

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Filing at a Glance

Companies: Farmland Mutual Insurance Company, Nationwide Agribusiness Insurance Company

Product Name: Commercial General Liability SERFF Tr Num: FARL-125673638 State: Arkansas

TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: EFT \$50

Made/Occurrence

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: A-2008JSCZ-7ETRXH State Status: Fees verified and received

Filing Type: Rate/Rule

Co Status: Submitted

Reviewer(s): Betty Montesi, Edith Roberts

Author: Deb Weerd

Disposition Date: 06/12/2008

Date Submitted: 05/30/2008

Disposition Status: Exempt from Review

Effective Date Requested (New): 10/01/2008

Effective Date (New):

Effective Date Requested (Renewal): 10/01/2008

Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: AR GL Advisory Prospective LC Revision

Status of Filing in Domicile:

Project Number: A-2008JSCZ-7ETRXH

Domicile Status Comments:

Reference Organization: ISO

Reference Number: GL-2008-BGL1

Reference Title: Premises/Operations & Products/Completed Operations

Advisory Org. Circular: LI-GL-2008-073

Filing Status Changed: 06/12/2008

Deemer Date:

State Status Changed: 06/12/2008

Corresponding Filing Tracking Number: A-2008JSCZ-7ETRXH

Filing Description:

GL-2008-BGL1 has been revised. We are retaining our loss cost multipliers. We are asking for an effective date of 10/1/08 for new and renewal business.

We are also revising and adding new exception rules to our manual. We are asking for an effective date of 10/1/08 for new and renewal business.

SERFF Tracking Number: FARL-125673638 State: Arkansas  
 First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: A-2008JSCZ-7ETRXH  
 TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
 Product Name: Commercial General Liability  
 Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Company and Contact

### Filing Contact Information

Deb Vande Weerd, State Filing Analyst dvandewe@nationwide.com  
 1100 Locust Street (515) 508-3447 [Phone]  
 Des Moines, IA 50391-3030 (515) 508-3694[FAX]

### Filing Company Information

Farmland Mutual Insurance Company CoCode: 13838 State of Domicile: Iowa  
 1100 Locust Street Group Code: 140 Company Type: Mutual  
 Dept 3030  
 Des Moines, IA 50391-3030 Group Name: State ID Number:  
 (515) 508-3618 ext. [Phone] FEIN Number: 42-0618271  
 -----

Nationwide Agribusiness Insurance Company CoCode: 28223 State of Domicile: Iowa  
 1100 Locust Street Group Code: 140 Company Type: Stock  
 Dept 3030  
 Des Moines, IA 50391-3030 Group Name: State ID Number:  
 (515) 508-3618 ext. [Phone] FEIN Number: 42-1015537  
 -----

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: 1 x \$50.00 = \$50.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Farmland Mutual Insurance Company	\$50.00	05/30/2008	20597407
Nationwide Agribusiness Insurance Company	\$0.00	05/30/2008	

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Exempt from Review	Edith Roberts	06/12/2008	06/12/2008

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Disposition

Disposition Date: 06/12/2008

Effective Date (New):

Effective Date (Renewal):

Status: Exempt from Review

Comment:

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

SERFF Tracking Number: FARL-125673638 State: Arkansas  
 First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
 Company Tracking Number: A-2008JSCZ-7ETRXH  
 TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
 Product Name: Commercial General Liability  
 Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

Item Type	Item Name	Item Status	Public Access
Supporting Document	Manual Pages	Accepted for Informational Purposes	Yes
Supporting Document	Filing Memo	Accepted for Informational Purposes	Yes
Supporting Document	NAIC LC Date Entry Document	Accepted for Informational Purposes	Yes
Supporting Document	P & C Transmittal Document	Accepted for Informational Purposes	Yes
Supporting Document	Rate/rule Filing Schedule	Accepted for Informational Purposes	Yes
Supporting Document	NAIC LC Filing Document	Accepted for Informational Purposes	Yes

