

State: Arkansas **Filing Company:** Viking Insurance Company of WI
TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)
Product Name: Viking Six Month
Project Name/Number: /

Filing at a Glance

Company: Viking Insurance Company of WI
Product Name: Viking Six Month
State: Arkansas
TOI: 19.0 Personal Auto
Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Filing Type: Rate/Rule
Date Submitted: 11/13/2012
SERFF Tr Num: VKNG-128766096
SERFF Status: Closed-Filed
State Tr Num:
State Status:
Co Tr Num: VIK-20121217-RATE/RULE

Effective Date: 12/17/2012
Requested (New):
Effective Date: 01/30/2013
Requested (Renewal):
Author(s): Curtis Templin, Brent Newport, Paul Richters
Reviewer(s): Alexa Grissom (primary)
Disposition Date: 12/17/2012
Disposition Status: Filed
Effective Date (New): 12/17/2012
Effective Date (Renewal): 01/30/2013

State Filing Description:

State: Arkansas **Filing Company:** Viking Insurance Company of WI
TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)
Product Name: Viking Six Month
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General Information

Project Name: Status of Filing in Domicile: Authorized
 Project Number: Domicile Status Comments:
 Reference Organization: Reference Number:
 Reference Title: Advisory Org. Circular:
 Filing Status Changed: 12/17/2012
 State Status Changed: Deemer Date:
 Created By: Brent Newport Submitted By: Brent Newport
 Corresponding Filing Tracking Number:

Filing Description:

With this revision Viking Insurance Company of Wisconsin is changing installment fees, implementing new base rates, modifying the discount and surcharge factors, changing the symbol (named non-owner only) and territory relativities.

The overall effect is a -6.7% rate level change. The rate manual changes are effective 12/17/12 (New Business) / 1/30/13 (Renewal Business). The rule guide changes are effective 1/21/13 (New Business) / 3/6/2013 (Renewal Business).

Company and Contact

Filing Contact Information

Brent Newport, Product Analyst Brent.Newport@sentry.com
 1224 Deming Way 608-826-3143 [Phone]
 Madison, WI 53717

Filing Company Information

Viking Insurance Company of WI CoCode: 13137 State of Domicile: Wisconsin
 1800 North Point Drive Group Code: 169 Company Type:
 Stevens Point, WI 54481 Group Name: State ID Number:
 (608) 836-3000 ext. FEIN Number: 39-1150917
 8263116[Phone]

Filing Fees

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

Company	Amount	Date Processed	Transaction #
Viking Insurance Company of WI	\$100.00	11/13/2012	64864985

SERFF Tracking #:

VKNG-128766096

State Tracking #:**Company Tracking #:**

VIK-20121217-RATE/RULE

State: Arkansas**Filing Company:**

Viking Insurance Company of WI

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)**Product Name:** Viking Six Month**Project Name/Number:** /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	12/17/2012	12/17/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Alexa Grissom	11/27/2012	11/27/2012

Response Letters

Responded By	Created On	Date Submitted
Brent Newport	11/30/2012	11/30/2012

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
RF-1	Note To Reviewer	Brent Newport	12/13/2012	12/13/2012

State: Arkansas
TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)
Product Name: Viking Six Month
Project Name/Number: /

Filing Company: Viking Insurance Company of WI

Disposition

Disposition Date: 12/17/2012
 Effective Date (New): 12/17/2012
 Effective Date (Renewal): 01/30/2013
 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 req'd):	Minimum % Change (where req'd):
Viking Insurance Company of WI	2.100%	-6.700%	\$-292,182	6,079	\$4,360,932	0.400%	-30.400%

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	Revision Documents	Filed	Yes
Supporting Document	Supporting Documents	Filed	Yes
Supporting Document	Objection Response	Filed	Yes
Rate	Rate Manual	Filed	Yes
Rate	Agent Guide	Filed	Yes

State: Arkansas **Filing Company:** Viking Insurance Company of WI
TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)
Product Name: Viking Six Month
Project Name/Number: /

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	11/27/2012
Submitted Date	11/27/2012
Respond By Date	

Dear Brent Newport,

Introduction:

This will acknowledge receipt of the captioned filing. The APCS must be submitted in Excel.

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

Conclusion:

NOTICE regarding, corrections to filings and scrivener's Errors:

Effective for all filings made on or after June 1, 2011, Arkansas no longer allows the re-opening of closed filings for corrections, changes in effective dates, scrivener's errors, amendments or substantive changes. Please see the General Instructions for how these events will be handled after the effective date of the change."

Sincerely,

Alexa Grissom

SERFF Tracking #:

VKNG-128766096

State Tracking #:

Company Tracking #:

VIK-20121217-RATE/RULE

State: Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name: Viking Six Month

Project Name/Number: /

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/30/2012
Submitted Date	11/30/2012

Dear Alexa Grissom,

Introduction:

Response 1

Comments:

This letter is in response to an objection to a Viking Insurance Company rate filing with SERFF Tracking Number VKNG-128766096.

We have submitted the required APCS form in Excel format.

In addition, we are requesting a different new business effective date to comply with Regulation 23, Section 7. We would like to change the new business date to 12/26/12 and renewal date to 2/11/13. This is reflected on the newly submitted APCS form.

If you have any questions or require additional information, please contact me at 608-826-3143.

Sincerely,

Brent Newport
 State Manager
 Dairyland Auto
 Brent.Newport@Sentry.com
 608-826-3143

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	Objection Response
Comments:	
Attachment(s):	
PPA Survey FORM APCS 12-26-12.xls	
PPA Survey FORM APCS 12-26-12.pdf	

SERFF Tracking #:

VKNG-128766096

State Tracking #:

Company Tracking #:

VIK-20121217-RATE/RULE

State:

Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

Viking Six Month

Project Name/Number:

/

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,

Brent Newport

State: Arkansas **Filing Company:** Viking Insurance Company of WI
TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)
Product Name: Viking Six Month
Project Name/Number: /

Note To Reviewer

Created By:

Brent Newport on 12/13/2012 10:49 AM

Last Edited By:

Alexa Grissom

Submitted On:

12/17/2012 03:07 PM

Subject:

RF-1

Comments:

Ms. Grissom:

I have attached the RF-1 as requested.

Sincerely,

Brent Newport

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	VIK-12172012-09VN-RATE
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2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	
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Company Name		Company NAIC Number	
3.	A. Viking Insurance Company of Wisconsin	B.	13137

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.	19.001 Private Passenger Auto(PPA)

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY			
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)
BI	4.0%	-8.0%				
PD	0.6%	-12.0%				
UM Coverages	3.2%	0%				
PIP	0.1%	0%				
MP	0.2%	0%				
COMP	9.4%	3.0%				
COLL	-4.8%	-12.0%				
TOTAL OVERALL EFFECT	2.1%	-6.7%				

6. 5 Year History		Rate Change History					
Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2007	6,416	3.6%	2/12/07	8,978	5,097	56.8%	52.3%
2007	6,416	-2.96%	12/17/07	8,678	5,097	56.8%	52.3%
2008	8,433	1.98%	8/25/08	8,887	5,654	63.6%	52.4%
2008	8,433	2.24%	10/20/08	8,887	5,654	63.6%	52.4%
2009	5,989	0.00%	2/16/09	8,924	4,933	55.3%	54.5%
2009	5,989	3.18%	6/15/09	8,924	4,933	55.3%	54.5%
2009	5,989	0.0%	8/17/09	8,924	4,933	55.3%	54.5%
2010	5,730	1.4%	9/27/10	6,294	4,200	66.7%	55.4%
2011	5,700	1.6%	4/18/11	5,594	3,162	56.5%	57.3%
2012	5,286	0.0%	6/18/12	4,075	1,719	42.2%	55.9%

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	14.1%
B. General Expense	13.1%
C. Taxes, License & Fees	2.6%
D. Underwriting Profit & Contingencies	Liab-4.4% Phys Dam-2.5%
E. Other (explain) - ULAE	11.2%
F. TOTAL	45.0%

8. N Apply Lost Cost Factors to Future filings? (Y or N)
9. 0.43% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____
10. -30.42% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____

SERFF Tracking #:

VKNG-128766096

State Tracking #:

Company Tracking #:

VIK-20121217-RATE/RULE

State: Arkansas

Filing Company: Viking Insurance Company of WI

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name: Viking Six Month

Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: File & Use

Rate Change Type: Decrease

Overall Percentage of Last Rate Revision: 0.000%

Effective Date of Last Rate Revision: 06/18/2012

Filing Method of Last Filing: File & 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 req'd):	Minimum % Change (where req'd):
Viking Insurance Company of WI	2.100%	-6.700%	\$-292,182	6,079	\$4,360,932	0.400%	-30.400%

SERFF Tracking #:

VKNG-128766096

State Tracking #:**Company Tracking #:**

VIK-20121217-RATE/RULE

State:

Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

Viking Six Month

Project Name/Number:

/

Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1	Filed 12/17/2012	Rate Manual		New		Rate Manual 12-17-12.pdf
2	Filed 12/17/2012	Agent Guide		New		AR 1.21.2013 Agt Guide V1.0-complete.pdf

Rate Manual

Factor groups (system ID) included:

Base Rate (1)

Discount (9)

Pay Code Group (306)

Surcharge (10)

Symbolgm (608)

Territory (5)

Description:

Lists the monthly base rate by coverage

Discount matrix by coverage

NB Pay code assignment. Provides description to the pay code group column in the discount and surcharge tables. Some pay codes may be inactive for NB.

Surcharge matrix by coverage

Vehicle symbol one or two factors by coverage. (newest symbol factors)

Territory rating factors by coverage

Coverages included:

BI
CMP LIEN
CMP MISC
COL LIEN
COL MISC
COLL
COMP
MED PAY
PD
PIP DTH
PIP MED
PIP WGLS
RENTAL
TOWING
UIMBI
UMBI
UMPD

Description:

BODILY INJURY
LIENHOLDER DEDUCTIBLE COVERAGE COMP -- INCLUDED WITH COL LIEN
SPECIAL EQUIPMENT COVERAGE COMP -- INCLUDED WITH COL MISC
LIENHOLDER DEDUCTIBLE COVERAGE
SPECIAL EQUIPMENT COVERAGE
COLLISION
COMPREHENSIVE
MEDICAL PAYMENTS
PROPERTY DAMAGE
PERSONAL INJURY PROTECTION DEATH BENEFIT
PERSONAL INJURY PROTECTION
PIP WAGE LOSS
RENTAL REIMBURSEMENT
TOWING AND LABOR
UNDERINSURED MOTORISTS - BI
UNINSURED MOTORISTS - BI
UNINSURED MOTORISTS - PD

Range Statement:

In the case that all factors are not represented, a range is implied. The factor listed is the upper bound of the range.

Example:

<u>Age</u>	<u>Range Implied</u>
0	0
19	1-19
24	20-24
29	25-29
54	30-54
64	55-64
99	65-99

Table:

Discount (9)
 Discount (9)
 Discount (9)
 Discount (9)
 Discount (9)
 Surcharge (10)
 Surcharge (10)
 Surcharge (10)
 Insurance Score (70)
 Pay Code Group (306)
 Insurance Tier Factor (334)
 Symbolglm (608)

Miscellaneous Notes:

"MultiPolicyIndicator" is used when a risk has more than 4 vehicles. Due to system limitations we can place only 4 vehicles on a policy and vehicles 5-8 are placed on a separate policy but rated accordingly due to this indicator.
 "TransferIndicator" indicates the level of Transfer Discount that is applied to the policy.
 "Homeowner" indicates the level of Homeowners discount that is applied to the policy.
 "PaidInFullIndicator" indicates the factor for a paid in full policy
 "Pay Code Group" indicates the factors for different new business pay codes.
 "Foreign Operator" indicates the factor for a foreign drivers license "Y" and out of state drivers license "O" policy
 "Business Use" indicates if the vehicle is used for business.
 "Pay Code Group" indicates the factors for different new business pay codes.
 Please see the credit tier descriptions below
 Please see the NB Pay Code descriptions below
 A range is implied for the "Credit Score" column. The factor listed is the upper bound of the range.
 Please see the vehicle symbol mapping exhibit for vehicle to symbol information by coverage

<u>NB Pay Code:</u>	<u>Description</u>
B	20% Down Payment Non-Equity
C	25% Down Payment Equity
F	100% Down Payment Equity
G	100% Down Payment Non-Equity
L	20% Down Payment Equity
M	16.6% Down Payment Non-Equity
Q	50% Down Payment Equity
S	50% Down Payment Non-Equity
T	33% Down Payment Equity
N	33% Non Continuous Equity
W	Annual Non Continuous Equity
Y	Annual Quarterly Equity
A	Annual Paid in Full Equity
P	100% Premium Finance Equity
Z	Annual Premium Finance Equity
V	Variable Term Monthly Product

**** NOT ALL PAY PLANS AVAILABLE IN ALL STATES.**

Rate Calculation Formulas

{x} indicates system factor code
[xR] indicates rounding to x digits

Coverage

Formula

BI

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Defensive Driver {13} [4R] * Good student {15} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])

