

Filing at a Glance

Company: Sentry Select Insurance Company

Product Name: NON-PASSENGER MOTOR CARRIER PROGRAM SERFF Tr Num: SEPX-125229093 State: Arkansas

CARRIER PROGRAM

TOI: 20.0 Commerical Auto

SERFF Status: Closed

State Tr Num: AR-PC-07-025399

Sub-TOI: 20.0004 Truckers

Co Tr Num: CA AR06999TRF01

State Status:

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,
Llyweyia Rawlins, Brittany Yielding

Author: SPI SentryInsurancePC

Disposition Date: 07-13-2007

Date Submitted: 07-10-2007

Disposition Status: Approved

Effective Date Requested (New): 10-01-2007

Effective Date (New): 10-01-2007

Effective Date Requested (Renewal): 10-01-2007

Effective Date (Renewal): 10-01-
2007

General Information

Project Name: SS-TR ENHANCEMENT PROJECT

Status of Filing in Domicile:

Project Number: CA AR06999TRF01

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 07-13-2007

State Status Changed: 07-11-2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Sentry Select Insurance Company is filing enhancements and/or revisions to its Motor Carrier - Non-Passenger Commercial Auto Program. These changes impact a number of endorsements as well as the company exception rule pages.

As part of the program changes for the Sentry Select Motor Carrier Non-passenger program we are filing to replace our current Motor Carrier Non-passenger Program Commercial Auto company rule pages. In addition to new coverage enhancements and certain revisions to rates, we are revising the organization of the rules to follow the format used in our other companies or operations. This would include the use of independent Common Rules, State Rule Exceptions to the ISO or company Common Rules and state specific Company Rate or Loss Cost pages.

Our intention was to replace all of the Motor Carrier - Non-passenger Program current rule and rate/loss cost exception pages with the exception of the Schedule Rating Page. The format of company rules and rate pages is revised, but the actual intent of the rules or the rate levels has not changed.

Company and Contact

Filing Contact Information

Lori Daul, Product Compliance/Development - lori.daul@sentry.com

Sr. Analyst

1800 North Point Drive

(715) 346-7080 [Phone]

Stevens Point, WI 54481

(715) 346-6044[FAX]

Filing Company Information

Sentry Select Insurance Company

CoCode: 21180

State of Domicile: Wisconsin

1800 North Point Drive

Group Code: 169

Company Type:

Stevens Point, WI 54481

Group Name: Sentry Insurance

State ID Number:

Group

(715) 346-6000 ext. [Phone]

FEIN Number: 36-2674180

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sentry Select Insurance Company	\$50.00	07-10-2007	14544515

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	07-13-2007	07-13-2007

Disposition

Disposition Date: 07-13-2007

Effective Date (New): 10-01-2007

Effective Date (Renewal): 10-01-2007

Status: Approved

Comment:

Rate data does NOT apply to filing.

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes
Supporting Document	AR - FORM FILING ABSTRACT F-1, AR - CERTIFICATE OF COMPLIANCE - (AID PC SelfCert (4/30/03))	Approved	Yes
Supporting Document	FORM FILING MEMO	Approved	Yes
Supporting Document	old to new CA 85 02 06 07, old to new CA 85 04 06 07, old to new IL 100 06 07	Approved	Yes
Form	Pollution Liability - Broadened Coverage For Covered Autos	Approved	Yes
Form	Physical Damage Coverage - Downtime	Approved	Yes
Form	Truckers Insurance - Non-Trucking Use - Unladen Liability	Approved	Yes
Form	Physical Damage Coverage - Extension of Coverage	Approved	Yes
Form	Single Deductible Endorsement	Approved	Yes