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

## Supporting Document Schedules

<b>Satisfied -Name:</b> Manual Pages	<b>Review Status:</b> Accepted for Informational Purposes	06/12/2008
<b>Comments:</b>		
<b>Attachment:</b> AR CGL Manual Pages100108.pdf		
<b>Satisfied -Name:</b> Filing Memo	<b>Review Status:</b> Accepted for Informational Purposes	06/12/2008
<b>Comments:</b>		
<b>Attachment:</b> AR Filememo 1008.pdf		
<b>Satisfied -Name:</b> NAIC LC Date Entry Document	<b>Review Status:</b> Accepted for Informational Purposes	06/12/2008
<b>Comments:</b>		
<b>Attachment:</b> F319AR_051205 NAIC LC Data Entry Document.pdf		
<b>Satisfied -Name:</b> P & C Transmittal Document	<b>Review Status:</b> Accepted for Informational Purposes	06/12/2008
<b>Comments:</b>		
<b>Attachment:</b> F777AR_021307 P&C Transmittal Document.pdf		
<b>Satisfied -Name:</b> Rate/rule Filing Schedule	<b>Review Status:</b> Accepted for Informational Purposes	06/12/2008
<b>Comments:</b>		
<b>Attachment:</b>		

*SERFF Tracking Number:* FARL-125673638                      *State:* Arkansas  
*First Filing Company:* Farmland Mutual Insurance Company, ...                      *State Tracking Number:* EFT \$50  
*Company Tracking Number:* A-2008JSCZ-7ETRXH  
*TOI:* 17.0 Other Liability - Claims Made/Occurrence                      *Sub-TOI:* 17.0001 Commercial General Liability  
*Product Name:* Commercial General Liability  
*Project Name/Number:* AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

F779AR\_021307 RateRule Filing Schedule.pdf

SERFF Tracking Number: FARL-125673638 State: Arkansas  
First Filing Company: Farmland Mutual Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: A-2008JSCZ-7ETRXH  
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability  
Product Name: Commercial General Liability  
Project Name/Number: AR GL Advisory Prospective LC Revision/A-2008JSCZ-7ETRXH

**Satisfied -Name:** NAIC LC Filing Document

**Review Status:**

Accepted for Informational 06/12/2008  
Purposes

**Comments:**

**Attachment:**

F843AR\_010906 NAIC LC Filing Document.pdf

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Experience Rating Plan**

The company Expected Loss Ratio (ELR) is: **0.648**

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Composite Rating Plan**

The company Expected Loss Ratio (ELR) is: **0.648**

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Retrospective Rating Plan**

The company Expected Loss Ratio (ELR) is: **0.648**

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Retrospective Rating Plan - Tax Multiplier**

The company Tax Multiplier is: **1.027**

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**                      **Effective: 10/01/08**

Completes the "refer to company" portion of the ISO rule.

**Section 1 - General Rules**

**1. D. Company Rates/ISO Loss Costs**

Replace Paragraph 3. Loss Cost Conversion with:

ISO Loss Costs displayed on the State/Loss Cost pages are to be multiplied by the following factor to develop the rate:

	<u>Agribusiness Accounts</u>	<u>Non-Agribusiness Accounts</u>
Nationwide Agribusiness Ins Co	<b>1.244</b>	<b>1.742</b>
Farmland Mutual Ins Co	<b>1.494</b>	<b>1.991</b>

These factors are multiplicative factors and should be applied to the base loss costs prior to any other factors; e.g., increased limits, deviations. Loss cost multipliers do NOT apply to the rates and minimum premiums shown on company exception pages.

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**                      **Effective: 10/01/08**

Additional rules apply to the ISO CGL

**Rule I. Crop Application (100/200 base limit)**

Note: This coverage may be sub-limited to less than the selected policy limits.

