

SERFF Tracking Number: CNNA-125477049 State: Arkansas  
First Filing Company: The Cincinnati Casualty Company, ... State Tracking Number: EFT \$150  
Company Tracking Number: WC-08-6004-AR  
TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations  
Product Name: WC-08-6004-AR  
Project Name/Number: /

## Filing at a Glance

Companies: The Cincinnati Casualty Company, The Cincinnati Indemnity Company, The Cincinnati Insurance Company

Product Name: WC-08-6004-AR SERFF Tr Num: CNNA-125477049 State: Arkansas  
TOI: 16.0 Workers Compensation SERFF Status: Closed State Tr Num: EFT \$150  
Sub-TOI: 16.0000 WC Sub-TOI Combinations Co Tr Num: WC-08-6004-AR State Status: Fees received  
Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Carol Stiffler, Brittany Yielding  
Author: Sharon Grubbs Disposition Date: 02/11/2008  
Date Submitted: 02/07/2008 Disposition Status: Approved  
Effective Date Requested (New): 01/01/2008 Effective Date (New): 02/11/2008  
Effective Date Requested (Renewal): Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile: Pending  
Project Number: Domicile Status Comments:  
Reference Organization: NCCI Reference Number: E-1400  
Reference Title: Advisory Org. Circular: CIF-2006-09  
Filing Status Changed: 02/11/2008  
State Status Changed: 02/07/2008 Deemer Date:  
Corresponding Filing Tracking Number:

Filing Description:

Please be advised we are adopting NCCI Item E-1400 - pertaining to the Exclusion of Catastrophe Losses from Experience Rating.

(Circular Number CIF-2006-09)

Your acknowledgement is respectfully requested.

## Company and Contact

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**Filing Contact Information**

Sharon Grubbs, Senior Filings Analyst sharon\_grubbs@cinfin.com  
 6200 S. Gilmore Road (513) 870-2091 [Phone]  
 Fairfield, OH 45014

**Filing Company Information**

The Cincinnati Casualty Company	CoCode: 28665	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-0826946	
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The Cincinnati Indemnity Company	CoCode: 23280	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-1241230	
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The Cincinnati Insurance Company	CoCode: 10677	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name:	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-0542366	
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**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? Yes  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Cincinnati Casualty Company	\$150.00	02/07/2008	17866195
The Cincinnati Indemnity Company	\$0.00	02/07/2008	
The Cincinnati Insurance Company	\$0.00	02/07/2008	

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CHECK NUMBER	CHECK AMOUNT	CHECK DATE
	\$0.00	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	02/11/2008	02/11/2008

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Filing fees	Note To Filer	Carol Stiffler	02/11/2008	02/11/2008
FILING FEES	Note To Reviewer	Sharon Grubbs	02/07/2008	02/07/2008

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## Disposition

Disposition Date: 02/11/2008

Effective Date (New): 02/11/2008

Effective Date (Renewal):

Status: Approved

Comment:

In Arkansas, all workers' compensation filings are prior approval and cannot be approved retroactively.

I am approving this filing, E-1400, effective today February 11, 2008.

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Casualty		Yes
<b>Supporting Document</b>	NAIC Loss Cost Filing Document for Workers' Compensation		Yes
<b>Supporting Document</b>	NAIC loss cost data entry document		Yes

*SERFF Tracking Number:*      *CNNA-125477049*                      *State:*                      *Arkansas*  
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**Note To Filer**

**Created By:**

Carol Stiffler on 02/11/2008 12:03 PM

**Subject:**

Filing fees

**Comments:**

All filing fees in Arkansas are per filing--not per company. If you have 1 company or 20 companies, the fee is the same. If it is a form filing--it doesn't matter if there is 1 form or 100 forms or 1 company/100 companies, the fee is just \$50.

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**Note To Reviewer**

**Created By:**

Sharon Grubbs on 02/07/2008 07:30 AM

**Subject:**

FILING FEES

**Comments:**

AFTER I SUBMITTED THE FILING, I NOTICED THAT THE FILING FEES ARE NOT SHOWING CORRECTLY. I THINK THIS MAY BE AN ISSUE WITH SERFF.

THE FILING FEES SHOULD HAVE SHOWN FOR EACH COMPANY. (\$50 THE CINCINNATI INSURANCE COMPANY; \$50 THE CINCINNATI CASUALTY COMPANY AND \$50 THE CINCINNATI INDEMNITY COMPANY).

IF YOU HAVE ANY QUESTIONS, PLEASE LET ME KNOW.

SINCERELY,  
SHARON GRUBBS

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## **Rate Information**

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## Supporting Document Schedules

**Review Status:** 02/07/2008  
**Bypassed -Name:** Uniform Transmittal Document-  
Property & Casualty  
**Bypass Reason:** N/A  
**Comments:**

**Review Status:** 02/07/2008  
**Bypassed -Name:** NAIC Loss Cost Filing Document  
for Workers' Compensation  
**Bypass Reason:** N/A  
**Comments:**

**Review Status:** 02/07/2008  
**Bypassed -Name:** NAIC loss cost data entry document  
**Bypass Reason:** N/A  
**Comments:**