

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

1.	This filing transmittal is part of Company Tracking #	ER-0610
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. Encompass Insurance Company of America	B.	008-10071

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. 04.0 Homeowners	B.	04.0000 Homeowners Sub-TOI Combinations

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
Home	4.4%	4.4%					
Condo	4.2%	4.2%					
Renter	4.2%	4.2%					
Dwelling Fire	20.9%	14.0%					
Other Than Auto Balance	-8.6%	0.0%		By bharrington at 7:59 am, 10/15/07			
TOTAL OVERALL EFFECT	4.7%	4.7%		PROPERTY & CASUALTY			

FILED

ARKANSAS INSURANCE DEPARTMENT

6. 5 Year History Rate Change History

Year	Policy Count (Earned Exposures)	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2002	5125	13.1%	8/15	3466	1967	56.8%	39.5%
2003	4347	19.8%	8/15	3457	1375	39.8%	38.0%
2004	3338	12.3%	9/28	3348	851	25.4%	29.3%
2005	3323	19.8%	8/15	3202	508	15.9%	25.1%
2006	2428	13.1%	8/15	2646	649	24.5%	23.0%
2007 <small>* as of 6/30/07</small>	1205	9.0%	8/15	1503	176	11.7%	13.1%

7.

Expense Constants	Selected Provisions
A. Total Production Expense	16.8%
B. General Expense	7.6%
C. Taxes, License & Fees	2.8%
D. Underwriting Profit & Contingencies	9.1%
E. Other (explain)	Other Acq. 0.9%
F. TOTAL	34.4%

8. N Apply Lost Cost Factors to Future filings? (Y or N)
9. Home 4.4%
DFire 14.0% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): N/A
10. N/A Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable): N/A