UMBI

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])

UMPD

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])

UIMBI

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])

MED PAY

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Defensive Driver {13} [4R] * Good student {15} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])

PIP MED

(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R])

PIP WGLS

([0R] Base Rate {1} [4R] * [0R] Commission {2} [4R] * [0R] Term {11} [2R]) [0R]

Rate Calculation Formulas

{x} indicates system factor code

[xR] indicates rounding to x digits

<u>Coverage</u>	<u>Formula</u>
PIP DTH	([0R] Base Rate {1} [4R] * [0R] Commission {2} [4R] * [0R] Term {11} [2R]) [0R]
PD	(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Liability Adjustment Factor {199} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Limit {8} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Defensive Driver {13} [4R] * Good student {15} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])
CMP LIEN	([0R] Base Rate {1} [0R]) [0R]
COMP	(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Deductible {33} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Defensive Driver {13} [4R] * Good student {15} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])
CMP MISC	([0R] Base Rate {1} [0R]) [0R]
COL LIEN	([0R] LienDeduct {87} [4R] * [0R] Commission {2} [4R] * [0R] Term {11} [2R]) [0R]
COLL	(Base Rate {1} [4R] * CredSurc {70} [4R] * Commission {2} [4R] * Points Age {3} [4R] * (AGMS {18} [4R] + Excess Vehicle {32} [4R] + Points adjustment {21} [4R]) * Territory {5} [4R] * (Symbol {6} [4R] * Symbol-C-Cutoff {606} [4R] + Symbolglm {608} [4R] * Symbol-One-Cutoff {607} [4R]) * Model Year {7} [4R] * Deductible {33} [4R] * Discount {9} [4R] * AdvQuoteAndInsScore {406} [4R] * Defensive Driver {13} [4R] * Good student {15} [4R] * Surcharge {10} [4R] * Household Composition {671} [4R] * Household Composition Two {672} [4R] * Vehicle Driver Adjustment {301} [4R] * Vehicle Count - Age Group Adj {302} [4R] * Term {11} [2R] + Expense {12} [2R])
COL MISC	(Base Rate[4R] * Commission[4R] * Limitvalue[4R] * Term[2R])
TOWING	([0R] TowRenBaseRate {91} [2R] * [0R] Commission {2} [4R] * [0R] Term {11} [2R]) [0R]
RENTAL	([0R] TowRenBaseRate {91} [2R] * [0R] Commission {2} [4R] * [0R] Term {11} [2R]) [0R]

Base Rate (1)

Exhibit 1

<u>BI</u>	<u>CMP LIEN</u>	<u>CMP MISC</u>	<u>COL MISC</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP DTH</u>	<u>PIP MED</u>	<u>PIP WGLS</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
28.830	0.000	0.000	10.000	49.160	49.880	5.530	25.840	1.000	27.600	3.000	6.190	14.110	6.190

Territory (5)

Exhibit 2

<u>Territory code</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
1	0.690	0.970	1.300	0.830	0.690	0.830	0.900	0.900	0.900
2	0.700	0.950	1.250	0.830	0.700	0.830	0.900	0.900	0.900
3	0.740	0.920	1.170	0.830	0.740	0.830	0.900	0.900	0.900
4	0.790	0.920	1.140	0.830	0.790	0.830	0.900	0.900	0.900
10	0.790	0.900	1.100	0.850	0.790	0.850	0.900	0.900	0.900
11	0.780	0.980	1.080	0.830	0.780	0.830	0.900	0.900	0.900
12	0.770	0.980	1.080	0.830	0.770	0.830	0.900	0.900	0.900
13	0.700	0.980	1.080	0.830	0.700	0.830	0.900	0.900	0.900
14	0.800	0.940	1.050	0.830	0.800	0.830	0.900	0.900	0.900
15	0.800	0.970	1.130	0.830	0.800	0.830	0.900	0.900	0.900
20	0.800	0.950	1.000	0.850	0.800	0.850	0.890	0.890	0.890
21	0.900	1.000	0.960	0.840	0.900	0.840	0.890	0.890	0.890
22	0.830	1.020	1.000	0.830	0.830	0.830	0.890	0.890	0.890
23	0.840	0.900	0.900	0.860	0.840	0.860	0.890	0.890	0.890
24	0.800	0.920	0.900	0.850	0.800	0.850	0.890	0.890	0.890
30	0.890	0.960	1.080	0.840	0.890	0.840	0.920	0.920	0.920
31	1.000	0.940	1.000	1.040	1.000	1.080	0.920	0.920	0.920
32	0.950	1.000	0.910	0.950	0.950	0.950	0.920	0.920	0.920
33	0.800	1.000	1.030	0.850	0.800	0.850	0.920	0.920	0.920
34	0.800	1.000	1.030	0.830	0.800	0.830	0.920	0.920	0.920
35	0.800	0.960	1.000	0.830	0.800	0.830	0.920	0.920	0.920
36	0.710	0.940	1.000	0.830	0.710	0.830	0.920	0.920	0.920
41	0.900	0.940	0.910	0.930	0.900	0.930	0.920	0.920	0.920
42	0.910	0.910	0.910	0.920	0.910	0.920	0.920	0.920	0.920
43	0.780	0.960	0.900	0.850	0.780	0.850	0.920	0.920	0.920
44	0.870	0.960	0.910	1.100	0.870	1.100	0.920	0.920	0.920
45	0.750	0.960	0.880	0.830	0.750	0.830	0.920	0.920	0.920
46	0.800	0.850	0.800	0.930	0.800	0.930	0.920	0.920	0.920
47	0.800	0.960	0.760	0.850	0.800	0.850	0.920	0.920	0.920
50	0.820	0.960	0.850	0.850	0.820	0.850	0.930	0.930	0.930
51	0.900	0.950	0.900	0.930	0.900	0.930	0.930	0.930	0.930
52	1.050	1.000	0.920	0.990	1.050	0.970	0.920	0.920	0.920
53	1.000	0.960	0.850	1.020	1.000	1.020	0.930	0.930	0.930
54	1.000	0.960	0.850	1.020	1.000	1.020	0.930	0.930	0.930
60	1.150	1.100	0.900	1.290	1.150	1.100	1.010	1.010	1.010
70	1.170	1.100	0.900	1.120	1.170	1.120	1.140	1.140	1.140
80	1.280	1.100	0.900	1.210	1.280	1.290	1.070	1.070	1.070

Discount (9)

Exhibit 3

<u>MultiCarIndicator</u>	<u>TransferIndicator</u>	<u>Home owner</u>	<u>PaidInFullIndicator</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
N	1	1	N	1	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	N	2	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	N	3	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	N	4	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	N	5	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	N	6	0.850	0.850	0.810	0.770	0.850	0.780	0.960	0.960	0.960
N	1	1	Y	1	0.720	0.720	0.650	0.570	0.750	0.620	0.770	0.770	0.770
N	1	1	Y	2	0.720	0.720	0.650	0.570	0.750	0.620	0.770	0.770	0.770
N	1	1	Y	3	0.720	0.720	0.650	0.570	0.750	0.620	0.770	0.770	0.770
N	1	1	Y	4	0.760	0.760	0.680	0.600	0.790	0.650	0.810	0.810	0.810
N	1	1	Y	5	0.790	0.790	0.720	0.630	0.830	0.680	0.850	0.850	0.850
N	1	1	Y	6	0.720	0.720	0.650	0.570	0.750	0.620	0.770	0.770	0.770
N	1	2	N	1	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	N	2	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	N	3	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	N	4	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	N	5	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	N	6	0.820	0.850	0.810	0.730	0.830	0.780	0.960	0.960	0.960
N	1	2	Y	1	0.700	0.720	0.650	0.540	0.730	0.620	0.770	0.770	0.770
N	1	2	Y	2	0.700	0.720	0.650	0.540	0.730	0.620	0.770	0.770	0.770
N	1	2	Y	3	0.700	0.720	0.650	0.540	0.730	0.620	0.770	0.770	0.770
N	1	2	Y	4	0.740	0.760	0.680	0.570	0.770	0.650	0.810	0.810	0.810
N	1	2	Y	5	0.770	0.790	0.720	0.590	0.800	0.680	0.850	0.850	0.850
N	1	2	Y	6	0.700	0.720	0.650	0.540	0.730	0.620	0.770	0.770	0.770
N	1	3	N	1	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	N	2	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	N	3	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	N	4	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	N	5	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	N	6	0.820	0.850	0.780	0.740	0.830	0.780	0.960	0.960	0.960
N	1	3	Y	1	0.700	0.720	0.620	0.550	0.730	0.620	0.770	0.770	0.770
N	1	3	Y	2	0.700	0.720	0.620	0.550	0.730	0.620	0.770	0.770	0.770
N	1	3	Y	3	0.700	0.720	0.620	0.550	0.730	0.620	0.770	0.770	0.770
N	1	3	Y	4	0.740	0.760	0.650	0.580	0.770	0.650	0.810	0.810	0.810
N	1	3	Y	5	0.770	0.790	0.680	0.610	0.800	0.680	0.850	0.850	0.850
N	1	3	Y	6	0.700	0.720	0.620	0.550	0.730	0.620	0.770	0.770	0.770
N	1	N	N	1	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	N	2	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	N	3	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	N	4	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	N	5	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	N	6	0.900	0.920	0.850	0.810	0.910	0.860	0.960	0.960	0.960
N	1	N	Y	1	0.760	0.780	0.680	0.600	0.800	0.690	0.770	0.770	0.770
N	1	N	Y	2	0.760	0.780	0.680	0.600	0.800	0.690	0.770	0.770	0.770
N	1	N	Y	3	0.760	0.780	0.680	0.600	0.800	0.690	0.770	0.770	0.770
N	1	N	Y	4	0.800	0.820	0.710	0.630	0.840	0.720	0.810	0.810	0.810
N	1	N	Y	5	0.840	0.860	0.750	0.660	0.880	0.760	0.850	0.850	0.850
N	1	N	Y	6	0.760	0.780	0.680	0.600	0.800	0.690	0.770	0.770	0.770
N	2	1	N	1	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	N	2	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	N	3	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	N	4	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	N	5	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	N	6	0.830	0.790	0.810	0.780	0.810	0.750	0.930	0.930	0.930
N	2	1	Y	1	0.710	0.670	0.650	0.580	0.710	0.600	0.740	0.740	0.740
N	2	1	Y	2	0.710	0.670	0.650	0.580	0.710	0.600	0.740	0.740	0.740
N	2	1	Y	3	0.710	0.670	0.650	0.580	0.710	0.600	0.740	0.740	0.740
N	2	1	Y	4	0.750	0.700	0.680	0.610	0.750	0.630	0.780	0.780	0.780
N	2	1	Y	5	0.780	0.740	0.720	0.640	0.780	0.660	0.810	0.810	0.810
N	2	1	Y	6	0.710	0.670	0.650	0.580	0.710	0.600	0.740	0.740	0.740
N	2	2	N	1	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930
N	2	2	N	2	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930
N	2	2	N	3	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930

Discount (9)