**A. Coverage Minimum Deductible:**

All Crop Application coverage is subject to a minimum deductible of:                      \$500

**B. Class Codes**

a. Chemical Application (Herbicide/Pesticide)

Crop Value per Acre	Class Code	Rate Basis	Loss Cost	ISO Increased Limits Table
\$500 and less	73911	1,000 acres	42.200	C
\$501 - 2,000	73912	1,000 acres	49.080	C
\$2,001 - 5,000	73914	1,000 acres	56.210	C
\$5,001 and above	73915	1,000 acres	(A)	C

(A) = Refer to Company

- b. Fertilizer Application                      73913      1,000 acres      30.910                      B
- c. Coverage Minimum Premium      73918      Premium      N/A                      N/A  
 (For Chemical/Fertilizer)
- d. Non-Owned Aircraft Charge      73919      Premium      74.920                      C

1. Follow normal ISO rules for obtaining premiums for: a. Chemical Application; b. Fertilizer Application; and d. Non-Owned Aircraft Charge.
2. Sum the premiums for a. Chemical Application and b. Fertilizer Application.
3. Applies to states that have a coverage minimum premium:
  - a. Calculate the adjustment to Coverage Minimum Premium by subtracting the premium obtained in Step 2 from the Coverage Minimum Premium.
  - b. If the balance obtained in Step 3a is less than or equal to zero, then no additional premium is charged.
  - c. If the balance obtained in Step 3a is greater than zero, then the balance is the adjustment to the Coverage Minimum Premium.
4. Calculate the total Crop Application Premium.
  - For states without a coverage minimum premium: Sum the premium from Step 2 and the Non-Owned Aircraft Charge.
  - For states with a coverage minimum premium: Sum the premiums from Step 2, Step 3a, and the Non-Owned Aircraft Charge.

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
 FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

These are loss costs and subject to company deviations, loss cost multipliers and ISO rating rules.

**Rule X: Specific Classification Loss Costs - (100/200 base limit)**

Description	Class Code	Rate Basis	Premise Loss Cost	Products Loss Cost	ISO Increased Limits Tables
Poultry Hatcheries	76760	same as ISO Class Code 53377	same as ISO Class Code 53377	same as ISO Class Code 53377	2A
Poultry Producers - Growers	76761	same as ISO Class Code 53377	same as ISO Class Code 53377	same as ISO Class Code 53377	2A
Egg Processing - Whole (Does not include egg breaking)	76762	same as ISO Class Code 53377	same as ISO Class Code 53377	same as ISO Class Code 53377	2A
Egg Processing - Includes Egg Breaking	76763	same as ISO Class Code 53377	same as ISO Class Code 53377	same as ISO Class Code 53377	2A
Nut Hulling - Including Shelling & Limited Processing	73374	same as ISO Class Code 53374	same as ISO Class Code 53374	same as ISO Class Code 53374	2A
NH3 - Anhydrous Ammonia Dealers and Distributors	70036	Per Ton	0.608	0.507	2C

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
 FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**                      **Effective: 10/01/08**

**Rule AA. Seedmans Coverage Program - (100/200 base limit)**

Note: This coverage may be sub-limited to less than the selected policy limits.

These are loss costs and subject to company deviations, loss cost multipliers and ISO rating rules.

<b>Description</b>	<b>Class Code</b>	<b>Rate Basis</b>	<b>Premise Loss Cost</b>	<b>Products Loss Cost</b>	<b>ISO Increased Limits Table</b>
Seedmans - Erroneous delivery, error in mixture and resulting germination failure	76891	Per \$1,000 Sales	Same as ISO Class Code 16891	0.616	2C
Seedmans - Erroneous delivery and error in mixture (excluding germination failure)	76892	Per \$1,000 Sales	Same as ISO Class Code 16892	0.298	2C

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Rule BB. Liquefied Petroleum Gas (LPG) Program - (100/200 base limit)**

**A. Additional LPG class codes:**

These are loss costs and subject to company deviations, loss cost multipliers and ISO rating rules.