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Pollution Liability - Broadened Coverage For Covered Autos	CA 85 01 06 07	06/07	Endorsement/Amendment/Conditions New		0.00	CA 85 01 06 07.PDF
Approved	Physical Damage Coverage - Downtime	CA 85 02 06 07	06/07	Endorsement/Amendment/Conditions New		0.00	CA 85 02 06 07.PDF
Approved	Truckers Insurance - Non-Trucking Use - Unladen Liability	CA 85 03 06 07	06/07	Endorsement/Amendment/Conditions New		0.00	CA 85 03 06 07.PDF
Approved	Physical Damage Coverage - Extension of Coverage	CA 85 04 06 07	06/07	Endorsement/Amendment/Conditions New		0.00	CA 85 04 06 07.PDF
Approved	Single Deductible Endorsement	IL 100 06 07	06/07	Endorsement/Amendment/Conditions Replaced	IL 100	0.00	IL 100 06 07.PDF

POLLUTION LIABILITY – BROADENED COVERAGE FOR COVERED AUTOS

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- MOTOR CARRIER COVERAGE FORM
- TRUCKERS COVERAGE FORM

SCHEDULE

Limit Of Liability – Broadened Pollution Coverage: \$

(If no entry is shown above, information required to complete this endorsement shall be shown in the Declarations as applicable to the endorsement).

A. Liability Coverage is changed as follows:

1. Paragraph **a.** of the **Pollution** Exclusion applies only to liability assumed under a contract or agreement.
2. With respect to the coverage afforded by Paragraph **A.1.** above:
 - a. Exclusion **B.6. Care, Custody Or Control** does not apply.
 - b. The following is added to paragraph **C. Limit Of Insurance**:

Regardless of the number of covered “autos”, “insureds”, premiums paid, claims made or vehicles involved in the “accident” and subject to the Limit Of Insurance for Liability Coverage shown in the Declarations, the most we will pay for “bodily injury”, “property damage” or “covered pollution cost or expense” shall be the Limit Of Liability – Broadened Pollution Coverage shown in the Schedule of this endorsement or in the Declarations.

The amounts we pay under this endorsement are part of and not in addition to the Limit Of Insurance For Liability Coverage.

B. Changes In Definitions

For the purposes of this endorsement, Paragraph **D.** of the **Definitions** Section is replaced by the following:

- D.** “Covered pollution cost or expense” means any cost or expense arising out of:
 1. Any request, demand, order or statutory or regulatory requirement that any “insured” or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the affects of “pollutants”; or

Complete only when this endorsement is not prepared with the policy or is not to be effective with the policy.		
Policy No:	Issued to:	Effective Date:
Countersigned By:		

- 2.** Any claims or “suit” by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to or assessing the effects of “pollutants”.

“Covered pollution cost or expense” does not include any cost or expense arising out of the actual, alleged, or threatened discharge, dispersal, seepage, migration, release or escape of “pollutants”:

- a.** Before the “pollutants” or any property in which the “pollutants” are contained are moved from the place where they are accepted by the “insured” for movement into or onto the covered “auto”; or
- b.** After the “pollutants” or any property in which the “pollutants” are contained are moved from the covered “auto” to the place where they are finally delivered, disposed of or abandoned by the “insured”.

Paragraphs **a.** and **b.** above do not apply to “accidents” that occur away from premises owned by or rented to an “insured” with respect to “pollutants” not in or upon a covered “auto” if:

- (1)** The “pollutants” or any property in which the “pollutants” are contained are upset, overturned or damaged as a result of the maintenance or use of a covered “auto”; and
- (2)** The discharge, dispersal, seepage, migration, release or escape of the “pollutants” is caused directly by such upset, overturn or damage.

All other terms and provisions of this policy remain unchanged.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - DOWNTIME

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Item **A. COVERAGE - PHYSICAL DAMAGE**, the following is added:

If this policy provides Physical Damage Coverage on a truck or truck tractor, and a covered "loss" occurs to that vehicle, the coverage is extended to cover, in addition to the **LIMIT OF INSURANCE** on the vehicle, the following:

COVERAGE

We will pay for "downtime" in an amount of up to a maximum of \$150 each day and a maximum of \$5,000 each "loss" subject to the following:

"Downtime" coverage will begin the later of:

1. The seventh day after the covered "loss" occurs; or
2. The seventh day after the covered "auto" is taken out of service to complete needed repairs that result from a covered "loss".

"Downtime" coverage will cease:

1. When the covered repairs are completed by the repair facility and they determine that the vehicle is road-worthy, or
2. In the event of a total "loss" to the vehicle, the claim for physical damage coverage has been settled and payment has been issued by us.