Exhibit 3

<u>MultiCarIndicator</u>	<u>TransferIndicator</u>	<u>Home owner</u>	<u>PaidInFullIndicator</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
N	2	2	N	4	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930
N	2	2	N	5	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930
N	2	2	N	6	0.800	0.790	0.810	0.740	0.800	0.750	0.930	0.930	0.930
N	2	2	Y	1	0.680	0.670	0.650	0.540	0.700	0.600	0.740	0.740	0.740
N	2	2	Y	2	0.680	0.670	0.650	0.540	0.700	0.600	0.740	0.740	0.740
N	2	2	Y	3	0.680	0.670	0.650	0.540	0.700	0.600	0.740	0.740	0.740
N	2	2	Y	4	0.710	0.700	0.680	0.570	0.740	0.630	0.780	0.780	0.780
N	2	2	Y	5	0.750	0.740	0.720	0.590	0.770	0.660	0.810	0.810	0.810
N	2	2	Y	6	0.680	0.670	0.650	0.540	0.700	0.600	0.740	0.740	0.740
N	2	3	N	1	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	N	2	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	N	3	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	N	4	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	N	5	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	N	6	0.800	0.790	0.780	0.740	0.800	0.750	0.930	0.930	0.930
N	2	3	Y	1	0.680	0.670	0.620	0.550	0.700	0.600	0.740	0.740	0.740
N	2	3	Y	2	0.680	0.670	0.620	0.550	0.700	0.600	0.740	0.740	0.740
N	2	3	Y	3	0.680	0.670	0.620	0.550	0.700	0.600	0.740	0.740	0.740
N	2	3	Y	4	0.710	0.700	0.650	0.580	0.740	0.630	0.780	0.780	0.780
N	2	3	Y	5	0.750	0.740	0.680	0.610	0.770	0.660	0.810	0.810	0.810
N	2	3	Y	6	0.680	0.670	0.620	0.550	0.700	0.600	0.740	0.740	0.740
N	2	N	N	1	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	N	2	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	N	3	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	N	4	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	N	5	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	N	6	0.870	0.850	0.850	0.810	0.860	0.840	0.930	0.930	0.930
N	2	N	Y	1	0.740	0.720	0.680	0.600	0.760	0.670	0.740	0.740	0.740
N	2	N	Y	2	0.740	0.720	0.680	0.600	0.760	0.670	0.740	0.740	0.740
N	2	N	Y	3	0.740	0.720	0.680	0.600	0.760	0.670	0.740	0.740	0.740
N	2	N	Y	4	0.780	0.760	0.710	0.630	0.800	0.700	0.780	0.780	0.780
N	2	N	Y	5	0.810	0.790	0.750	0.660	0.840	0.740	0.810	0.810	0.810
N	2	N	Y	6	0.740	0.720	0.680	0.600	0.760	0.670	0.740	0.740	0.740
N	N	1	N	1	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	N	2	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	N	3	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	N	4	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	N	5	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	N	6	0.950	0.930	0.950	0.960	0.940	0.900	1.000	1.000	1.000
N	N	1	Y	1	0.810	0.790	0.760	0.710	0.830	0.720	0.800	0.800	0.800
N	N	1	Y	2	0.810	0.790	0.760	0.710	0.830	0.720	0.800	0.800	0.800
N	N	1	Y	3	0.810	0.790	0.760	0.710	0.830	0.720	0.800	0.800	0.800
N	N	1	Y	4	0.850	0.830	0.800	0.750	0.870	0.760	0.840	0.840	0.840
N	N	1	Y	5	0.890	0.870	0.840	0.780	0.910	0.790	0.880	0.880	0.880
N	N	1	Y	6	0.810	0.790	0.760	0.710	0.830	0.720	0.800	0.800	0.800
N	N	2	N	1	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	N	2	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	N	3	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	N	4	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	N	5	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	N	6	0.920	0.930	0.950	0.910	0.920	0.900	1.000	1.000	1.000
N	N	2	Y	1	0.780	0.790	0.760	0.670	0.810	0.720	0.800	0.800	0.800
N	N	2	Y	2	0.780	0.790	0.760	0.670	0.810	0.720	0.800	0.800	0.800
N	N	2	Y	3	0.780	0.790	0.760	0.670	0.810	0.720	0.800	0.800	0.800
N	N	2	Y	4	0.820	0.830	0.800	0.700	0.850	0.760	0.840	0.840	0.840
N	N	2	Y	5	0.860	0.870	0.840	0.740	0.890	0.790	0.880	0.880	0.880
N	N	2	Y	6	0.780	0.790	0.760	0.670	0.810	0.720	0.800	0.800	0.800
N	N	3	N	1	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000
N	N	3	N	2	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000
N	N	3	N	3	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000
N	N	3	N	4	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000
N	N	3	N	5	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000
N	N	3	N	6	0.920	0.930	0.920	0.910	0.920	0.900	1.000	1.000	1.000

Discount (9)

Exhibit 3

<u>MultiCarIndicator</u>	<u>TransferIndicator</u>	<u>Home owner</u>	<u>PaidInFullIndicator</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
N	N	3	Y	1	0.780	0.790	0.740	0.680	0.810	0.720	0.800	0.800	0.800
N	N	3	Y	2	0.780	0.790	0.740	0.680	0.810	0.720	0.800	0.800	0.800
N	N	3	Y	3	0.780	0.790	0.740	0.680	0.810	0.720	0.800	0.800	0.800
N	N	3	Y	4	0.820	0.830	0.780	0.710	0.850	0.760	0.840	0.840	0.840
N	N	3	Y	5	0.860	0.870	0.810	0.750	0.890	0.790	0.880	0.880	0.880
N	N	3	Y	6	0.780	0.790	0.740	0.680	0.810	0.720	0.800	0.800	0.800
N	N	N	N	1	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	N	2	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	N	3	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	N	4	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	N	5	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	N	6	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	N	Y	1	0.850	0.850	0.800	0.740	0.880	0.800	0.800	0.800	0.800
N	N	N	Y	2	0.850	0.850	0.800	0.740	0.880	0.800	0.800	0.800	0.800
N	N	N	Y	3	0.850	0.850	0.800	0.740	0.880	0.800	0.800	0.800	0.800
N	N	N	Y	4	0.890	0.890	0.840	0.780	0.920	0.840	0.840	0.840	0.840
N	N	N	Y	5	0.940	0.940	0.880	0.810	0.970	0.880	0.880	0.880	0.880
N	N	N	Y	6	0.850	0.850	0.800	0.740	0.880	0.800	0.800	0.800	0.800
Y	1	1	N	1	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	N	2	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	N	3	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	N	4	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	N	5	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	N	6	0.770	0.770	0.730	0.700	0.770	0.700	0.860	0.860	0.860
Y	1	1	Y	1	0.650	0.650	0.580	0.520	0.670	0.560	0.690	0.690	0.690
Y	1	1	Y	2	0.650	0.650	0.580	0.520	0.670	0.560	0.690	0.690	0.690
Y	1	1	Y	3	0.650	0.650	0.580	0.520	0.670	0.560	0.690	0.690	0.690
Y	1	1	Y	4	0.680	0.680	0.610	0.550	0.700	0.590	0.720	0.720	0.720
Y	1	1	Y	5	0.720	0.720	0.640	0.570	0.740	0.620	0.760	0.760	0.760
Y	1	1	Y	6	0.650	0.650	0.580	0.520	0.670	0.560	0.690	0.690	0.690
Y	1	2	N	1	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	N	2	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	N	3	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	N	4	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	N	5	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	N	6	0.740	0.770	0.730	0.660	0.750	0.700	0.860	0.860	0.860
Y	1	2	Y	1	0.630	0.650	0.580	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	2	Y	2	0.630	0.650	0.580	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	2	Y	3	0.630	0.650	0.580	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	2	Y	4	0.660	0.680	0.610	0.510	0.690	0.590	0.720	0.720	0.720
Y	1	2	Y	5	0.690	0.720	0.640	0.540	0.730	0.620	0.760	0.760	0.760
Y	1	2	Y	6	0.630	0.650	0.580	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	3	N	1	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	N	2	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	N	3	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	N	4	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	N	5	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	N	6	0.740	0.770	0.700	0.670	0.750	0.700	0.860	0.860	0.860
Y	1	3	Y	1	0.630	0.650	0.560	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	3	Y	2	0.630	0.650	0.560	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	3	Y	3	0.630	0.650	0.560	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	3	Y	4	0.660	0.680	0.590	0.510	0.690	0.590	0.720	0.720	0.720
Y	1	3	Y	5	0.690	0.720	0.620	0.540	0.730	0.620	0.760	0.760	0.760
Y	1	3	Y	6	0.630	0.650	0.560	0.490	0.660	0.560	0.690	0.690	0.690
Y	1	N	N	1	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	N	2	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	N	3	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	N	4	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	N	5	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	N	6	0.810	0.820	0.770	0.730	0.810	0.780	0.860	0.860	0.860
Y	1	N	Y	1	0.690	0.700	0.610	0.540	0.720	0.620	0.690	0.690	0.690
Y	1	N	Y	2	0.690	0.700	0.610	0.540	0.720	0.620	0.690	0.690	0.690
Y	1	N	Y	3	0.690	0.700	0.610	0.540	0.720	0.620	0.690	0.690	0.690

Discount (9)

Exhibit 3

<u>MultiCarIndicator</u>	<u>TransferIndicator</u>	<u>Home owner</u>	<u>PaidInFullIndicator</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
Y	1	N	Y	4	0.720	0.740	0.640	0.570	0.760	0.650	0.720	0.720	0.720
Y	1	N	Y	5	0.760	0.770	0.670	0.590	0.790	0.680	0.760	0.760	0.760
Y	1	N	Y	6	0.690	0.700	0.610	0.540	0.720	0.620	0.690	0.690	0.690
Y	2	1	N	1	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	N	2	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	N	3	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	N	4	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	N	5	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	N	6	0.750	0.710	0.730	0.700	0.730	0.680	0.840	0.840	0.840
Y	2	1	Y	1	0.640	0.600	0.580	0.520	0.640	0.540	0.670	0.670	0.670
Y	2	1	Y	2	0.640	0.600	0.580	0.520	0.640	0.540	0.670	0.670	0.670
Y	2	1	Y	3	0.640	0.600	0.580	0.520	0.640	0.540	0.670	0.670	0.670
Y	2	1	Y	4	0.670	0.630	0.610	0.550	0.670	0.570	0.700	0.700	0.700
Y	2	1	Y	5	0.700	0.660	0.640	0.570	0.700	0.590	0.740	0.740	0.740
Y	2	1	Y	6	0.640	0.600	0.580	0.520	0.640	0.540	0.670	0.670	0.670
Y	2	2	N	1	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	N	2	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	N	3	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	N	4	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	N	5	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	N	6	0.720	0.710	0.730	0.660	0.720	0.680	0.840	0.840	0.840
Y	2	2	Y	1	0.610	0.600	0.580	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	2	Y	2	0.610	0.600	0.580	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	2	Y	3	0.610	0.600	0.580	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	2	Y	4	0.640	0.630	0.610	0.510	0.660	0.570	0.700	0.700	0.700
Y	2	2	Y	5	0.670	0.660	0.640	0.540	0.690	0.590	0.740	0.740	0.740
Y	2	2	Y	6	0.610	0.600	0.580	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	3	N	1	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	N	2	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	N	3	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	N	4	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	N	5	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	N	6	0.720	0.710	0.700	0.670	0.720	0.680	0.840	0.840	0.840
Y	2	3	Y	1	0.610	0.600	0.560	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	3	Y	2	0.610	0.600	0.560	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	3	Y	3	0.610	0.600	0.560	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	3	Y	4	0.640	0.630	0.590	0.510	0.660	0.570	0.700	0.700	0.700
Y	2	3	Y	5	0.670	0.660	0.620	0.540	0.690	0.590	0.740	0.740	0.740
Y	2	3	Y	6	0.610	0.600	0.560	0.490	0.630	0.540	0.670	0.670	0.670
Y	2	N	N	1	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	N	2	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	N	3	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	N	4	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	N	5	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	N	6	0.790	0.760	0.760	0.730	0.780	0.750	0.840	0.840	0.840
Y	2	N	Y	1	0.670	0.650	0.610	0.540	0.680	0.600	0.670	0.670	0.670
Y	2	N	Y	2	0.670	0.650	0.610	0.540	0.680	0.600	0.670	0.670	0.670
Y	2	N	Y	3	0.670	0.650	0.610	0.540	0.680	0.600	0.670	0.670	0.670
Y	2	N	Y	4	0.700	0.680	0.640	0.570	0.710	0.630	0.700	0.700	0.700
Y	2	N	Y	5	0.740	0.720	0.670	0.590	0.750	0.660	0.740	0.740	0.740
Y	2	N	Y	6	0.670	0.650	0.610	0.540	0.680	0.600	0.670	0.670	0.670
Y	N	1	N	1	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	N	2	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	N	3	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	N	4	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	N	5	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	N	6	0.860	0.840	0.860	0.860	0.850	0.810	0.900	0.900	0.900
Y	N	1	Y	1	0.730	0.710	0.680	0.640	0.740	0.650	0.720	0.720	0.720
Y	N	1	Y	2	0.730	0.710	0.680	0.640	0.740	0.650	0.720	0.720	0.720
Y	N	1	Y	3	0.730	0.710	0.680	0.640	0.740	0.650	0.720	0.720	0.720
Y	N	1	Y	4	0.770	0.750	0.710	0.670	0.780	0.680	0.760	0.760	0.760
Y	N	1	Y	5	0.800	0.780	0.750	0.700	0.810	0.720	0.790	0.790	0.790
Y	N	1	Y	6	0.730	0.710	0.680	0.640	0.740	0.650	0.720	0.720	0.720

Discount (9)

