

SERFF Tracking Number: CNAC-125618617 State: Arkansas  
Filing Company: Continental Casualty Company State Tracking Number: #231764 \$100  
Company Tracking Number: 08-R2218  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0006 Directors & Officers Liability  
Product Name: IHG Condo D&O/Crime  
Project Name/Number: IHG Condo Association Filing/20082218

## Filing at a Glance

Company: Continental Casualty Company  
Product Name: IHG Condo D&O/Crime SERFF Tr Num: CNAC-125618617 State: Arkansas  
TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: #231764 \$100  
Made/Occurrence  
Sub-TOI: 17.0006 Directors & Officers Liability Co Tr Num: 08-R2218 State Status: Fees verified and received  
Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding  
Author: John Lockhart Disposition Date: 05/23/2008  
Date Submitted: 04/30/2008 Disposition Status: Filed  
Effective Date Requested (New): 06/01/2008 Effective Date (New):  
Effective Date Requested (Renewal): 06/01/2008 Effective Date (Renewal):  
State Filing Description:

## General Information

Project Name: IHG Condo Association Filing Status of Filing in Domicile: Authorized  
Project Number: 20082218 Domicile Status Comments:  
Reference Organization: Reference Number:  
Reference Title: Advisory Org. Circular:  
Filing Status Changed: 05/23/2008  
State Status Changed: 05/23/2008 Deemer Date:  
Corresponding Filing Tracking Number:  
Filing Description:  
Continental Casualty Company is filing the attached 4-08 D&O rate manual pages and Crime rate manual pages for AR .

## Company and Contact

### Filing Contact Information

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John Lockhart, Regulatory Filings Technician john.lockhart@cna.com  
40 Wall Street (877) 269-3277 [Phone]  
New York, NY 10005 (212) 440-2877[FAX]

**Filing Company Information**

Continental Casualty Company CoCode: 20443 State of Domicile: Illinois  
40 Wall Street Group Code: 218 Company Type:  
9th Floor  
New York, NY 10005 Group Name: State ID Number:  
(212) 440-3478 ext. [Phone] FEIN Number: 36-2114545  
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## Filing Fees

Fee Required? Yes  
Fee Amount: \$100.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Continental Casualty Company	\$0.00	04/30/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
0000231764	\$100.00	04/29/2008

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	05/23/2008	05/23/2008

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## Disposition

Disposition Date: 05/23/2008

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

*SERFF Tracking Number:* CNAC-125618617      *State:* Arkansas  
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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Rate</b>	D&O Manual pages	Filed	Yes
<b>Rate</b>	Crime Manual Pages	Filed	Yes

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## Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	D&O Manual pages	1-3	New	Guide cw DO Manual 4-08.pdf GR NFP Comm Assn spec - crime and fidelity pages 4-08 (3).pdf
Filed	Crime Manual Pages	1-2	New	

**CNA Insurance Companies**  
**COMMUNITY ASSOCIATION LIABILITY POLICY**  
**PRODUCT MANUAL**

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**I. General**

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**Application of the Community Association Policy Program**

This manual contains the rules for the Community Association policy program.

Subject to the terms and conditions of the respective coverage forms which comprise this policy, the following coverages are available:

**Association Liability** – provides coverage for claims arising from the “wrongful acts” of insured persons while serving in their capacity as covered under the policy terms.

**Crime** – provides coverage for loss resulting from covered causes of loss.

**CNA Insurance Companies**  
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**II. Rates**

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**A. Association Liability**

The following Guide (a) rates apply to Association Liability Coverage:

**Community Association D&O:**

Number of Units		Rate	
Low	High	Min	Max
1	10	575	3,358
11	25	625	3,358
26	50	690	3,358
51	100	690	4,200
101	200	690	5,318
201	250	690	5,598
251	300	690	6,160
301	350	690	6,439
351	400	700	7,000
401	450	728	7,279
451	500	784	7,837
501	600	840	8,399
601	700	896	8,956
701	800	952	9,518
801	900	980	9,797
901	1,000	1,008	10,075
1,001	2,000	1,361	13,607
2,001	3,000	1,550	15,504
3,001	4,000	1,677	16,770
4,001	5,000	1,804	18,035
<b>Over 5,000</b>		<b>Refer to Company</b>	

**CNA Insurance Companies**  
**COMMUNITY ASSOCIATION LIABILITY POLICY**  
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**FIDELITY AND CRIME RATES**

**II. Rates**

**B. Fidelity and Crime**

1. **Determine Coverage A – Fidelity Base Rate** – based on the total number of employees, coverage limit, and deductible.