Description	Class Code	Rate Basis	Premise Loss Cost	Products Loss Cost	ISO Increased Limits Tables	Products Minimum Premium
LPG Bottle Fill Only	73416	Per 1,000 Gallons	Same as ISO Class Code 13410	Same as ISO Class Code 13410	2C	\$1,000 *
LPG Bottle Exchange Only	73415	Per 1,000 Gallons	Same as ISO Class Code 13410	Same as ISO Class Code 13410	2C	N/A

\* If the calculated products-completed operations premium for Class Code 73416 is less than the minimum premium, charge the minimum premium.

**B. LPG Coverage Minimum Premiums:**

The LPG Class Codes of 13410, 13411, 13412 & 95648 are subject to the following minimum premiums:

Premise-Operations Coverage Minimum Premium	\$300
Products-Completed Operations Coverage Minimum Premium	\$5,000

Premium Determination:

1. Sum the premiums obtained for Class Codes 13410, 13411, 13412 & 95648 to obtain the LPG premium subject to the minimum premiums.
2. If the calculated premiums from Step 1 are less than the minimum premiums, charge the minimum premiums.

**C. Coverage Minimum Deductible:**

All LPG coverage is subject to a minimum deductible of: \$1,000

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Rule CC. Agricultural Consultant's Coverage Endorsement**

These are final rates and not subject to company deviations and loss cost multipliers.

<b>Description</b>	<b>Class Code</b>	<b>Rating Basis / Rate</b>
Crop Consulting	73150	0.5% to 5% of Products/Completed Operations Premium
Soil Consulting	73151	0.5% to 5% of Products/Completed Operations Premium
Farm Management Consulting	73152	0.5% to 5% of Products/Completed Operations Premium
Coverage Minimum Premium	N/A	\$250

**Premium Determination:**

1. Multiply the applicable percentage factor for each coverage selected by the total general liability products/completed operations premium after application of all rating factors; round to the nearest dollar.
2. Sum the premiums from Step 1 and compare to the coverage minimum premium.
3. If the sum of the consulting premiums from Step 2 is less than the minimum premium, charge the minimum premium.

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Rule DD. Fire Legal Liability - Increased Limits**

These are final rates and not subject to company deviations and loss cost multipliers.

**Class Code:** 79402

**Rating Basis:** Percentage of Premise/Operations premium

<b>Per Occurrence Increased Limit Option</b>	<b>Premium Factor</b>
300,000	0.3%
500,000	0.5%
1,000,000	1.0%

Multiply the applicable percentage factor for each coverage selected by the total general liability premise/operations premium after application of all rating factors; round to the nearest dollar.

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Rule EE. Failure to Supply Coverage**

These are final rates and not subject to company deviations and loss cost multipliers.

**Class Code:** 79710

**Rating Basis:** Flat Charge

**Rate:** \$250

NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY

**Commercial General Liability**

(Not Applicable to Farmowners Program)

**ARKANSAS**

**Effective: 10/01/08**

**Rule FF. Florists Errors and Omissions - (100/200 base limit)**

These are loss costs and subject to company deviations, loss cost multipliers and ISO rating rules.

<b>Description</b>	<b>Class Code</b>	<b>Rate Basis</b>	<b>Premise Loss Cost</b>	<b>Products Loss Cost</b>	<b>ISO Increased Limits Table</b>
Florists Errors and Omissions	73155	Per \$1,000 Sales	N/A	0.213	A

**NATIONWIDE AGRIBUSINESS INSURANCE COMPANY  
FARMLAND MUTUAL INSURANCE COMPANY**

**FILING MEMORANDUM**

**Commercial General Liability  
Arkansas**

**Circular:**

**LI-GL-2008-073**

**Proposed Effective Date:**

**10/01/2008 new** and renewal business.

**Loss Cost Multipliers:**

Retaining Current LCMs

Nationwide Agribusiness Insurance Company	
Agribusiness	<b>1.244</b>
NonAgribusiness	<b>1.742</b>
Farmland Mutual Insurance Company	
Agribusiness	<b>1.494</b>
NonAgribusiness	<b>1.991</b>