Exhibit 3

<u>MultiCarIndicator</u>	<u>TransferIndicator</u>	<u>Home owner</u>	<u>PaidInFullIndicator</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
Y	N	2	N	1	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	N	2	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	N	3	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	N	4	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	N	5	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	N	6	0.830	0.840	0.860	0.810	0.830	0.810	0.900	0.900	0.900
Y	N	2	Y	1	0.700	0.710	0.680	0.600	0.730	0.650	0.720	0.720	0.720
Y	N	2	Y	2	0.700	0.710	0.680	0.600	0.730	0.650	0.720	0.720	0.720
Y	N	2	Y	3	0.700	0.710	0.680	0.600	0.730	0.650	0.720	0.720	0.720
Y	N	2	Y	4	0.740	0.750	0.710	0.630	0.770	0.680	0.760	0.760	0.760
Y	N	2	Y	5	0.770	0.780	0.750	0.660	0.800	0.720	0.790	0.790	0.790
Y	N	2	Y	6	0.700	0.710	0.680	0.600	0.730	0.650	0.720	0.720	0.720
Y	N	3	N	1	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	N	2	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	N	3	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	N	4	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	N	5	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	N	6	0.830	0.840	0.830	0.820	0.830	0.810	0.900	0.900	0.900
Y	N	3	Y	1	0.700	0.710	0.660	0.610	0.730	0.650	0.720	0.720	0.720
Y	N	3	Y	2	0.700	0.710	0.660	0.610	0.730	0.650	0.720	0.720	0.720
Y	N	3	Y	3	0.700	0.710	0.660	0.610	0.730	0.650	0.720	0.720	0.720
Y	N	3	Y	4	0.740	0.750	0.690	0.640	0.770	0.680	0.760	0.760	0.760
Y	N	3	Y	5	0.770	0.780	0.730	0.670	0.800	0.720	0.790	0.790	0.790
Y	N	3	Y	6	0.700	0.710	0.660	0.610	0.730	0.650	0.720	0.720	0.720
Y	N	N	N	1	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	N	2	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	N	3	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	N	4	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	N	5	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	N	6	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900	0.900
Y	N	N	Y	1	0.770	0.770	0.720	0.670	0.790	0.720	0.720	0.720	0.720
Y	N	N	Y	2	0.770	0.770	0.720	0.670	0.790	0.720	0.720	0.720	0.720
Y	N	N	Y	3	0.770	0.770	0.720	0.670	0.790	0.720	0.720	0.720	0.720
Y	N	N	Y	4	0.810	0.810	0.760	0.700	0.830	0.760	0.760	0.760	0.760
Y	N	N	Y	5	0.850	0.850	0.790	0.740	0.870	0.790	0.790	0.790	0.790
Y	N	N	Y	6	0.770	0.770	0.720	0.670	0.790	0.720	0.720	0.720	0.720

Exhibit 4

<u>Unverified MVR</u>	<u>Foreign Operator</u>	<u>Business use</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
N	N	N	1	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100
N	N	N	2	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050
N	N	N	3	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010
N	N	N	4	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960
N	N	N	5	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910
N	N	N	6	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	N	Y	1	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320
N	N	Y	2	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
N	N	Y	3	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210
N	N	Y	4	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150
N	N	Y	5	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090
N	N	Y	6	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200
N	O	N	1	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100
N	O	N	2	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050
N	O	N	3	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010
N	O	N	4	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960
N	O	N	5	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910
N	O	N	6	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	O	Y	1	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320
N	O	Y	2	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
N	O	Y	3	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210
N	O	Y	4	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150
N	O	Y	5	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090
N	O	Y	6	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200
N	Y	N	1	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100
N	Y	N	2	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050
N	Y	N	3	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010
N	Y	N	4	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960
N	Y	N	5	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910
N	Y	N	6	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
N	Y	Y	1	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320
N	Y	Y	2	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
N	Y	Y	3	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210
N	Y	Y	4	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150
N	Y	Y	5	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090
N	Y	Y	6	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200
Y	N	N	1	1.380	1.380	1.380	1.380	1.380	1.380	1.380	1.380	1.380
Y	N	N	2	1.310	1.310	1.310	1.310	1.310	1.310	1.310	1.310	1.310
Y	N	N	3	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
Y	N	N	4	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200
Y	N	N	5	1.140	1.140	1.140	1.140	1.140	1.140	1.140	1.140	1.140
Y	N	N	6	1.250	1.250	1.250	1.250	1.250	1.250	1.250	1.250	1.250
Y	N	Y	1	1.650	1.650	1.650	1.650	1.650	1.650	1.650	1.650	1.650
Y	N	Y	2	1.580	1.580	1.580	1.580	1.580	1.580	1.580	1.580	1.580
Y	N	Y	3	1.520	1.520	1.520	1.520	1.520	1.520	1.520	1.520	1.520
Y	N	Y	4	1.440	1.440	1.440	1.440	1.440	1.440	1.440	1.440	1.440
Y	N	Y	5	1.370	1.370	1.370	1.370	1.370	1.370	1.370	1.370	1.370
Y	N	Y	6	1.500	1.500	1.500	1.500	1.500	1.500	1.500	1.500	1.500
Y	O	N	1	1.380	1.380	1.380	1.380	1.380	1.380	1.380	1.380	1.380
Y	O	N	2	1.310	1.310	1.310	1.310	1.310	1.310	1.310	1.310	1.310
Y	O	N	3	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
Y	O	N	4	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200
Y	O	N	5	1.140	1.140	1.140	1.140	1.140	1.140	1.140	1.140	1.140
Y	O	N	6	1.250	1.250	1.250	1.250	1.250	1.250	1.250	1.250	1.250
Y	O	Y	1	1.650	1.650	1.650	1.650	1.650	1.650	1.650	1.650	1.650
Y	O	Y	2	1.580	1.580	1.580	1.580	1.580	1.580	1.580	1.580	1.580

Exhibit 4

<u>Unverified MVR</u>	<u>Foreign Operator</u>	<u>Business use</u>	<u>Pay Code Group</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
Y	O	Y	3	1.520	1.520	1.520	1.520	1.520	1.520	1.520	1.520	1.520
Y	O	Y	4	1.440	1.440	1.440	1.440	1.440	1.440	1.440	1.440	1.440
Y	O	Y	5	1.370	1.370	1.370	1.370	1.370	1.370	1.370	1.370	1.370
Y	O	Y	6	1.500	1.500	1.500	1.500	1.500	1.500	1.500	1.500	1.500
Y	Y	N	1	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100	1.100
Y	Y	N	2	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050	1.050
Y	Y	N	3	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010	1.010
Y	Y	N	4	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960	0.960
Y	Y	N	5	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910	0.910
Y	Y	N	6	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Y	Y	Y	1	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320	1.320
Y	Y	Y	2	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260	1.260
Y	Y	Y	3	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210	1.210
Y	Y	Y	4	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150	1.150
Y	Y	Y	5	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090	1.090
Y	Y	Y	6	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200	1.200

Pay Code Group (306)

Exhibit 5

<u>NB pay code</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>	<u>UIMBI</u>	<u>UMBI</u>	<u>UMPD</u>
A	3	3	3	3	3	3	3	3	3
B	2	2	2	2	2	2	2	2	2
C	4	4	4	4	4	4	4	4	4
D	3	3	3	3	3	3	3	3	3
E	3	3	3	3	3	3	3	3	3
F	6	6	6	6	6	6	6	6	6
G	6	6	6	6	6	6	6	6	6
H	3	3	3	3	3	3	3	3	3
I	3	3	3	3	3	3	3	3	3
J	3	3	3	3	3	3	3	3	3
K	3	3	3	3	3	3	3	3	3
L	3	3	3	3	3	3	3	3	3
M	1	1	1	1	1	1	1	1	1
N	3	3	3	3	3	3	3	3	3
O	3	3	3	3	3	3	3	3	3
P	3	3	3	3	3	3	3	3	3
Q	5	5	5	5	5	5	5	5	5
R	3	3	3	3	3	3	3	3	3
S	5	5	5	5	5	5	5	5	5
T	4	4	4	4	4	4	4	4	4
U	3	3	3	3	3	3	3	3	3
V	3	3	3	3	3	3	3	3	3
W	3	3	3	3	3	3	3	3	3
X	3	3	3	3	3	3	3	3	3
Y	3	3	3	3	3	3	3	3	3
Z	3	3	3	3	3	3	3	3	3

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
AAA		4.000	4.970	0.980		1.210
AAB			4.970		1.220	
AAC				0.970		1.150
AAD		2.230	2.330			
ABB		2.760	3.720	0.950		1.030
ABC				0.960		1.050
ABD		1.900	2.000			
ABE			1.650	0.910		1.070
ACA				0.920		1.150
ACF	1.430					
ADC		1.950				
ADD		1.670				
AEA				0.720		0.850
AEE				0.710		0.900
AEF				0.620		0.590
BAA					1.110	
BAB					1.110	
BAC					1.120	
BAD	1.140	1.340	2.680			
BAE		1.170				
BAG			1.820			
BBA					0.910	
BBB		1.510				
BBC	1.140				0.910	
BBD	1.160	1.090	2.210			
BBF	1.170		1.620			
BCA					0.950	
BCC		1.310			0.950	
BCF	1.160					
BDA					0.880	
BDC		1.150			0.880	
BDD		1.040				
BEA					0.850	
BED	0.990					
BGF	1.020					
CAA				0.980	1.040	1.030
CAB					1.090	
CAC					1.090	
CAD		1.580				
CAG			1.320			
CBB				0.930		0.860
CBD	1.090	1.320	1.660			
CBF			1.180			
CBH			1.060			
CCA				0.930	0.930	0.970

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
CCC					0.930	
CCF	1.100					
CDA					0.860	
CDC		1.390			0.860	
CDD		1.240				
CED	0.970	0.990				
CGF	0.960					
DAA				0.990	1.050	1.600
DAB					1.090	
DAC					1.090	
DAD		1.400				
DAF	1.130		0.990			
DAH			0.890			
DBA				0.970	0.890	1.410
DBB			1.760			
DBC			1.140	0.930	0.890	1.250
DBD	1.140	1.180	1.020			
DBE		0.980	0.770	0.910		1.270
DBF	1.160		0.820			
DBG			0.740			
DBH			0.800			
DCA					0.930	
DCC					0.930	
DCD			0.970			
DCF	1.150		0.720			
DDA					0.860	
DDB					0.860	
DDC		1.240			0.860	
DDD	1.080	1.100				
DDF	1.100					
DEA				0.710	0.830	1.090
DEC					0.830	
DED	0.960	0.880				
DFD	1.100					
DGF	1.000					
EAA				0.980	1.060	1.290
EAB					1.070	
EAC				0.980	1.070	1.230
EAD	1.150	1.420				
EAE		1.210				
EAF			1.080			
EAG			0.950			
EAH			0.960			
EBA					0.860	
EBB					0.870	

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
EBC				0.940	0.870	1.110
EBD	1.160	1.180	1.070			
EBE		1.000	0.840	0.910		1.150
EBF	1.160		0.860	0.790		0.890
EBG			0.790			
EBH			0.780			
ECA				0.910	0.910	1.200
ECC				0.910	0.910	1.000
ECD		1.200				
ECE				0.970		1.180
ECF			0.780			
EDA					0.840	
EDB					0.840	
EDC		1.270			0.840	
EDD	1.120	1.130				
EEA				0.710	0.800	0.910
EEB				0.700		0.870
EEC				0.720	0.810	0.850
EED		0.920				
EEE				0.690		0.870
EEF				0.600		0.700
EGF	0.920					
FAB					1.090	
FAC					1.090	
FAD		1.150	1.550			
FAE		0.950				
FAF	1.070		1.140			
FAG			1.010			
FAH			0.990			
FBA					0.870	
FBB		1.290	2.090			
FBC					0.880	
FBD	1.080	0.930	1.180			
FBE		0.790	0.880			
FBF	1.090		0.920			
FBG			0.840			
FBH			0.830			
FCA					0.920	
FCC					0.920	
FCD		1.080	1.130			
FCE		0.870				
FCF	1.090		0.830			
FCG			0.750			
FDA					0.850	
FDB		1.280				

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
FDC		0.980			0.840	
FDD	1.090	0.880				
FDF	1.030					
FEC		0.760				
FED		0.700				
FGF	0.950					
GAA				0.980		1.190
GAC				0.980		1.130
GAD		1.210	1.500			
GAE		1.020		0.940		1.160
GAG			1.000			
GBA					0.750	
GBB		1.350				
GBC		1.060		0.940		1.030
GBD		1.000	1.190			
GBE		0.820	0.860	0.910		1.040
GBF			0.910	0.780		0.830
GBG			0.820			
GBH			0.810			
GCA				0.900	0.790	1.100
GCC		1.180		0.910	0.790	1.050
GCD		1.070				
GCE				0.960		1.080
GCF			0.810			
GDA					0.720	
GDC		1.000				
GDD		0.930				
GEA				0.720	0.700	0.830
GEC				0.710		0.800
GED		0.730				
GEE				0.680		0.810
GEF				0.590		0.640
HAA				0.980		1.260
HAB					0.900	
HAC				0.980		1.200
HAD		1.150	1.320			
HAE		0.950		0.940		1.220
HAF	1.060		0.980			
HAG			0.870			
HBA					0.700	
HBB			1.850	0.950	0.730	1.060
HBC				0.960	0.730	1.090
HBD		0.950	1.000			
HBE		0.790	0.760	0.910		1.100
HBF	1.080		0.790	0.790		0.890