If repairs have been completed and you dispute the quality of work done by the facility, then "downtime" coverage will continue immediately after we agree to pay for certain additional repairs by the repair facility.

EXCLUSIONS

We will not pay for "loss" arising out of any dishonest or illegal act, alone or in collusion with another by you, others in the employ or service of you or any person or persons to whom the property may be entrusted.

DEFINITIONS

"Downtime" means the time a covered auto is out of service for repair and in the custody of a repair facility. "Downtime" payment is determined by taking the gross revenue generated by the covered auto and deducting all non-continuing expenses to reach the net loss of profit.

Policy No:	Issued To:	Effective:
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TRUCKERS - INSURANCE FOR NON-TRUCKING USE – UNLADEN LIABILITY

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

Description of covered "auto":

As shown in the Declarations or Vehicle Schedule

Schedule of Additional Insureds:

Liability Coverage, Uninsured Motorist Coverage, Underinsured Motorist Coverage, Personal Injury Protection Coverage, Property Protection Insurance Coverage or any other Liability Coverage provided by this policy, for a covered "auto" described in this policy, is changed as follows:

1. The following exclusion is added:

This insurance coverage does not apply to a covered "auto" used in the business of anyone to whom the auto is rented, leased or loaned. This exclusion does not apply to a covered "auto" that:

- a. Does not contain or is not carrying property of others; or
- b. Is attached to a "trailer" that does not contain or is not carrying property of others.

2. WHO IS AN INSURED does not include anyone engaged in the business of transporting property by "auto" for hire who is liable for your conduct. For Liability Coverage provided under Section II of the Business Auto Coverage Form, this does not apply to the person or organization listed in the Schedule of Additional Insureds included in this endorsement

This endorsement forms a part of and is for attachment to the following described policy issued by the company designated therein, takes effect on the effective date of said policy, unless another effective date is shown below, at the hour stated in said policy and expires concurrently with said policy.

<i>Complete Only When This Endorsement Is Not Prepared with the Policy or Is Not to be Effective with the Policy</i>		
POLICY NO.	ISSUED TO	EFFECTIVE DATE

COUNTERSIGNED BY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Paragraph **A. COVERAGE** of the **PHYSICAL DAMAGE COVERAGE** Section is amended by the addition of the following:

If this policy provides Physical Damage Coverage for a covered "auto", and a covered "loss" occurs to the covered "auto", the coverage extensions described in paragraphs 1 through 6 below will also apply. Except for Extension 5, Physical Damage For Temporary Substitute Autos, these coverage extensions will apply in addition the Limit Of Insurance that applies to the covered "auto".

1. MISCELLANEOUS EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$2,500 any one occurrence, for "loss" to hand trucks, dollies, pallets, pads, covers, tarpaulins, chains, binders or any similar equipment used in the shipping or handling of property being transported.

If the equipment is being used on a "trailer" at the time of "loss", the truck or truck tractor operating with the "trailer" must have physical damage coverage in order for this coverage to apply.

In the event of other insurance with us for the same coverage, this policy will be primary and the other policy will be excess.

2. ELECTRONIC EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$5,000 any one occurrence, for "loss" to electronic equipment including satellite communication equipment, antennas, tapes, records, discs or other similar devices used with the electronic equipment and other accessories used for audio, visual or data purposes. At the time of "loss", the equipment must be in or on the covered "auto".

We will not pay for the following: equipment used to operate the covered "auto"; radar detection devices; actual data, facts, concepts or instructions converted to a form for use with the electronic equipment nor the cost to reproduce the information.

This insurance will not apply to theft coverage if, at the time of "loss", the covered "auto" is unattended, unless the "loss" is the result of forced entry into the covered "auto" while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

Policy No:	Issued To:	Effective:
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3. PERSONAL PROPERTY/EFFECTS

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$5,000 any one occurrence, for "loss" to personal property or effects of the "insured". At the time of "loss", the property must be in or on the covered "auto".