**Impact:**

Nationwide Agribusiness Insurance Company	<b>-0.7%</b>
Farmland Mutual Insurance Company	<b>+3.4%</b>
Overall Impact	<b>-0.5%</b>

**Additional Information (see manual pages for details):**

- Rule EXP – Revised company expected loss ratio
- Rule COM – Revised company expected loss ratio
- Rule RETRO – Revised company expected loss ratio
- Rule TAX – Updating Tax Multiplier per ISO Circular AS-GL-2007-034
- Rule R1 – Revised company Loss Cost Multipliers
- Rule I – Adding a Coverage Minimum Deductible of \$500
- Rule X – Adding class code 70036 – NH3 – Anhydrous Ammonia Dealers and Distributors, Premise and products rated per Ton.
- Rule AA – Adding Seedmans Coverage Program
- Rule BB – Adding Liquefied Petroleum Gas (LPG) Program
- Rule CC – Adding Agricultural Consultant's Coverage
- Rule DD – Adding Fire Legal Liability – Increased Limits
- Rule EE – Adding Failure to Supply Coverage
- Rule FF – Adding Florists Errors and Omissions Coverage

## NAIC LOSS COST DATA ENTRY DOCUMENT

<b>1.</b>	This filing transmittal is part of Company Tracking #	A-2008JSCZ-7ETRXH
<b>2.</b>	If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number	ISO Ref #GL-2008-BGL1
Company Name		Company NAIC Number
<b>3.</b>	<b>A.</b> Nationwide Insurane	<b>B.</b> 140
Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
<b>4.</b>	<b>A.</b> Commercial General Liability	<b>B.</b>

**5.**

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				(H) Co. C Loss Mul
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	
NWAG Ag	-0.4%	-0.7%	64.8%	0.881	1.244		1.208
NWAG NonAg	-0.4%	-0.7%	64.8%	1.233	1.742		1.691
FMIC Ag	-0.4%	3.4%	64.8%	1.058	1.494		1.450
FMIC NonAg	-0.4%	3.4%	64.8%	1.4095	1.991		1.933
<b>TOTAL OVERALL EFFECT</b>	-0.4%	-0.5%					

**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	48	-2.2	3/1/2008	444,181	82,924	18.7%	46.2%
2006	33	0.0	1/1/2007	415,493	77,473	18.6%	45.5%
2005	17	6.1	10/1/2005	204,705	90,005	44.0%	33.8%
2004	4	0.0	10/1/2004	54,803	0		39.7%
2003	2	0.0	10/1/2003	41,491	0		23.8%

**7.**

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

**8.** y Apply Lost Cost Factors to Future filings? (Y or N)

**9.** 7.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): \_\_\_\_\_

**10.** -13.6% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): \_\_\_\_\_

PC RLC

--

--

--

e)
----

--

H) Current s Cost tiplier
------------------------------------

--

--

--

--

--

--

Selected Provisions
------------------------

20.4
------

4.5
-----

2.7
-----

1.6
-----

--

29.2
------

## Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>
	a. Date the filing is received:
	b. Analyst:
	c. Disposition:
	d. Date of disposition of the filing:
	e. Effective date of filing:
	New Business
	Renewal Business
	f. State Filing #:
	g. SERFF Filing #:
	h. Subject Codes

<b>3. Group Name</b>	<b>Group NAIC #</b>
Nationwide Insurance	140

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Nationwide Agribusiness Insurance Company	Iowa	28223	42-1015537	14
Farmland Mutual Insurance Company	Iowa	13838	42-0618271	14