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
HBG			0.720			
HBH			0.700			
HCA				0.910	0.730	1.190
HCB					0.790	
HCC				0.910	0.770	1.110
HCD		1.000	0.960			
HCE				0.950		1.160
HCF	1.080		0.700			
HDB		1.300				
HDC		1.000				
HDD		0.890				
HDE		0.740				
HDF	1.020					
HEA				0.720		0.890
HEC		0.810		0.720	0.680	0.850
HED	0.900	0.710				
HEE				0.690		0.860
HEF				0.600		0.670
HGF	0.940					
IAC				0.970		1.210
IAD		1.240				
IAE		1.040				
IAF	1.050					
IAG			1.030			
IAH			0.900			
IBA					0.620	
IBC				0.970		1.080
IBD	0.990	1.030	1.180			
IBE		0.850	0.910	0.910		1.110
IBF	1.030		0.920	0.790		0.880
IBG			0.850			
IBH			0.820			
ICC				0.900		1.120
ICD		0.980				
ICE		0.850				
ICF	1.000		0.840			
IDC		1.090				
IDD		0.950				
IEC				0.720		0.830
IED		0.770				
IEE				0.690		0.850
IEF	0.940			0.600		0.670
IGF	0.870					
JAA				0.970		1.240
JAC				0.980		1.160

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
JAD	1.090	1.300	1.170			
JAE		1.300		0.950		1.200
JAF			0.870			
JAG			0.790			
JAH			0.770			
JBB			1.560			
JBC				0.880		1.040
JBD	1.120	1.080	0.900			
JBE		0.890	0.680	0.910		1.050
JBF	1.140		0.700	0.780		0.850
JBG			0.640			
JBH			0.630			
JCC				0.800		1.060
JCD			0.820			
JCF	1.130					
JDD		1.020				
JED	0.940					
KAA				0.980		1.320
KAD	1.110		1.480			
KAE				0.960		1.320
KAF			1.110			
KAH			0.990			
KBB				0.880		1.110
KBD	1.140		1.190			
KBE			0.880			
KBF	1.150		0.900			
KBG			0.820			
KBH			0.810			
KCF			0.810			
KDD	1.070					
KDF	1.090					
KED	0.950					
KGD	0.990					
LAA				0.980		1.090
LAC				0.980		1.020
LAD	1.080					
LAE				0.930		1.030
LBD	1.100					
LCF	1.110					
LEA				0.770		0.790
LED	0.930					
MAA				0.970		0.970
MAB	1.180			0.960		0.910
MAC	1.030					
MBB	1.180					

Symbolglm (608)

Exhibit 6

<u>BI Symbol Level 1 Information</u>	<u>BI</u>	<u>COLL</u>	<u>COMP</u>	<u>MED PAY</u>	<u>PD</u>	<u>PIP MED</u>
MBC	1.030					
MBE				0.910		0.840
MCA				0.800		0.890
MCB				0.800		0.870
MCC	0.940					
MEC				0.720		0.660
NAF	1.080					
NBF	1.100					
NEF	0.920					
TAL	1.000				1.120	
VVM		2.440	2.270			
VVN		2.670	2.220			
XAG			1.480			
Z01	0.590			0.450	0.500	0.570
Z02	0.900			0.880	0.790	0.900
Z08	1.000	1.000	1.000	1.000	1.000	1.000
Z0X	1.000			1.000	1.000	1.000
Z0Y	1.000			1.000	1.000	1.000
Z70	1.000	1.000	1.000	1.000	1.000	1.000
Z80		1.150	1.150			
Z81		1.250	1.250			
Z82		1.690	1.690			
Z83		2.280	2.280			
Z84		3.080	3.080			
Z85		4.160	4.160			
Z86		5.620	5.620			
Z90		1.250	1.250			
Z91		1.560	1.560			
Z92		1.950	1.950			
Z93		2.440	2.440			
Z94		3.050	3.050			
Z95		3.810	3.810			
Z96		4.760	4.760			
Z97		5.950	5.950			
Z98		7.440	7.440			
Z99	1.000	1.000	1.000	1.000	1.000	1.000

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Arkansas Auto Guide

Effective
January 21, 2013



Dairyland Auto property and casualty coverages are underwritten by a member of the Sentry Insurance Group, Stevens Point, WI. For a complete listing of companies, visit sentry.com. Policies, coverages, benefits and discounts are not available in all states. See your policy for complete coverage details.

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CUSTOMER SERVICE

800-334-0090

*Press 2 for Auto
Press 1 for Spanish*

AUTO POLICY PHONE OPTIONS

Agents Press 1

Payments1
Policy Information1
Technical Support ...3
Claims Assistance.....4
Customer Care.....5
Repeat Options#

Policyholders Press 2

Claims.....1
Policy Information2
Payments3
Customer Care.....5
Repeat Options#

CONTACT OPTIONS

Fax

Claims: 888-729-2225

Proof: 888-845-2447

E-mail

Customer Service: DairylandAutoCustsrv@sentry.com

Agency Supply: madagency-support@sentry.com

Proof: dairylandauto@sentry.com

Mail

Claims:

Claims Correspondence

P.O. Box 8042

Stevens Point, WI 54481

All Other:

Dairyland Auto

P.O. Box 8021

Stevens Point, WI 54481-8021

FORMS

Agency Supply

1. Go to www.dairylandauto.com/autolink

2. Select "Services"

3. Select "Agency Request"

4. Select "State Specific Forms"

5. Select the state and print

PAYMENTS

AutoLink

Make payments online at www.dairylandauto.com/autolink via credit card and e-check.

Consumer Payment Portal

Customers can make one time payments online at www.dairylandauto.com/payments via credit card and e-check.

Western Union

Step 1: Go to your local Western Union.

Step 2: Fill out blue Quick Collect form:

Pay to: Dairyland Auto

Code city: Monthly

Code State: IL

Step 3: Give your name and policy number to Western Union. There is a fee, but this will ensure same-day payment of the bill.

RATING & UPLOAD SUPPORT

For assistance with rating & upload software dial:
1-800-334-0090, Press 2, Press 1, Press 3

MARKETING

Agency Sales Manager

Terry Norris

800-532-2525, x3463931

Terry.Norris@sentry.com

Regional Agency Sales Manager

Kennv Wideman

800-532-2525, x3463930

Kennv.Wideman@sentry.com

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Underwriting Rules

Underwriting Company

- Viking Insurance Company of Wisconsin

Agent's Binding Responsibility

- The time and date of binding can be no earlier than the time and date the application is signed by the applicant and agent, and down payment is made.
- The application, payment, or endorsement must be submitted electronically at the time the coverage is bound.
- If an applicant does not meet the underwriting standards listed in this rule guide, do not bind coverage.
- Inspect all vehicles before binding physical damage coverage.

Binding Authority Suspended During Severe Weather Watches and Warnings

When the National Weather Service issues a weather watch or warning in the area where a vehicle is being operated (hurricane, tropical storm, tornado, flood, etc) binding authority is suspended for Physical Damage coverage. Do not bind coverage for the duration of the watch or warning. When the National Weather Service withdraws the watch or warning, agents may bind Physical Damage risks again.

Driver Exclusions

- You cannot exclude:
 - The named insured
- You can exclude:
 - A registered owner who is not in our insured's household and who does not drive the vehicle.
 - Other licensed and unlicensed drivers in the household.
- Attach a signed and completed driver exclusion form, including date of birth and relationship to insured, with an explanation for the exclusion, to the application.
- To delete an exclusion, we require a request signed by the named insured to add the excluded driver to the policy and all the appropriate driver information.

Financial Responsibility (SR-22)

- SR-22 filings will only be made in states in which the insuring Company writes private passenger automobile insurance.
- All vehicles in the insured household must be insured whenever an SR-22 filing is made.
- When completing the SR-22 filing in your office, indicate the correct issuing company based on the product sold. See Program Features Table under Underwriting Companies.
- SR-22 filings will be issued only when all registered vehicles for the named insured are insured with Viking.

Insurance Score

- An insurance score may be ordered for the first Named Insured on all applications submitted.
- The ordering of an insurance score is included as a step within our rating software.
- A customer has the right not to provide his/her Social Security Number.
- Please request the applicant's permission to order an insurance score by reading the following:
"As part of our underwriting process, we order an insurance score based upon your credit history. This score may be used to underwrite and price your policy. Consumer reports that contain information about your driving and claim history may also be obtained.
You have the right to be told the name and address of the reporting agencies that provide these reports and to see and correct your personal information. We may disclose this information to properly service your policy or to conduct our business. Our privacy notice will be included with your policy and is also available upon request."

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- If submitting the business through AutoLink, a pop-up window will display to record whether the insured "agrees" with the above statements or "does not agree".
- This score is an inquiry only and will not affect an applicant's credit history or his/her ability to obtain credit for future purchases or loans.
- Our vendor of insurance score information is TransUnion. If the applicant suspects the report is inaccurate, they may contact:

TransUnion National Disclosure Center
PO Box 1000
Chester, PA 19022
Phone: 1-800-645-1938

Unacceptable Risks

Risks with any of the following characteristics are unacceptable and should not be written.

- Invalid drivers license status, unless the license is being reinstated.
- Risks where an operator has a revoked license, unless that operator is excluded from coverage.
- Physical damage only policies.
- Comprehensive coverage written without Collision.
- Military risks, unless stationed in the rating state.
- Drivers not residing in the rating state at least 10 months per year.
- Risks in which the insured knowingly fails to provide either Company with the correct vehicle garaging address or fails to include all household and non-household drivers who drive the insured vehicle on a regular or ongoing basis.
- Drivers under the legal drinking age with an alcohol/drug related violation.
- Motor Vehicles used in/with a felony.
- Any violations involving a fatality/assault (i.e. Vehicular Assault).
- An individual who has been successfully denied payment by an insurer of a claim under an automobile insurance policy where there was evidence of fraud or intent to defraud.

Eligible Vehicles

- The rates in the auto programs apply to private passenger vehicles, pickup trucks, vans, and panel trucks with a gross vehicle weight less than 10,000 pounds and carrying capacity of one ton or less.
- Please refer to the Surcharge section for description of acceptable Business Use vehicles.

Ineligible Vehicles

The following vehicles are ineligible for any coverage:

- Vehicles with a gross vehicle weight rating (GVWR*) above 14,000lbs.
- Any vehicle having less than four wheels.
- Commercial use vehicles.
- Any vehicle used for wholesale or retail purposes (including mail, floral, pizza, newspaper, courier, etc.).
- Company fleet vehicles registered to corporations or businesses.
- Dump trucks, including pickup trucks converted for this purpose.
- Emergency vehicles, including vehicles used in volunteer fire departments.
- Gasoline and explosive haulers and vehicles used for similar purposes.
- Taxi cabs and all other vehicles used in public livery or haul for hire.
- Vehicles used in speed contests, races, exhibitions or "off-road".
- Snowplows.
- Homemade, custom-built, altered or "kit" cars.
- Motor homes or recreational vehicles.

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- Flat bed trucks.
- Classic or antique autos.
- Limousines.
- Vehicles with detachable camper bodies that contain sleeping or cooking facilities.
- Vehicles not titled in the name of the applicant or the applicant's spouse unless a leased vehicle (minimum one year lease term).
- Vehicles not registered for street use.
- Vehicles which have been substantially modified from its original manufactured state including:
 - Raised or lowered suspension
 - Steering geometry changed
 - Engine or drive train altered or changed
 - Addition of traction bars
 - Oversized tires
- Any vehicle for which the Company does not have a rate lawfully in effect.

*A gross vehicle weight rating (GVWR) is the maximum operating weight/mass of a vehicle as specified by the manufacturer, including the vehicle's chassis, body, engine, engine fluids, fuel, accessories, driver, passengers and cargo.

Vehicles Ineligible for Physical Damage

- Vehicles rated based on cost new or current value with a value exceeding \$50,000.
- Non-owned vehicles, including short-term rentals (6 months or less).
- Vehicles with custom paint.
- Gray market vehicles.
- Vehicles insured for a "stated amount".
- Vehicles over 20 years old. Vehicle age changes October 1st each year.
- Any vehicle which has previously had a total loss claim and which is retained by the insured.
- Any salvage title.

* **Other information on general physical damage limitations for conversion vans and special equipment can be found on page 10.**

Final Underwriting Authority

We reserve the right to make final underwriting decision on all applications. A combination of factors may cause an application to be unacceptable even though not specified in this rule guide's Underwriting Rules. All requests for exceptions must be made through your product management team.

Rating Rules

Driver Eligibility Maximums (per driver)	Currently licensed in
<ul style="list-style-type: none">• 18 points• 2 alcohol/drug violations* in the past 36 months• 2 at-fault accidents in the past 36 months	U.S. / Foreign / International Driver's License

*Alcohol/drug violations include OWI (operating while intoxicated), RBT(refusal of breath/blood test), and OC (Open container)

General Rules

- A registered owner must be listed as a named insured.
- The premium is determined by rating the highest rated driver on the highest rated vehicle, the second highest rated driver to the second highest rated vehicle, etc.

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- If there are more vehicles than drivers, an excess vehicle factor is applied to the each additional vehicle.
- If an applicant has convictions or at-fault accidents in the most recent 36 months, apply the surcharge points from the Point Schedule.
- If a single occurrence results in more than one conviction/at-fault accident, charge only for the conviction/at-fault accident with the highest point value.
- When surcharges become 3 years old, they will be dropped from the insured's record at the next renewal and the next renewal will be adjusted accordingly.

Symbols

- Company developed Make & Model Symbols are used.