This insurance will not apply to theft coverage if, at the time of "loss", the covered "auto" is unattended, unless the "loss" is the result of forced entry into the covered "auto" while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

Under this extension, we will not pay for "loss" to the following: accounts, bills, currency, deeds, evidences of debt, money, notes or securities; electronic equipment or tapes, records, discs or other similar audio, visual or data electronic devices designed for use with audio, visual or data electronic equipment; jewelry, watches, necklaces, bracelets, gems, gold, platinum, silver, furs; animals, birds, or fish or any motorized vehicle.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

4. RENTAL REIMBURSEMENT

We will pay for rental reimbursement expenses for a truck or truck tractor of up to \$150 each day or \$750 each week subject to a maximum of \$5,000 any one occurrence, which are incurred by you for the rental of a replacement "auto". Coverage will begin on the seventh day after the "loss" has been reported to us and will terminate, regardless of the expiration date of the policy, when the first of the following occurs:

- a. The covered "auto" has been replaced;
- b. The covered "auto" has been repaired;
- c. The need for the replacement "auto" no longer exists; or
- d. If the covered "auto" is a total "loss", the claim has been settled and payment has been issued by us.

5. PHYSICAL DAMAGE FOR TEMPORARY SUBSTITUTE AUTOS

If this policy provides a Physical Damage Coverage on an owned truck or truck tractor and that truck or truck tractor is out of service because of its:

- a. Breakdown;
- b. Repair;
- c. Servicing;
- d. "Loss"; or
- e. Destruction;

A covered "auto" for that Physical Damage Coverage shall include a truck or truck tractor you do not own while used with the permission of its owner as a temporary substitute for that covered truck or truck tractor.

For "loss" to a temporary substitute truck or truck tractor, the most we will pay is the actual cash value, repair cost or replacement cost, whichever is less.

This coverage extension will end when the first of the following occurs:

- (1) When the owned covered "auto" has either been repaired or replaced;
- (2) If the covered "auto" you own is a total "loss", when the claim has been settled and payment has been made by us;
- (3) 30 days from the date you take possession of the temporary substitute "auto"; or
- (4) The date the policy is cancelled or expires;

6. TOWING COVERAGE

If "loss" to a covered "auto" from a covered cause of "loss" occurs and the "loss" requires the covered "auto" be towed or hauled from the site of the "loss" to a repair or salvage facility, we will also pay the actual cost to tow or haul the covered "auto" to a repair or salvage facility agreed upon by you and us.

ENDORSEMENT EXCLUSIONS

We will not pay for "loss", under these coverage extensions, arising out of any dishonest or illegal act, alone or in collusion with others by you, others in your employ or service or any person or persons to whom the property may be entrusted.

ENDORSEMENT DEDUCTIBLE PROVISIONS

Coverages 1,2,3 as provided by this endorsement are subject to an aggregate deductible amount of \$250 any one occurrence, after all other adjustments, including application of the limits, have been made. This deductible shall apply separately from any other physical damage deductible and is not reduced or waived by the application of any Combined Deductible or Single Deductible or any other deductible provision.

Coverages 4 and 6. provided by this endorsement are not subject to a separate deductible.

A temporary substitute "auto" under Coverage 5 of this endorsement is subject to the same physical damage deductible that applied to the covered owned "auto" that is temporarily out of service.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SINGLE DEDUCTIBLE

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
- TRUCKERS COVERAGE FORM
- MOTOR CARRIER COVERAGE FORM
- MOTOR TRUCK CARGO COVERAGE FORM

The applicable Physical Damage Coverage, Trailer Interchange Coverage or Motor Truck Cargo Coverage **DEDUCTIBLE** provision is determined as follows:

In any one accident, the amount we pay for covered "loss" will be reduced by the application of only one deductible. To determine the amount of this deductible for "loss", one of the following circumstances must apply:

1. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to at least one of the vehicles and to the cargo carried, the highest deductible of the damaged vehicle or the cargo will apply to the entire "loss".
2. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to all vehicles and to the cargo carried, the highest deductible of the damaged vehicles and cargo will apply to the entire "loss".
3. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to all vehicles but no loss to the cargo carried, the highest deductible of the damaged vehicles will apply to the entire "loss".
4. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to only the cargo carried, then the cargo deductible will apply.
5. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident, and "loss" results to only one vehicle and no cargo "loss", then that vehicle physical damage deductible will apply.