<b>5. Company Tracking Number</b>	<b>A-2008JSCZ-7ETRXH</b>
-----------------------------------	--------------------------

**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Debra A VandeWeerd	State Filing Analyst	515-508-3447	(515) 508-3694	<a href="mailto:dvandewe@nationwide.com">dvandewe@nationwide.com</a>
7.	Signature of authorized filer		<i>Debra A Vande Weerd</i>		
8.	Please print name of authorized filer		Debra A VandeWeerd		

**Filing information** (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	General Liability
10. Sub-Type of Insurance (Sub-TOI)	Liability
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Commercial General Liability
13. Filing Type	<input checked="" type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: October 1, 2008      Renewal: October 1, 2008
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO
17. Reference Organization # & Title	GL-2008-BGL1      Premises/Operations & Products/Complete
18. Company's Date of Filing	March 5, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

**Property & Casualty Transmittal Document—**

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>A-2008JSCZ-7ETRXH</b>
------------	--	--------------------------

<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
------------	--

**Circular:** [LI-GL-2008-073](#)

**Proposed Effective Date:** [10/01/2008 new](#) and renewal business.

**Loss Cost Multipliers:**

Retaining Current LCMs

Nationwide Agribusiness Insurance Company	
Agribusiness	1.244
NonAgribusiness	1.742
Farmland Mutual Insurance Company	
Agribusiness	1.494
NonAgribusiness	1.991

**Impact:**

Nationwide Agribusiness Insurance Company	-0.7%
Farmland Mutual Insurance Company	+3.4%
Overall Impact	-0.5%

**Additional Information (see manual pages for details):**

- Rule EXP – Revised company expected loss ratio
- Rule COM – Revised company expected loss ratio
- Rule RETRO – Revised company expected loss ratio
- Rule TAX – Updating Tax Multiplier per ISO Circular AS-GL-2007-034
- Rule R1 – Revised company Loss Cost Multipliers
- Rule I – Adding a Coverage Minimum Deductible of \$500
- Rule X – Adding class code 70036 – NH3 – Anhydrous Ammonia Dealers and Distributors, Premise and products rated per Ton.
- Rule AA – Adding Seedmans Coverage Program
- Rule BB – Adding Liquefied Petroleum Gas (LPG) Program
- Rule CC – Adding Agricultural Consultant's Coverage
- Rule DD – Adding Fire Legal Liability – Increased Limits
- Rule EE – Adding Failure to Supply Coverage
- Rule FF – Adding Florists Errors and Omissions Coverage

--

**22. Filing Fees** (Filer must provide check # and fee amount if applicable)  
[If a state requires you to show how you calculated your filing fees, place that calculation below]

**Check #:** eft  
**Amount:** \$50.00

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

**\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

### RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

**(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)**

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	A-2008JSCZ-7ETRXH
-----------	--	-------------------

<b>2.</b>	<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	
-----------	---	--

Rate Increase  Rate Decrease  Rate Neutral (0%)

<b>3.</b>	<b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
-----------	--	--

<b>4a.</b>	<b>Rate Change by Company (As Proposed)</b>
------------	---

Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
Nationwide Agribusiness	-0.4%	-0.7%	-5,060	48	689,631	7.0%	-13.6%
Farmland Mutual	-0.4%	3.4%	1,927	8	56,969	6.9%	-0.2%

<b>4b.</b>	<b>Rate Change by Company (As Accepted) For State Use Only</b>
------------	--

Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

<b>Overall Rate Information (Complete for Multiple Company Filings only)</b>			
--	--	--	--

		COMPANY USE	STATE USE
<b>5a.</b>	<b>Overall percentage rate indication (when applicable)</b>	-0.4%	
<b>5b.</b>	<b>Overall percentage rate impact for this filing</b>	-0.5%	
<b>5c.</b>	<b>Effect of Rate Filing – Written premium change for this program</b>	-3,133	
<b>5d.</b>	<b>Effect of Rate Filing – Number of policyholders affected</b>	56	