Limit	Deductible	1-4 Employees	5-10 Employees
25,000	250	\$211	\$274
50,000	250	293	381
75,000	250	364	473
100,000	250	411	535
150,000	250	482	602
200,000	250	524	655
25,000	1,000	206	267
50,000	1,000	286	371
75,000	1,000	355	461
100,000	1,000	401	502
150,000	1,000	470	587
200,000	1,000	512	639
250,000	1,000	557	696
300,000	1,000	602	752
350,000	1,000	647	782
400,000	1,000	692	837
450,000	1,000	737	891
250,000	2,500	515	644
300,000	2,500	557	696
350,000	2,500	598	724
400,000	2,500	640	774
450,000	2,500	682	825
500,000	2,500	722	873
550,000	2,500	762	891
600,000	2,500	802	938
500,000	5,000	704	851
550,000	5,000	743	869
600,000	5,000	782	914
650,000	5,000	821	960
700,000	5,000	860	988
750,000	5,000	899	1,033
800,000	5,000	938	1,078
850,000	5,000	977	1,123
900,000	5,000	1,016	1,168
950,000	5,000	1,055	1,213

**CNA Insurance Companies**  
**COMMUNITY ASSOCIATION LIABILITY POLICY**  
**PRODUCT MANUAL**

**FIDELITY AND CRIME RATES**

**II. Rates**

**B. Fidelity and Crime (cont.)**

1,000,000	7,500	1,066	1,226
1,000,000	10,000	1,045	1,202
> 1,000,000	Refer to Company		

For more than 10 employees, refer to company.

2. **Determine Coverage B – Depositor's Forgery Base Premium** – based on number of accounts, limit of coverage, and deductible.

Limit	Deductible	Premium
25,000	250	32
50,000	250	43
75,000	250	53
100,000	250	59
150,000	250	66
200,000	250	73
25,000	1,000	27
50,000	1,000	37
75,000	1,000	45
100,000	1,000	51
150,000	1,000	56
200,000	1,000	60
250,000	1,000	64
300,000	1,000	68
350,000	1,000	72
400,000	1,000	76
450,000	1,000	80
250,000	2,500	55
300,000	2,500	59
350,000	2,500	63
400,000	2,500	67
450,000	2,500	71
500,000	2,500	75
550,000	2,500	79
600,000	2,500	83

**CNA Insurance Companies**  
**COMMUNITY ASSOCIATION LIABILITY POLICY**  
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**FIDELITY AND CRIME RATES**

**II. Rates**

**B. Fidelity and Crime (cont.)**

500,000	5,000	73
550,000	5,000	77
600,000	5,000	81
650,000	5,000	85
700,000	5,000	89
750,000	5,000	93
800,000	5,000	97
850,000	5,000	101
900,000	5,000	105
950,000	5,000	109
1,000,000	7,500	111
1,000,000	10,000	109
> 1,000,000	Refer to Company	

For more than 10 accounts, refer to company.

3. **Determine Coverage C – Premises and Transit Base Premium:** Incidental coverage only, No actual cash exposure.

Rate per \$1,000 of Coverage: \$1.50.

4. **Determine Coverage F/YB – Computer Fraud & Wire Transfer Base Premium**

17.5% of Coverage A – Employee Dishonesty base premium.

5. **Sum the Results of Steps 1 Through 4 and Multiply by the IRM Factor**

Individual Risk Characteristic	Debit	Credit
Financial Statement Frequency	0 – 30%	0 – 30%
Independent Auditing	0 – 30%	0 – 30%
Scope of Statement	0 – 30%	0 – 30%
Bank Account Reconciliation	0 – 30%	0 – 30%
Historic Loss Potential	0 – 30%	0 – 30%