Driver Classifications

- A "married" operator is an operator who is a legally married person living with his or her spouse, or a widowed operator.
- Drivers with a learner's permit who are single, under the age of 19, and a child of the primary named insured should be added as a non-rated driver, but will not be included in the rating of the policy. The permit driver will become a rated driver (a) when the insured has obtained their full license (b) the first renewal after the permit driver becomes of legal license age.

Point Schedule

If exact date of accidents and violations are not available, please include the approximate month and year. Charge the following for incidents within past 36 months:

Accidents

- 1st Occurrence – 4 points
- 2nd Occurrence – 4 points
- 3rd and subsequent occurrences – 7 points

Speeding

- 1st Occurrence – 2 points
- 2nd Occurrence – 2 points
- 3rd and subsequent occurrences – 1 point

Operating while intoxicated

- 1st Occurrence – 1 point
- 1st Occurrence with other accidents / violations – 5 points
- 2nd Occurrence – 4 points
- 3rd and subsequent occurrences – 3 points

Examples:

- Driving while intoxicated / drugs
- Intoxicant in vehicle - operator
- Refusal of breath / blood test

Major Violations

- 1st Occurrence – 4 points
- 2nd Occurrence – 4 points
- 3rd and subsequent occurrences – 7 points

Examples:

- Attempting to Elude Officer

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- Failure to keep vehicle under control
- Failure to stop after an accident
- Hit and run
- Racing / speed contest / drag racing
- Reckless driving

Minor violations

1st Occurrence – 3 points

2nd Occurrence – 1 point

3rd and subsequent occurrences – 4 points

Examples:

- Backing illegally
- Careless driving
- Deviate lane / cross center line
- Driving against traffic / one way
- Driving on the wrong side highway / road
- Failure to give signal
- Failure to obey sign / signal
- Failure to stop for school bus
- Failure yield right of way to a vehicle / pedestrian
- Following too close
- Illegal turn
- Improper lane change
- Inattentive driving
- Passing illegally / improperly
- Miscellaneous minor violation

Operating without License

1st Occurrence – 5 points

2nd Occurrence – 1 point

3rd and subsequent occurrences – 2 points

Examples:

- Illegal / unlawful use if license
- Operating on expired license
- Operating without a license
- Operating after revocation
- Operating after suspension
- Loaning of license

Chargeable Accidents

An accident is considered chargeable unless it can be demonstrated that the:

- Vehicle was legally parked.
- Vehicle was struck in the rear while legally stopped for traffic or traffic control device.
- Vehicle collided with a bird or animal.
- Accident involved hit-and-run driver and was reported to proper authorities within 24 hours.
- Accident is one in which judgment or reimbursement is obtained from other party, providing the company makes no liability payment on behalf of the insured.

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The following claims qualify as chargeable accidents: An at-fault accident is defined as any accident that is caused by or significantly contributed to by the actions of the insured. The insured must be determined to be 50% or more at fault for the accident to be deemed chargeable.

- Bodily injury payments of \$1 or more.
- Property damage payments of \$200 or more.
- Collision payments of \$1 or more, if deemed at-fault per above description.
- Single vehicle accidents shall be considered chargeable accidents.
- Policies will be surcharged for chargeable claims by permissive operators.

Billing Options

Six-Month Program
<ul style="list-style-type: none">• 16.66% Down Payment + 5 Installments *₁• 20 % Down Payment + 5 Installments *₂• 20 % Down Payment + 4 Installments *₃• 50 % Down Payment + 1 Installment *• Paid In Full

*** See AutoLink for details**

1. The initial installment notice will issue 6 days after the new business effective date and be due 20 after the new business effective date. Subsequent payment due dates will operate on a 30 day billing cycle.
2. The initial installment notice will issue 11 days after the new business effective date and be due 25 days after the new business effective date. Subsequent payment due dates will operate on a 30 day billing cycle.
3. Payment due dates will operate on a 30 day billing cycle.

Electronic Fund Transfer (EFT)

- EFT may be initiated at time of new business, or during the active policy term via the AutoLink Endorsement module. However, the initial down payment cannot be withdrawn via EFT and must be submitted via another payment method.
- A one time payment made from a checking or saving account via Autolink (ACH) may be made. An ACH Authorization form must be completed and signed. This signed form must be retained in your office for the period of time required by the state. A copy of the form must be provided to the customer.
- An EFT Authorization form must be completed and signed before EFT is initiated. This signed form must be retained in your office for the period of time required by the state. A copy of the form must be provided to the customer
- EFT adds, changes and cancels will take effect within two business days following the submission request on AutoLink. Any bills with an outstanding Due Date prior to EFT taking effect will not be paid via EFT.
- The frequency of EFT withdrawals will be according to the existing payment plan for the current term. Upon renewal, the pay plan will change to a monthly billing plan.
- EFT information (account number, account type, etc.) can be changed or cancelled via the AutoLink endorsement module. In the event of a change or cancellation, the appropriate signed form is required and must be retained also. Changes and cancels will take effect 3 calendar days after submitted.

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Fees

Policy Fee	Reissue Fee	Billing Fee	Returned Check Fee
None	None	Not to exceed \$10 - Non-EFT \$3 - EFT	\$20

Policy: This fee is charged on all new business.

Billing: This fee applies on each installment and renewal bill. The reduced billing fee is charged when EFT is enabled on the policy.

Returned Check: This fee is charged when insured checks are not honored due to insufficient funds or stop payment.

Coverages

BI-PD	UM/UIM-BI	UM-PD	PIP
25/50/25 50/100/25 50/100/50	25/50 50/100	25 50	5,000 Medical/Hospital 70% Work Loss 5,000 Accidental Death
Medical Payments		Comprehensive	Collision
500 1,000 2,000 5,000		100 250 500	250 500 1,000

	Towing & Labor	Rental Reimbursement	Special Equipment	Named Non-Owner
	\$25 per disablement \$50 per disablement	\$20 per day \$600 Maximum	\$3,000 Maximum \$1,000 Stereo max	Available
Monthly Premiums	\$1 \$2	\$4	\$1 per \$100 of value	

BI-PD

- All policies must have liability.
- Vehicles on multi-car policies must carry the same liability limits.
- See Physical Damage Rules page 10.

UM/UIM-BI

- Limits for UM cannot be greater than the BI limits.
- UM/UIM limits/rejection must match on all vehicles.
- UM-BI will be added to the policy unless the insured rejects coverage.

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UM-PD

- A \$200 deductible will apply if no Collision coverage is carried on the policy. If Collision is carried, the \$200 deductible will be waived if the operator of the uninsured motor vehicle has been positively identified and is solely at fault.
- UM-PD cannot be purchased without UM-BI.
- All of the insured's vehicles must have the same UM-PD limits/rejection.
- UM-PD will be added to the policy unless the insured rejects coverage.

No-Fault Personal Injury Protection

- Coverages available are \$5,000 Medical Hospital, 70% Work Loss and \$5,000 Accidental Death.
- Each coverage is purchased separately.
- If any of the PIP coverages are not desired, the insured must sign the PIP rejections on the application.
- PIP Medical may be purchased instead of Medical Payments.

Medical Payments

- Medical payments may be purchased instead of PIP Medical.

Special Equipment

- Available only when Comprehensive and Collision coverages are purchased.
- Please refer to the Physical Damage Rules section for detailed guidelines on this coverage.

Rental Reimbursement

- This coverage reimburses the Insured for rental expenses incurred by the insured when the Insured Vehicle is withdrawn from use as the result of a covered loss.
- Coverage pays up to \$20 per day and a maximum of \$600 for the rental duration.
- Available only when Comprehensive and Collision coverages are carried.

Towing & Labor

- This coverage reimburses the Insured for towing and labor expenses each time an Insured Vehicle is disabled, including mechanical breakdown.
- Coverage varies.
- Available only when Comprehensive and Collision coverages are carried.

Named Non-Owner

- Coverage applies to non-owned vehicles used by the named insured only and includes financial responsibility.
- This coverage does not apply to a vehicle owned by members of the household in which the named insured resides.
- Only liability coverage is available with this policy type.

Physical Damage

General Rules

- The Comprehensive and Collision premium for any vehicle includes the loss of or damage to all permanently installed equipment, parts or accessories which were installed by the original manufacturer of the vehicle.
- Comprehensive is not available without Collision.
- Physical damage coverage applying to stereo and other sound producing equipment is limited to \$500.

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- The Comprehensive deductible cannot exceed the Collision deductible.
- Every policy must carry liability coverage.
- The agent must inspect all vehicles to be insured for physical damage. The inspection form must be completed with any and all pre-existing damage noted. Photos showing all 4 corners of the vehicle can be taken in lieu of completing the vehicle inspection form. Photos showing all 4 corners of the vehicle can be taken in lieu of completing the vehicle inspection form.

Conversion Vans

- Conversion vans are pick-ups, vans or utility vehicles requiring physical damage coverage which have a conversion package or add-on and custom equipment not installed by the original automobile manufacturer.
- Conversion vans are written in this program according to the current value symbols.
- Conversion vans require inside and outside photographs for binding.
- Special Equipment Coverage must be purchased to cover the value of add-on and custom equipment or the conversion package.
- An itemized list of such equipment must be submitted with the application.
- Note that Special Equipment Coverage is limited to a maximum of \$3,000 (\$1,000 for all stereo and sound producing equipment) and that all accompanying Comprehensive and Collision deductibles apply.
- Physical damage coverage on conversion vans provides coverage up to the actual cash value of the standard vehicle without any special equipment plus the lesser of the actual cash value or the stated amount value of the special equipment or conversion package.

Special Equipment

- A separate premium is charged for special custom, non-factory installed equipment.
- The maximum special equipment coverage available is \$3,000.
- The maximum coverage on all stereo and sound-producing equipment is \$1,000.
- Comprehensive and Collision coverage must be purchased in order to purchase special equipment coverage.
- The physical damage deductibles listed on the declarations page apply to all special equipment.
- Examples of common types of special equipment include:
 - T-tops
 - Portable toppers
 - Stereo equipment
 - Running boards
 - Custom exterior or interior work
 - Equipment to increase performance
 - Sun roof or any deluxe roof treatment
 - Rollbars and custom bumpers
 - Special wheels or tires
 - Bugshields
 - Captains Chairs

Discounts

Discount amounts vary by combination and coverage.

Defensive Driving Course

- This discount will apply when the insured is age 55 or older and has successfully completed an Accident Prevention Course approved by the Motor Vehicle Department.
- Eligibility begins from the date of course completion. The course must be taken every three years to continue the discount.
- A copy of the certificate must accompany the application.

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- The discount will not apply if the course is ordered by the court or another government entity.

Multi-Car

- This discount will be given to all listed vehicles registered to the Named Insured. This also applies to all listed vehicles registered to the spouse of the Named Insured as long as spouse and Named Insured are legally married, living at same residence, and both are listed on the policy.
- Policy limits for BI-PD, UM/UIM and Medical Payments must be identical on each listed vehicle.

Good Student

- This discount will apply to college graduates under 25 whose cumulative scholastic records show:
 - A "B" grade average or higher, or
 - A 3.0 average or higher on a 4 point scale.
- This discount applies to liability and physical damage premiums.
- Married insured's are not eligible for this discount.
- A copy of the transcript must be secured at the time of application and retained in your file. When submitting a paper endorsement, proof will need to be faxed.

Homeowners

- This discount is applied to policies when applicants submit proof of property insurance for a home they own.
- The insured must reside in the home, which includes condominiums, townhouses and mobile homes.
- Acceptable proof is a copy of any homeowner, condominium, townhouse or mobile home declaration providing proof of current coverage. Applications, binders and property tax assessments or mortgage coupons are also acceptable.
- The address on the acceptable proof must be the same as the policy garaging address.
- This discount can be added mid-term when endorsement and proof is submitted. The endorsement will be effective the date notification is received.

Transfer

- This discount is offered when applications are submitted with proof of 6 months prior insurance. This discount cannot be added after the first 30 days of the policy inception date.
- Acceptable proof is a copy of the most recent dec page, ID card, renewal offer, experience letter or non-renewal/cancellation notice.
- ❖ **Transfer level 1** requires that no more than 15 days lapse between the expiration date of the prior policy and the new policy effective date.
- ❖ **Transfer level 2** requires 0 days lapse between the expiration date of the prior policy and the new policy effective date.
- If applicant is U.S. Military personnel who has documentation they are returning from active duty overseas and where not required to have insurance, then apply transfer discount in accordance with remaining discount requirements. Retain proof in agency records. Acceptable proof includes U.S. Military documents providing applicant's name, overseas location, and tour of duty dates.
- Insureds who have not maintained insurance for other valid reasons (no prior vehicle ownership, service in peace corps, etc.) may qualify for this discount, as long as the applicant has not operated a motor vehicle in violation of any financial responsibility or compulsory insurance requirement within the prior 12 months. A statement explaining the valid reason for not having prior insurance must accompany the application.
- Proof must be faxed within 72 hours. If proof is not faxed, discount will be removed.
- Sentry Personal Lines companies cannot be used as proof.
- This discount remains in place for the life of this policy.
- Policies that fall outside of the reissue guidelines lose this discount.