<b>6.</b>	Overall percentage of last rate revision	-2.2
-----------	--	------

<b>7.</b>	Effective Date of last rate revision	3/1/2008
-----------	--------------------------------------	----------

<b>8.</b>	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	Exempt
-----------	--	--------

<b>9.</b>	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	Rule EXP,COM,RETRO,TAX,R1,R-I,R-X	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02	Rule AA,BB,CC,DD,EE,FF	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

**FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION**

CALCULATION OF COMPANY LOSS COST MULTIPLIER    Nationwide Agribusiness -AG

<b>This filing transmittal is part of Company Tracking #</b>	A-2008JSCZ-7ETRXH
<b>This filing corresponds to form filing number</b> <small>(Company tracking number of form filing, if applicable)</small>	

- Loss Cost Reference Filing** \_\_\_\_\_  **Independent Rate Filing**  
(Advisory Org, & Reference filing #)

**If this is a loss cost filing adopting an advisory organization’s loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.**

**1. Check one of the following:**

- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization’s prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization’s prospective loss costs and the insurer’s loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization’s prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.  
**Note: Some states have statutes that prohibit this option for some lines of business.**
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

**2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: \_\_\_\_\_**

**3. Loss cost modification:**

**A.** The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:  
 (Check One):

- Without Modification (factor = 1.000)
- With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) \_\_\_\_\_

**B.** Loss Cost Modification Expressed as a Factor: (See Examples Below)    0.881

Example 1:        Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2:        Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH “EXPENSE CONSTANT SUPPLEMENT” OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.**

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

		Selected Provisions	
A.	Total Production Expense	20.4	%
B.	General Expense	4.5	%
C.	Taxes, Licenses & Fee	2.7	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	1.6	%
E.	Other (explain)		%
F.	Total	29.2	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	70.8	%
	B.	ELR in Decimal Form =	0.708	
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.244	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.244	
8.		Rate Level Change for the coverage(s) to which this page applies	-0.7	%

**FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION**

CALCULATION OF COMPANY LOSS COST MULTIPLIER Nationwide Agribusiness - NonAG

<b>This filing transmittal is part of Company Tracking #</b>	A-2008JSCZ-7ETRXH
<b>This filing corresponds to form filing number</b> <small>(Company tracking number of form filing, if applicable)</small>	

- Loss Cost Reference Filing** \_\_\_\_\_  **Independent Rate Filing**  
(Advisory Org, & Reference filing #)

**If this is a loss cost filing adopting an advisory organization’s loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.**

**1. Check one of the following:**

- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization’s prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization’s prospective loss costs and the insurer’s loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization’s prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.  
**Note: Some states have statutes that prohibit this option for some lines of business.**
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

**2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: \_\_\_\_\_**

**3. Loss cost modification:**

**A.** The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:  
 (Check One):

- Without Modification (factor = 1.000)
- With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) \_\_\_\_\_

**B.** Loss Cost Modification Expressed as a Factor: (See Examples Below) 1.233

Example 1: Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2: Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH “EXPENSE CONSTANT SUPPLEMENT” OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.**

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

		Selected Provisions	
A.	Total Production Expense	20.4	%
B.	General Expense	4.5	%
C.	Taxes, Licenses & Fee	2.7	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	1.6	%
E.	Other (explain)		%
F.	Total	29.2	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	70.8	%
	B.	ELR in Decimal Form =	0.708	
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.742	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.742	
8.		Rate Level Change for the coverage(s) to which this page applies	-0.7	%

**FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION**

CALCULATION OF COMPANY LOSS COST MULTIPLIER    Farmland Mutual Insurance - AG

<b>This filing transmittal is part of Company Tracking #</b>	A-2008JSCZ-7ETRXH
<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	

