

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # **AR-PA-06-05R**

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.	Sagamore Insurance Company	B.		40460

		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.	19.0001	B.		PPA

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Bodily Injury	29.6	5.0					
Property Damage	6.7	5.0					
Other than Collision	20.1	5.0					
Collision	20.9	5.0					
Medical Payments	15.5	0.0					
Uninsured Motorists	80.8	5.0					
TOTAL OVERALL EFFECT	20.0	4.56%					

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	788	9.5	7/31/00	\$1,471	\$963	65.4%	60.9%
2002	482	13.9	12/8/00	\$822	\$428	52.1%	55.2%
2003	595	19.4	8/27/01	\$816	\$341	41.8%	52.1%
2004	1,500	-1.3	6/16/04	\$1,056	\$626	59.3%	50.6%
2005	4,223	3.6	5/3/06	\$3,612	\$2,500	69.2%	52.5%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	20.5
B. General Expense	7.0
C. Taxes, License & Fees	3.5
D. Underwriting Profit & Contingencies	1.0
E. Other (explain)	
F. TOTAL	32.0

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

9. 5.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): _____

10. 0% Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): _____