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Paid in Full

- This discount is offered when the entire 6 month term premium is submitted with the application.

Advanced Quote

- Discount applies when quote is initiated on Autolink 7 or more days before the policy effective date.
- Policy must carry Transfer discount level 2 (six months prior insurance with no lapse in coverage).
- This discount is not available for named operator policy types.

Surcharges

Business Use - Artisan Use

- Acceptable business use vehicles will be surcharged. The surcharge applies to BI-PD, Medical Payment, Comprehensive and Collision coverages.

Acceptable business use includes, but is not limited to:

- Vehicles used by sales or service representatives, or for consumer oriented direct home sales (e.g., Avon, Mary Kay, Tupperware);
- Vehicles used by real estate or insurance agents, lawyers, doctors, accountants or other professionals visiting multiple locations.
- Vehicles owned by the insured and used by domestic employees (e.g., maids, chauffeurs).
- Vehicles used in a business for occasional errands.

Vehicles used to transport tools or other materials by the insured in a trade or business are acceptable if all of the following conditions are met:

- There are no more than two (2) vehicles in this category on the policy.
- The insured visits no more than two job sites per day.
- The vehicle is owned or leased by an individual, not a corporation or partnership.
- The vehicle is operated solely by the named insured or other resident relative.
- The vehicle is not used to transport explosives, chemicals, flammable materials, or more than 500 pounds of supplies or equipment.
- The gross vehicle weight rating (GVWR) does not exceed 14,000lbs.

Unacceptable business use includes, but is not limited to:

- Any business involving frequent stops, whether on regular route or not, such as courier, exterminators, delivery services, etc.
- Vehicles used in transporting passengers for a fee.
- Vehicles with permanently installed mobile equipment such as hoists, air compressors, pumps and generators, spraying, building cleaning, lighting and well servicing equipment.
- Vehicles used in security and surveillance operations.
- Vehicles used to transport migrant workers or used in agricultural business.
- Any vehicle used to tow a trailer carrying tools or supplies.

Foreign/International Driver's License

- Assigned to drivers on the policy with a foreign or international license. Drivers must be licensed in the U.S. for one year before the surcharge will be removed.

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Out-of-State License

- Applies to each driver with an out-of-state license.

Unverifiable Driving Record

- Assigned to each driver for which the company cannot obtain a current MVR.
- Insureds who have not maintained a license for a valid reason (i.e., Peace Corps, military stationed outside the USA, have not owned a vehicle, etc.) will not be surcharged.
- If both Unverifiable Driving Record and Foreign/International Driver's License surcharges are applicable only the Foreign/International Driver's License surcharge will apply.

Procedures

Commissions and Reissue Window

Policy Terms	Commission Levels New/Renewal	Reissue Period
Six-Month	13% /10%	60 days

Applications

- Applications must be submitted electronically through AutoLink. If you experience any difficulty submitting the application electronically, please contact Customer Service.
- Applications must be completed in full and a paper copy signed by you and the applicant, including completion of the appropriate rejections and initial section. The signed copy must be retained in your file.
- Applications missing the following critical information may result in policy cancellation: Driver Information (date of birth and license number), Vehicle Identification Number, and required signatures.

Payment Procedures

- All premiums must be submitted gross. We do not accept premium financing.
- Insured's check should be made payable or endorsed to the company.
- See Fee Section for applicable fees.
- Payments must be received by the Company or you by the due date.
- For Alternative Payment Options - see Agent Services section.
- When the deposit premium provides enough days of coverage for the Company to issue a policy, that policy will be issued for the exact number of days of coverage the premium will provide.
- Renewal Options:
 - ❖ Monthly installment plans, quarterly installments or a paid in full option is offered at renewal.
 - ❖ Renewals are sent directly to the insured prior to the renewal date.
- If payment is accepted in your office, you must indicate date and time payment is received.
- Late, short payments and NSF payments may be subject to an additional fee. See Fee Table.
- If the renewal is not paid the policy will expire. If applicable, financial responsibility and lienholder cancellations will be sent. No cancellation notices are sent for nonpayment of renewal billings.
- Renewal payments of less than our minimum tolerance percentages will be refunded within 15 days or less and the policy will cancel for nonpayment of premium effective the date shown on the renewal offer. No additional notification will be sent.

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- Electronic Fund Transfer (EFT) is also available as a payment method. See AutoLink for available billing options.

Endorsements

- Endorsements should be submitted via AutoLink, our internet based web page, but may be faxed, e-mailed, phoned or sent in writing only when the system is unavailable. See Agent Services page for information.
- Endorsements requesting the deletion of a driver or lowering the limits of liability must be signed by all named insureds.
- All endorsements will be computed on a pro rate basis using the rules and rates in effect as of the effective date of the policy term.
- If an additional premium is due, the insured will be billed directly.
- Any additional premium due in the Six-Month program will be spread over the remaining installments in the current policy term. An estimated additional premium should accompany all change requests for additional coverage. If no additional money is sent with this type of endorsement request, the next statement's amount due will be greater than the amount the insured is expecting.

Reissues/Rewrites

- Policies cancelled at the installment carry date may be rewritten within 60 days of the cancellation date without submitting a new application. After 60 days, a new application and fees are required.
- When the insured sends a late payment directly, reissued coverages will take effect at 12:01 AM on the date received.
- Late payments of less than our minimum tolerance percentage will be refunded within 7 days or less and the policy will cancel for non-payment of premium effective the date of the renewal offer. No additional notification will be sent.
- When the insured makes a late payment to you, the date and time must be clearly indicated and initialed by the agent on the payment stub. The declaration page will be issued effective 12:01 AM the day following receipt of payment. However, coverage is considered bound as of the time the agent takes payment from the insured. Reissue/rewrite requests (including payment upload) should be performed electronically at the time payment is bound. The corresponding payment must include all appropriate fees.
- A policy that cancels for non-payment of an additional balance due requires a new application.
- Reissue requests should be performed electronically at the time the payment is bound. The corresponding payment upload must include all appropriate fees.
- If the reissue is a result of an installment lapse a new policy number and term will be assigned.

Installment Processing

- A minimum down payment is required. The insured will be billed for the balance in equal installments.
- Payment plans available include monthly bill, quarterly bill and paid in full.
 - Quarterly Bill – The installment is due approximately 90 days from the inception date of the policy.
 - Paid in Full – The entire 6 month term is paid in full at inception or renewal.

Cancellations

- Policy cancellation requests should be processed electronically through AutoLink.
- When a written cancellation request is submitted, the cancellation will be effective the date received, unless a future cancel effective date is indicated.
- Back-dated cancellations beyond the agent binding authority are not allowed.
- No Flat Cancellations. Return premium for insured request cancellations will be calculated on a short rate basis.
- Company initiated cancellations will be calculated on a pro rated basis.

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Agency File Documentation

Since you no longer are required to forward applications and many of the associated documents to Dairyland Insurance, we do ask that certain documents be available upon request. We will be performing occasional File Compliance Audits via fax to make sure training has been adequate and the required documents are being properly maintained in the agency files. This is to ensure that your interests and ours are protected in the event of a claim or legal issue.

File Maintenance Requirements

- Original signed application. The General Acknowledgement block must be signed by the Named Insured or additional Named Insured.
- Appropriate coverage rejection signature(s). Signed by the Named Insured or the additional Named Insured.
- Driver exclusion (where available) signatures. Signed by the named Insured and/or additional Named Insured as shown on the application or Declarations page.
- Description of Business/Artisan use when applicable.
- Any insured requests for policy change.
- Physical Damage inspection. When Comprehensive and Collision coverages are selected, photos showing all 4 corners of the vehicle, or a completed vehicle inspection form must be kept.
- Complete garaging address when it differs from the mailing address.
- Proof of prior insurance for Transfer discount (a copy of this proof also needs to be faxed to the company within 72 hours of upload).
- Proof of insurance for Homeowners discount (a copy of this proof also needs to be faxed to the company within 72 hours of upload).
- Proof of not-at-fault. A police report, letter from the insurance company, or details of the accident indicating not at fault.
- Documentation for discounts requiring proof.
- For Electronic Fund Transfer (EFT), the original signed authorization form should be retained for the period of time required by the state. The same applies with regard to EFT Change and Cancel forms.
- For one time payments made by check via Autolink (ACH), the original signed ACH Authorization form should be retained for the period of time required by the state.

Compliance Audit Requirements

- Audits will be performed via fax, or in person, on randomly selected policies.
 - Normal audit frequency is once per quarter
 - New agents will be audited more frequently until 10 "passes" are attained.
 - Failed audits will result in increased audit frequency.
- Requested documentation must be faxed back to us within 48 hours.
- Audits may be performed on cancelled/non-renewed policies.
- Files must be maintained for a minimum of the state legal requirement.

SERFF Tracking #:

VKNG-128766096

State Tracking #:

Company Tracking #:

VIK-20121217-RATE/RULE

State: Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name: Viking Six Month

Project Name/Number: /

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	A-1 Private Passenger Auto Abstract	Filed	12/17/2012
Comments:			
Attachment(s):			
PPA Abstract 12-17-12.pdf			

		Item Status:	Status Date:
Satisfied - Item:	APCS-Auto Premium Comparison Survey	Filed	12/17/2012
Comments:			
Attachment(s):			
PPA Survey FORM APCS 12-17-12.pdf			

		Item Status:	Status Date:
Satisfied - Item:	NAIC loss cost data entry document	Filed	12/17/2012
Comments:			
Attachment(s):			
FORM RF-1 Rate Filing Abstract 12-17-12.pdf			

		Item Status:	Status Date:
Bypassed - Item:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	12/17/2012
Bypass Reason:	N/A		

		Item Status:	Status Date:
Satisfied - Item:	Revision Documents	Filed	12/17/2012
Comments:			
Attachment(s):			
AR Cover Letter 12-17-12.pdf			
AR Filing Memo 12-17-12.pdf			

SERFF Tracking #:

VKNG-128766096

State Tracking #:**Company Tracking #:**

VIK-20121217-RATE/RULE

State:

Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

Viking Six Month

Project Name/Number:

/

		Item Status:	Status Date:
Satisfied - Item:	Supporting Documents	Filed	12/17/2012
Comments:			
Attachment(s):			
AR Indications 12-17-12.pdf			
AR Off Balance 12-17-12.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Objection Response	Filed	12/17/2012
Comments:			
Attachment(s):			
PPA Survey FORM APCS 12-26-12.xls			
PPA Survey FORM APCS 12-26-12.pdf			

SERFF Tracking #:

VKNG-128766096

State Tracking #:

Company Tracking #:

VIK-20121217-RATE/RULE

State:

Arkansas

Filing Company:

Viking Insurance Company of WI

TOI/Sub-TOI:

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name:

Viking Six Month

Project Name/Number:

/

Attachment PPA Survey FORM APCS 12-26-12.xls is not a PDF document and cannot be reproduced here.

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 Viking Insurance Company of Wisconsin
 NAIC # (including group #) 13137(169)

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 | 5 | % |
| c. Multi-car Discount | 10 | % |
| d. Accident Free Discount* | 0 | % |

Please Specify Qualification for Discount: _____

- | | | |
|---------------------------|--|---|
| e. Anti-Theft Discount | 0 | % |
| f. Transfer | BI-10%,PD-9%,MP-19%,PIP-14%,COMP-15%,COLL-8%,UM Coverages-4% | % |
| g. Six Month Paid-In-Full | BI-15%,PD-12%,MP-26%,PIP-20%,COMP-20%,COLL-15%,UM Cov-20% | % |
| h. Advance Quote | 15 | % |
| i. Homeowner | BI-5%,PD-6%,MP-4%,PIP-10%,COMP-5%,COLL-7%,UM Coverages-0% | % |

6. Do you have an installment payment plan for automobile insurance? Yes No
 If so, what is the fee for installment payments? \$10.00 / \$3.00 (EFT)

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

Brent Newport

 Signature
 Brent Newport
 Printed Name
 Asst. Product Manager
 Title
 608.826.3143
 Telephone Number
 Brent.Newport@Sentry.com
 Email address

NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	VIK-12172012-09VN-RATE
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2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	
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	Company Name		Company NAIC Number
3.	A.	Viking Insurance Company of Wisconsin	B. 13137

	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. 19.001 Private Passenger Auto(PPA)

5.			FOR LOSS COSTS ONLY				
(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
BI	4.0%	-8.0%					
PD	0.6%	-12.0%					
UM Coverages	3.2%	0%					
PIP	0.1%	0%					
MP	0.2%	0%					
COMP	9.4%	3.0%					
COLL	-4.8%	-12.0%					
TOTAL OVERALL EFFECT	2.1%	-8.3%					

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
2007	6,416	3.6%	2/12/07	8,978	5,097	56.8%	52.3%
2007	6,416	-2.96%	12/17/07	8,678	5,097	56.8%	52.3%
2008	8,433	1.98%	8/25/08	8,887	5,654	63.6%	52.4%
2008	8,433	2.24%	10/20/08	8,887	5,654	63.6%	52.4%
2009	5,989	0.00%	2/16/09	8,924	4,933	55.3%	54.5%
2009	5,989	3.18%	6/15/09	8,924	4,933	55.3%	54.5%
2009	5,989	0.0%	8/17/09	8,924	4,933	55.3%	54.5%
2010	5,730	1.4%	9/27/10	6,294	4,200	66.7%	55.4%
2011	5,700	1.6%	4/18/11	5,594	3,162	56.5%	57.3%
2012	5,286	0.0%	6/18/12	4,075	1,719	42.2%	55.9%

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	14.1%
B. General Expense	13.1%
C. Taxes, License & Fees	2.6%
D. Underwriting Profit & Contingencies	Liab-4.4% Phys Dam-2.5%
E. Other (explain) - ULAE	11.2%
F. TOTAL	45.0%

- 8.** N Apply Lost Cost Factors to Future filings? (Y or N)
- 9.** 0.43% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____
- 10.** -30.42% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): _____

November 12, 2012

Jay Bradford
Insurance Commissioner
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201-1904
Attn: Mr. Bill Lacy, Director, Property & Casualty Division

RE: VIKING INSURANCE COMPANY OF WISCONSIN (NAIC#13137)

With this revision Viking Insurance Company of Wisconsin is changing installment fees, implementing new base rates, modifying the discount and surcharge factors, changing the symbol (named non-owner only) and territory relativities.