**Loss Cost Reference Filing** \_\_\_\_\_  **Independent Rate Filing**  
(Advisory Org, & Reference filing #)

**If this is a loss cost filing adopting an advisory organization's loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.**

**1. Check one of the following:**

- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.  
**Note: Some states have statutes that prohibit this option for some lines of business.**
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

**2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: \_\_\_\_\_**

**3. Loss cost modification:**

**A.** The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:

(Check One):

- Without Modification (factor = 1.000)
- With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) \_\_\_\_\_

**B.** Loss Cost Modification Expressed as a Factor: (See Examples Below)    1.058

Example 1:        Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2:        Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.**

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

		Selected Provisions	
A.	Total Production Expense	20.4	%
B.	General Expense	4.5	%
C.	Taxes, Licenses & Fee	2.7	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	1.6	%
E.	Other (explain)		%
F.	Total	29.2	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	70.8	%
	B.	ELR in Decimal Form =	0.708	
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.494	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.494	
8.		Rate Level Change for the coverage(s) to which this page applies	3.4	%

**FORM RF2-Reference filing abstract NAIC LOSS COST FILING DOCUMENT—OTHER THAN WORKERS' COMPENSATION**

CALCULATION OF COMPANY LOSS COST MULTIPLIER    Farmland Mutual Insurance - NonAG

<b>This filing transmittal is part of Company Tracking #</b>	A-2008JSCZ-7ETRXH
<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	

**Loss Cost Reference Filing** \_\_\_\_\_  **Independent Rate Filing**  
(Advisory Org, & Reference filing #)

**If this is a loss cost filing adopting an advisory organization's loss costs, the above insurer hereby declares that it is a member, subscriber or service purchaser of the named advisory organization for this line of insurance. The insurer hereby files (to be deemed to have independently submitted as its own filing) the prospective loss costs in the captioned Reference Filing. The insurer's rates will be the combination of the prospective loss costs and the loss cost multipliers and, if utilized, the expense constants specified in the attachments.**

**1. Check one of the following:**

- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable to future revisions of the advisory organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the advisory organization's prospective loss costs and the insurer's loss cost multipliers and if utilized, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the advisory organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or until amended or withdrawn by the insurer.  
**Note: Some states have statutes that prohibit this option for some lines of business.**
- The insurer hereby files to have its loss cost multipliers and, if utilized, expense constants be applicable only to the above Advisory Organization Reference Filing.

**2. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies: \_\_\_\_\_**

**3. Loss cost modification:**

**A.** The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:

(Check One):

- Without Modification (factor = 1.000)
- With the following modification(s). (Cite the nature and percent modification, and attach supporting data and/or rationale for the modification.) \_\_\_\_\_

**B.** Loss Cost Modification Expressed as a Factor: (See Examples Below)    1.4095

Example 1:        Loss cost Modification Factor: If your company's loss cost modification is -10%, a factor of .90 (1.000 - .100) should be used.

Example 2:        Loss cost Modification Factor: If your company's loss cost modification is =15%, a factor of 1.15 (1.000 + .150) should be used.

**NOTE: IF EXPENSE CONSTANTS ARE UTILIZED ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 4-8 BELOW.**

4. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information.)

		Selected Provisions	
A.	Total Production Expense	20.4	%
B.	General Expense	4.5	%
C.	Taxes, Licenses & Fee	2.7	%
D.	Underwriting profit & Contingencies (explain how investment income is taken into account)	1.6	%
E.	Other (explain)		%
F.	Total	29.2	%

5.	A.	Expected Loss Ratio: $ELR = 100\% - 4F = A$	70.8	%
	B.	ELR in Decimal Form =	0.708	
6.		Company Formula Loss Cost Multiplier (3B/5B)	1.991	
7.		Company Selected Loss Cost Multiplier = (Attach explanation for any differences between 6 and 7)	1.991	
8.		Rate Level Change for the coverage(s) to which this page applies	3.4	%