%
30-35	8SM	740	75	0	0.0	1.299	1.206	-7.2%
36-49	7SM	624	59	0	0.0	1.201	1.206	0.4%
50-54	6SM	77	45	0	0.0	1.212	1.065	-12.1%
55-59	5SM	409	29	0	0.0	1.150	1.065	-7.4%
60-64	4SM	0	0	0	0.0	1.150	1.100	-4.3%
65-69	3SM	0	0	0	0.0	1.311	1.100	-16.1%
70-75	2SM	0	0	0	0.0	1.811	1.500	-17.2%
76+	1SM	0	0	0	0.0	1.811	1.500	-17.2%
			356	0	0.0			
Married Male								
16	17MM	0	0	0	0.0	4.300	4.300	0.0%
17	16MM	0	0	0	0.0	4.300	4.300	0.0%
18	15MM	0	0	0	0.0	3.700	3.700	0.0%
19-20	14MM	0	0	0	0.0	3.000	3.000	0.0%
21-22	13MM	0	0	0	0.0	2.150	2.150	0.0%
23-24	12MM	691	143	0	0.0	1.500	1.585	5.7%
25	11MM	518	93	0	0.0	1.251	1.206	-3.6%
26-27	10MM	0	0	0	0.0	1.201	1.206	0.4%
28-29	9MM	388	42	0	0.0	1.121	1.206	7.6%
30-35	8MM	1,177	124	0	0.0	1.102	1.100	-0.2%
36-49	7MM	1,153	293	0	0.0	1.082	1.100	1.7%
50-54	6MM	0	0	0	0.0	1.000	1.000	0.0%
55-59	5MM	248	36	0	0.0	1.000	1.000	0.0%
60-64	4MM	0	0	0	0.0	1.000	1.045	4.5%
65-69	3MM	147	24	0	0.0	1.102	1.045	-5.2%
70-75	2MM	0	0	0	0.0	1.511	1.520	0.6%
76+	1MM	0	0	0	0.0	1.511	1.520	0.6%
			755	0	0.0			
Single Female								
16	17SF	0	0	0	0.0	3.900	3.900	0.0%
17	16SF	0	0	0	0.0	3.900	3.900	0.0%
18	15SF	0	0	0	0.0	3.900	3.900	0.0%
19-20	14SF	0	0	0	0.0	3.100	3.100	0.0%
21-22	13SF	815	26	0	0.0	2.200	1.485	-32.5%
23-24	12SF	595	139	0	0.0	1.600	1.436	-10.3%
25	11SF	0	0	0	0.0	1.300	1.428	9.8%
26-27	10SF	333	56	0	0.0	1.300	1.428	9.8%
28-29	9SF	0	0	0	0.0	1.150	1.428	24.2%
30-35	8SF	647	16	0	0.0	1.161	1.206	3.9%
36-49	7SF	1,332	118	0	0.0	1.161	1.206	3.9%
50-54	6SF	247	39	0	0.0	1.102	1.065	-3.4%
55-59	5SF	0	0	0	0.0	1.102	1.065	-3.4%
60-64	4SF	166	9	0	0.0	1.102	1.100	-0.2%
65-69	3SF	0	0	0	0.0	1.161	1.100	-5.3%
70-75	2SF	0	0	0	0.0	1.472	1.206	-18.1%
76+	1SF	0	0	0	0.0	1.472	1.206	-18.1%
			403	0	0.0			
Married Female								
16	17MF	0	0	0	0.0	4.200	4.200	0.0%
17	16MF	0	0	0	0.0	4.200	4.200	0.0%
18	15MF	0	0	0	0.0	2.900	2.900	0.0%
19-20	14MF	0	0	0	0.0	2.000	2.000	0.0%
21-22	13MF	0	0	0	0.0	1.600	1.430	-10.6%
23-24	12MF	284	44	0	0.0	1.260	1.206	-4.3%
25	11MF	305	44	0	0.0	1.150	1.206	4.9%
26-27	10MF	0	0	0	0.0	1.161	1.206	3.9%
28-29	9MF	0	0	0	0.0	1.102	1.206	9.4%
30-35	8MF	1,069	199	0	0.0	1.051	1.098	4.5%
36-49	7MF	2,805	407	0	0.0	1.130	1.098	-2.8%
50-54	6MF	0	0	0	0.0	1.051	1.000	-4.9%
55-59	5MF	244	32	0	0.0	1.000	1.000	0.0%
60-64	4MF	0	0	0	0.0	1.000	1.043	4.3%
65-69	3MF	0	0	0	0.0	1.102	1.043	-5.4%
70-75	2MF	0	0	0	0.0	1.472	1.400	-4.9%
76+	1MF	0	0	0	0.0	1.472	1.400	-4.9%
			726	0	0.0			
Overall Effect of Collision Class Changes								-2.4%

