

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

1.	This filing transmittal is part of Company Tracking #	
2.	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	

		Company Name			Company NAIC Number
3.	A.	Economy Premier Assurance Company (former USF&G Program)	B.	40649	

		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.	Homeowners	B.		

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY			
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)
Owners	N/A	0.0%				
Renters/Condo	N/A	0.0%				
TOTAL OVERALL EFFECT	N/A	0.0%				

PROPERTY & CASUALTY  
ARKANSAS INSURANCE DEPARTMENT

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
2001	2659	+8.7%	10/15/01	1,451,115	1,630,983	112%	64%
2002	1959	+19.8%	10/15/02	1,303,316	1,180,032	90%	52%
2003	1230			1,206,836	429,967	36%	46%
2004	1065	0.0%	09/30/04	1,167,278	224,620	19%	47%
2005	901	-1.4%	09/30/05	1,062,234	434,458	41%	65%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	
B. General Expense	
C. Taxes, License & Fees	
D. Underwriting Profit & Contingencies	
E. Other (explain)	
F. TOTAL	

8. \_\_\_\_\_ Apply Lost Cost Factors to Future filings? (Y or N)
9. \_\_\_\_\_ Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): 2.2%, Territory 30
10. \_\_\_\_\_ Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): -13.8%, Territory 30