The overall effect is a -6.7% rate level change. The rate manual changes are effective 12/17/12 (New Business) / 1/30/13 (Renewal Business). The rule guide changes are effective 1/21/13 (New Business) / 3/6/2013 (Renewal Business).

If you have any questions or require additional information, please contact me at 608-826-3143.

Sincerely,

Brent Newport
State Manager
Dairyland Auto
Brent.Newport@Sentry.com
608-826-3143

Viking Insurance Company of Wisconsin State of Arkansas Filing Memorandum Automobile Manual Change

In this filing, we are updating our State of Arkansas automobile program rates.

In support of the proposed changes, we are enclosing the following exhibits:

Exhibit 1:	Base Rate (1)
Exhibit 2:	Territory (5)
Exhibit 3:	Discount (9)
Exhibit 4:	Surcharge (10)
Exhibit 5:	Pay Code Group (306)
Exhibit 6:	Symbol/Im (608)
Exhibit 7:	Indications
Exhibit 8:	Off Balance

Rolling Accident Year (Q#-Quarter#)		BI	PD	UM	MP	PIP	Total Liability	COMP	COLL	Physical Damage	TOTAL	
1 Earned Premium Excluding fees	Q409-Q310	2,295,291	2,331,512	215,302	3,918	41,614	4,887,637	291,557	599,223	890,781	5,778,417	
	Q410-Q311	2,139,876	2,068,779	220,327	3,007	33,883	4,465,873	232,669	458,316	690,984	5,156,857	
	Q411-Q312	1,798,932	1,718,603	208,708	2,947	35,256	3,764,446	207,397	412,425	619,822	4,384,268	
2 Model Year and Symbol Drift	Q409-Q310	1.000	1.000	1.000	1.000	1.000		1.030	1.060			
	Q410-Q311	1.000	1.000	1.000	1.000	1.000		1.020	1.040			
	Q411-Q312	1.000	1.000	1.000	1.000	1.000		1.010	1.019			
3 Fees Policy, Rein., or Service	Q409-Q310	166,472	169,099	15,615	284	3,018	354,489	21,146	43,460	64,606	419,095	
	Q410-Q311	162,938	157,525	16,777	229	2,580	340,049	17,716	34,898	52,614	392,663	
	Q411-Q312	133,252	127,302	15,460	218	2,612	278,843	15,363	30,550	45,912	324,755	
4 Case Incurred Losses and ALAE	Q409-Q310	1,767,527	1,476,782	234,543	1,000	40,548	3,520,401	158,073	373,891	531,965	4,052,366	
	Q410-Q311	1,279,943	1,222,661	161,043	0	21,619	2,685,266	165,411	211,633	377,044	3,062,311	
	Q411-Q312	541,198	841,117	64,550	0	18,269	1,465,134	180,569	201,932	382,501	1,847,636	
5 Loss Development Factors CASE	Q409-Q310	1.054	0.996	1.062	0.974	1.000	1.030	1.000	1.000	1.000	1.026	
	Q410-Q311	1.197	1.021	1.242	1.000	1.000	1.118	1.000	1.000	1.000	1.103	
	Q411-Q312	1.889	1.064	2.014	1.009	1.013	1.410	1.013	0.995	1.003	1.326	
6 Projected L/R before trend (4x5)/(1+3) * If no PIP EP, BI incl PIP losses	Q409-Q310	75.7%	58.8%	107.9%	23.2%	90.8%	69.1%	50.6%	58.2%	55.7%	67.1%	
	Q410-Q311	66.5%	56.1%	84.4%	0.0%	59.3%	62.5%	66.1%	42.9%	50.7%	60.9%	
	Q411-Q312	52.9%	48.5%	58.0%	0.0%	48.9%	51.1%	82.1%	45.4%	57.7%	52.0%	
7a (Premium adjustment Factors)	Q409-Q310	1.083	0.968	1.438	0.994	1.238	1.045	1.033	0.938	0.969	1.033	
	Q410-Q311	1.040	0.980	1.269	0.993	1.186	1.025	1.029	0.943	0.972	1.018	
	Q411-Q312	1.012	0.985	1.073	0.993	1.028	1.003	1.026	0.948	0.974	0.999	
7b (Fee adjustment Factors)	Q409-Q310	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
	Q410-Q311	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
	Q411-Q312	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
8 Earned Premium w/ Fees at current rate levels including premium trend (1x2x7a)+(3x7b)	Q409-Q310	2,652,272	2,426,003	325,219	4,178	54,537	5,462,209	331,360	639,256	970,616	6,432,825	
	Q410-Q311	2,388,410	2,184,928	296,372	3,215	42,765	4,915,690	261,921	484,377	746,298	5,661,988	
	Q411-Q312	1,953,771	1,820,126	239,403	3,144	38,854	4,055,299	230,280	428,957	659,237	4,714,536	
9 Loss Trend Factors	Q409-Q310	1.008	1.032	1.008	1.008	1.027		1.174	1.025			
	Q410-Q311	1.019	1.030	1.019	1.019	1.038		1.099	1.024			
	Q411-Q312	1.029	1.029	1.029	1.029	1.048		1.029	1.024			
10 Projected Loss and ALAE ratio - using on-level premiums [(4x5x9)/8] * If no PIP EP, BI incl PIP losses	Q409-Q310	70.8%	62.6%	77.2%	23.5%	76.4%	67.5%	56.0%	60.0%	58.6%	66.2%	
	Q410-Q311	65.4%	58.8%	68.8%	0.0%	52.5%	62.5%	69.4%	44.7%	53.4%	61.3%	
	Q411-Q312	53.8%	50.6%	55.9%	0.0%	49.9%	52.4%	81.7%	48.0%	59.8%	53.5%	
	Q409-Q312	64.2%	57.9%	68.4%	9.3%	61.3%	61.6%	67.5%	51.9%	57.3%	61.0%	
	Q410-Q312	60.2%	55.1%	63.0%	0.0%	51.3%	58.0%	75.2%	46.3%	56.4%	57.7%	
11 Pure Need (LR + ULAE + FE) -1 (1-VE-PP)	Q409-Q310	20.6%	10.2%	28.7%	-39.4%	27.7%	16.4%	-0.6%	4.3%	2.6%	14.3%	
	Q410-Q311	13.7%	5.3%	18.0%	-69.2%	-2.6%	10.0%	16.0%	-14.6%	-3.8%	8.2%	
	Q411-Q312	-1.0%	-5.1%	1.7%	-69.2%	-5.9%	-2.8%	31.2%	-10.5%	4.1%	-1.7%	
	Q409-Q312	12.2%	4.2%	17.5%	-57.4%	8.5%	8.9%	13.6%	-5.7%	1.0%	7.8%	
	Q410-Q312	7.1%	0.7%	10.7%	-69.2%	-4.2%	4.3%	23.2%	-12.6%	-0.1%	3.6%	
12 Claims Received	Q409-Q310	234	507	53	0	11	805	86	113	199	1,004	
	Q410-Q311	189	417	44	0	6	656	76	73	149	805	
	Q411-Q312	139	302	41	0	3	485	68	72	140	625	
13a Full Credibility		1,082	1,082	1,082	1,082	1,082		1,082	1,082			
13b Credibility - using Square root rule and full credibility above	Q409-Q310	0.465	0.685	0.221	0.000	0.101		0.282	0.323			
	Q410-Q311	0.418	0.621	0.202	0.000	0.074		0.265	0.260			
	Q411-Q312	0.358	0.528	0.195	0.000	0.053		0.251	0.258			
	Q409-Q312	0.721	1.000	0.357	0.000	0.136		0.461	0.488			
	Q410-Q312	0.551	0.815	0.280	0.000	0.091		0.365	0.366			
14a Permissible Loss and ALAE Ratio		54.6%	54.6%	54.6%	54.6%	54.6%		56.5%	56.5%			
14b Trended Permissible (for Complement of Credibility)		54.8%	55.0%	54.8%	54.8%	55.0%		57.7%	56.2%			
15 Indicated rate level change Adj for credibility	Q409-Q310	9.7%	7.1%	6.5%	0.2%	3.3%	8.3%	0.9%	1.2%	1.1%	7.2%	
	Q410-Q311	5.9%	3.5%	3.8%	0.2%	0.3%	4.6%	5.3%	-4.0%	-0.7%	4.0%	
	Q411-Q312	-0.2%	-2.4%	0.5%	0.2%	0.2%	-1.2%	8.9%	-3.0%	1.2%	-0.8%	
	Q409-Q312	8.9%	4.2%	6.4%	0.2%	1.6%	6.6%	7.1%	-2.9%	0.6%	5.7%	
	Q410-Q312	4.0%	0.6%	3.2%	0.2%	0.1%	2.4%	9.4%	-4.8%	0.2%	2.1%	
16 Current RAY, Loss/LAE, ULAE, and Expense Ratios								Current RAY Combined Ratio				93.0%
								- Loss/ALAE Ratio				52.0%
								- ULAE Ratio				11.2%
								- Expense Ratio				29.8%
								Fixed Expense Ratio				13.1%
								Variable Expense Ratio				16.7%
								Liability Profit Provision				4.4%
								Physical Damage Profit Provision				2.5%
								Liability Target Combined Ratio				95.6%
								Physical Damage Target Combined Ratio				97.5%

Exhibit 8

COVERAGE	2 Year CURRENT LEVEL PREMIUM	CURRENT BASE RATES	PROPOSED BASE RATES	BASE RATE CHANGE	Discounts	Surcharge	Territory / Zip Code	Symbol	FILED OVERALL CHANGE
BIPD	\$7,766,218	\$63.70	\$54.67	-14.2%	0.0%	5.2%	-0.2%	0.0%	-9.9%
BI	\$4,045,990	\$32.88	\$28.83	-12.3%	0.0%	5.2%	-0.2%	0.0%	-8.0%
PD	\$3,720,228	\$30.82	\$25.84	-16.1%	0.0%	5.2%	-0.2%	0.0%	-12.0%
INSTALLMENT FEES	\$672,221	\$8.00	\$10.00	25.0%	N/A	N/A	N/A	N/A	25.0%
UM	\$503,539	\$27.98	\$26.49	-5.3%	0.0%	5.6%	0.0%	0.0%	0.0%
UM-BI	\$268,146	\$14.90	\$14.11	-5.3%	0.0%	5.6%	0.0%	0.0%	0.0%
UM-PD	\$117,696	\$6.54	\$6.19	-5.4%	0.0%	5.6%	0.0%	0.0%	-0.1%
UIM-BI	\$117,696	\$6.54	\$6.19	-5.4%	0.0%	5.6%	0.0%	0.0%	-0.1%
MP	\$5,912	\$5.73	\$5.53	-3.5%	0.0%	3.7%	0.0%	0.0%	0.0%
PIP	\$76,428	\$28.94	\$27.60	-4.6%	0.1%	4.8%	0.0%	0.0%	0.0%
LIABILITY	\$9,024,318			-10.7%	0.0%	4.8%	-0.2%	0.0%	-6.7%
COMP	\$452,206	\$50.06	\$49.88	-0.4%	0.0%	5.9%	-2.4%	0.0%	3.0%
COLL	\$823,170	\$58.27	\$49.16	-15.6%	0.0%	5.9%	-1.6%	0.0%	-12.0%
PHYSICAL DAMAGE	\$1,275,376			-10.2%	0.0%	5.9%	-1.9%	0.0%	-6.7%
TOTAL:	\$10,299,694			-10.6%	0.0%	4.9%	-0.4%	0.0%	-6.7%

