

## Filing at a Glance

Companies: Hanover American Insurance Company, Massachusetts Bay Insurance Company, The Hanover Insurance Company

Product Name: Commercial Crime and Fidelity	SERFF Tr Num: HNVR-125239467	State: Arkansas
TOI: 26.0 Burglary & Theft	SERFF Status: Closed	State Tr Num: AR-PC-07-025527
Sub-TOI: 26.0001 Commercial Burglary & Theft	Co Tr Num: CR-AR-07387-01F	State Status:
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
	Author: Michele Holm	Disposition Date: 07-27-2007
	Date Submitted: 07-20-2007	Disposition Status: Approved
Effective Date Requested (New): 11-01-2007		Effective Date (New): 11-01-2007
Effective Date Requested (Renewal): 11-01-2007		Effective Date (Renewal): 11-01-2007

## General Information

Project Name: Commercial Crime and Fidelity	Status of Filing in Domicile:
Project Number: CR-AR-07387-01F	Domicile Status Comments:
Reference Organization: ISO	Reference Number: CR-2005-OMF05
Reference Title: Crime and Fidelity Multistate Forms Revision to be implemented in various jurisdictions	Advisory Org. Circular: LI-CR-2006-001
Filing Status Changed: 07-27-2007	
State Status Changed: 07-23-2007	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Effective November 1, 2007, for new and renewal policies, our companies wish to adopt the Crime and Fidelity Multistate Forms Revision found in ISO Filing Designation Number CR-2005-OMF05.	

The rules associated with this filing have been filed as a desk filing under our filing number CR-AR-07387-01R, as these types of filings are exempt from the filing requirements.

## Company and Contact

### Filing Contact Information

Michele Holm, Senior Pricing Analyst  
440 Lincoln Street  
Worcester, MA 01653

Mholm@hanover.com  
(508) 855-4221 [Phone]  
(508) 855-4786[FAX]

### Filing Company Information

Hanover American Insurance Company  
440 Lincoln Street

CoCode: 36064  
Group Code: 88

State of Domicile: New Hampshire  
Company Type: Property &  
Casualty

Worcester, MA 01653

Group Name: The Hanover Ins  
Group

State ID Number:

(508) 855-1000 ext. [Phone]

FEIN Number: 04-3063898  
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Massachusetts Bay Insurance Company  
440 Lincoln Street

CoCode: 22306  
Group Code: 88

State of Domicile: New Hampshire  
Company Type: Property &  
Casualty

Worcester, MA 01653

Group Name: The Hanover Ins  
Group

State ID Number:

(508) 855-1000 ext. [Phone]

FEIN Number: 04-2217600  
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The Hanover Insurance Company  
440 Lincoln Street

CoCode: 22292  
Group Code: 88

State of Domicile: New Hampshire  
Company Type: Property &  
Casualty

Worcester, MA 01653

Group Name: The Hanover Ins  
Group

State ID Number:

(508) 855-1000 ext. [Phone]

FEIN Number: 13-5129825  
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## Filing Fees

Fee Required? Yes  
Fee Amount: \$20.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
0021567081	\$20.00	07-20-2007

## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved	Llyweyia Rawlins	07-27-2007	07-27-2007

## **Disposition**

Disposition Date: 07-27-2007

Effective Date (New): 11-01-2007

Effective Date (Renewal): 11-01-2007

Status: Approved

Comment:

Rate data does NOT apply to filing.

Created by SERFF on 07-27-2007 09:20 AM

<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Uniform Transmittal Document-Property & Approved Casualty		Yes

## **Rate Information**

Rate data does NOT apply to filing.

## Supporting Document Schedules

<b>Satisfied -Name:</b>	Uniform Transmittal Document- Property & Casualty	<b>Review Status:</b> Approved	07-27-2007
<b>Comments:</b>			
<b>Attachment:</b>			
PC -TD1 06.pdf			

## Property & Casualty Transmittal Document (Revised 1/1/06)

<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.</b>	<b>Group Name</b>	<b>Group NAIC #</b>
	The Hanover Insurance Group	0088

4.	Company Name(s)	Domicile	NAIC #	FEIN #
	Hanover Insurance Company	NH	22292	13-5129825
	Massachusetts Bay Insurance Company	NH	22306	04-2217600
	Hanover American Insurance Company	NH	36064	04-3063898

<b>5.</b>	<b>Company Tracking Number</b>	CR-AR-07387-01F
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Michele L. Holm 440 Lincoln St. Worcester, Ma 01653	Sr. Pricing Analyst	508-855-4221	508-855-2268	<a href="mailto:mholm@hanover.com">mholm@hanover.com</a>

7.	Signature of authorized filer	<i>Michele L. Holm</i>
8.	Please print name of authorized filer	Michele L. Holm

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

9.	<b>Type of Insurance (TOI)</b>	Burglary & Theft and Fidelity
10.	<b>Sub-Type of Insurance (Sub-TOI)</b>	Burglary & Theft and Fidelity
11.	<b>State Specific Product code(s)</b> (if applicable)[See State Specific Requirements]	
12.	<b>Company Program Title</b> (Marketing title)	Crime & Fidelity
13.	<b>Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input checked="" type="checkbox"/> Other Non-adoption
14.	<b>Effective Date(s) Requested</b>	New: _____ Renewal: _____
15.	<b>Reference Filing?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	<b>Reference Organization</b> (if applicable)	ISO
17.	<b>Reference Organization # &amp; Title</b>	CR-2005-OMF05
18.	<b>Company's Date of Filing</b>	07/20/2007
19.	<b>Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

## Property & Casualty Transmittal Document---

<b>20. This filing transmittal is part of Company Tracking #</b>	CR-AR-07387-01F
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<b>21. Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Effective November 1, 2007, for new and renewal policies, our companies wish to adopt the Crime and Fidelity Multistate Forms Revision found in ISO Filing Designation Number CR-2005-OMF05.

The rules associated with this filing have been filed as a desk filing under our filing number CR-AR-07387-01R, as these types of filings are exempt from the filing requirements.

<b>22. Filing Fees</b> (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]
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Check #:   
Amount:

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.)