**Proposed Physical Damage
Vehicle Symbol Relativity Changes
Comprehensive**

<u>ISO Symbol</u>	<u>5/10-3/11 Curr. Lev. W. Prem.</u>	<u>Current Relativity</u>	<u>Proposed Relativity</u>	<u>% Change</u>
1	0	0.818	1.000	22.2%
2	0	0.901	1.000	11.0%
3	0	1.000	1.000	0.0%
4	0	1.066	1.000	-6.2%
5	0	1.157	1.000	-13.6%
6	0	1.215	1.036	-14.7%
7	0	1.314	1.173	-10.7%
8	585	1.380	1.201	-13.0%
10	159	1.479	1.302	-12.0%
11	482	1.479	1.388	-6.2%
12	707	1.579	1.468	-7.0%
13	838	1.694	1.554	-8.3%
14	1,231	1.860	1.669	-10.3%
15	905	1.901	1.734	-8.8%
16	568	2.157	1.921	-10.9%
17	783	2.264	1.971	-12.9%
18	-15	2.397	2.108	-12.1%
19	0	2.711	2.173	-19.8%
20	0	3.000	2.302	-23.3%
21	0	3.066	2.424	-20.9%
				-9.8%

**Proposed Physical Damage
Vehicle Symbol Relativity Changes
Collision**

<u>ISO Symbol</u>	<u>5/10-3/11 Curr. Lev. W. Prem.</u>	<u>Current Relativity</u>	<u>Proposed Relativity</u>	<u>% Change</u>
1	0	0.836	1.000	19.6%
2	0	0.901	1.000	11.0%
3	0	1.000	1.000	0.0%
4	0	1.023	1.000	-2.2%
5	0	1.161	1.000	-13.9%
6	0	1.161	1.031	-11.2%
7	0	1.257	1.166	-7.2%
8	1,505	1.319	1.200	-9.0%
10	375	1.412	1.298	-8.1%
11	1,363	1.506	1.382	-8.2%
12	1,811	1.562	1.465	-6.2%
13	2,144	1.562	1.548	-0.9%
14	3,094	1.774	1.665	-6.1%
15	2,255	1.842	1.732	-6.0%
16	1,384	2.040	1.914	-6.2%
17	1,902	2.141	1.963	-8.3%
18	-88	2.294	2.098	-8.5%
19	0	2.588	2.163	-16.4%
20	0	2.932	2.298	-21.6%
21	0	3.079	2.415	-21.6%
				-6.2%

**Proposed Model Year Relativities
Comprehensive**

Model Year	5/10-3/11 Current Level W. Prem.	Current Mod. Yr. Factors	Proposed Mod. Yr. Factors	% Change
2013		1.150	1.150	
2012		1.100	1.100	
2011	0	1.050	1.050	0.0%
2010	0	1.000	1.000	0.0%
2009	0	0.934	0.950	1.7%
2008	860	0.868	0.921	6.1%
2007	119	0.810	0.871	7.5%
2006	714	0.760	0.777	2.2%
2005	815	0.702	0.777	10.7%
2004	605	0.661	0.705	6.7%
2003	1024	0.636	0.647	1.7%
2002	907	0.595	0.612	2.9%
2001	533	0.545	0.568	4.2%
2000	280	0.496	0.547	10.3%
1999 & Prior	384	0.463	0.518	11.9%
		Proposed Change		5.5%

**Proposed Model Year Relativities
Collision**

Model Year	5/10-3/11 Current Level W. Prem.	Current Mod. Yr. Factors	Proposed Mod. Yr. Factors	% Change
2013		1.150	1.150	
2012		1.100	1.100	
2011	0	1.050	1.050	0.0%
2010	0	1.000	1.000	0.0%
2009	0	0.935	0.948	1.4%
2008	1877	0.873	0.917	5.0%
2007	343	0.814	0.865	6.3%
2006	1882	0.763	0.772	1.2%
2005	2070	0.703	0.772	9.8%
2004	1614	0.664	0.702	5.7%
2003	2558	0.613	0.649	5.9%
2002	2392	0.571	0.606	6.1%
2001	1323	0.531	0.566	6.6%
2000	662	0.486	0.545	12.1%
1999 & Prior	1024	0.455	0.514	13.0%
Proposed Change				6.5%

**Southern Insurance Company
Arkansas Private Passenger Auto**

Estimated Effect of Fee Changes

Change in New Business Fees Collected Over Full 6 Month Policy Term

Current	Proposed
Policy Fee \$30	Policy Fee \$35
Billing Fees (6 @ \$8 each) \$48	Billing Fees (5 @ \$8 each) \$40
Total Fees \$78	Total Fees \$75

Change in New Business Fees Collected With Down Payment

Current	Proposed
Policy Fee \$5	Policy Fee \$10
Billing Fee \$8	Billing Fee \$0
Total Fees \$13	Total Fees \$10

Estimated Effect on Arkansas Fees Collected 5/15/10 through 3/31/11

	@ Current	@ Proposed
Policy Fees Collected with New Business Down Payment	\$3,810	\$7,620
Service Fees Collected with New Business Down Payment	\$6,096	\$0
Policy Fees Collected with Installment Payments	\$1,500	\$1,500
Service Fees Collected with Installment Payments	\$2,400	\$2,400
Total Fees	\$13,806	\$11,520
% Change = (Total Proposed / Total Current - 1) x 100		-16.6%