CONDITIONS

1. The deductibles to be considered are those found in the applicable Coverage Form or on the Declarations or Vehicle Schedule.
2. Deductibles not eligible for single deductible consideration are those in which the Coverage Form or a policy endorsement specifically excludes from consideration.
3. In determining the highest deductible, the deductibles to be considered for this "loss" are only those in coverage forms written with "us".

This endorsement forms a part of and is for attachment to the following described policy issued by the company designated therein, takes effect on the effective date of said policy, unless another effective date is shown below, at the hour stated in said policy and expires concurrently with said policy.

<i>Complete Only When This Endorsement Is Not Prepared with the Policy or Is Not to be Effective with the Policy</i>		
POLICY NO.	ISSUED TO	EFFECTIVE DATE

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Rate Information

Rate data does NOT apply to filing.

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-Property & Casualty	Review Status: Approved	07-13-2007
Comments:		
Attachment: AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF		
Satisfied -Name: Cover Letter	Review Status: Approved	07-13-2007
Comments: COVER LETTER		
Attachment: Cover Letter.PDF		
Satisfied -Name: AR - FORM FILING ABSTRACT F-1, AR - CERTIFICATE OF COMPLIANCE - (AID PC SelfCert (4/30/03))	Review Status: Approved	07-13-2007
Comments: FORM FILING TRANSMITTALS		
Attachments: AR - FORM FILING ABSTRACT F-1.PDF AR - CERTIFICATE OF COMPLIANCE - (AID PC SelfCert (4_30_03)).PDF		
Satisfied -Name: FORM FILING MEMO	Review Status: Approved	07-13-2007
Comments: FORM FILING MEMO		
Attachment: FORM FILING MEMO.PDF		
Satisfied -Name: old to new CA 85 02 06 07, old to new CA 85 04 06 07, old to new IL 100 06 07	Review Status: Approved	07-13-2007
Comments: ANNOTATED COPIES OF ENDORSEMENTS		
Attachments: old to new CA 85 02 06 07.PDF		

Created by SERFF on 07-13-2007 09:44 AM

old to new CA 85 04 06 07.PDF

old to new IL 100 06 07.PDF

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only

2. Insurance Department Use only	
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	

3. Group Name	Group NAIC #
Sentry Insurance Group	169

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Sentry Select Insurance Company	WI	21180	36-2674180	

5. Company Tracking Number	CA AR06999TRF01
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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
	Lori Daul 1800 North Point Drive Stevens Point WI 54481	Product Compliance/Development - Sr. Analyst	715-346-7080 Ext. 7080	715-346-6044	lori.daul@sentry.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Lori Daul

Filing Information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	20.0 Commerical Auto
10. Sub-Type of Insurance (Sub-TOI)	20.0004 Truckers
11. State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12. Company Program Title (Marketing Title)	NON-PASSENGER MOTOR CARRIER PROGRAM
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 10/01/2007 Renewal: 10/01/2007
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	7-10-2007
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

20.	This filing transmittal is part of Company Tracking #	CA AR06999TRF01
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Sentry Select Insurance Company is filing enhancements and/or revisions to its Motor Carrier - Non-Passenger Commercial Auto Program. These changes impact a number of endorsements as well as the company exception rule pages.

As part of the program changes for the Sentry Select Motor Carrier Non-passenger program we are filing to replace our current Motor Carrier Non-passenger Program Commercial Auto company rule pages. In addition to new coverage enhancements and certain revisions to rates, we are revising the organization of the rules to follow the format used in our other companies or operations. This would include the use of independent Common Rules, State Rule Exceptions to the ISO or company Common Rules and state specific Company Rate or Loss Cost pages.

Our intention was to replace all of the Motor Carrier - Non-passenger Program current rule and rate/loss cost exception pages with the exception of the Schedule Rating Page. The format of company rules and rate pages is revised, but the actual intent of the rules or the rate levels has not changed.

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]			
<table style="width: 100%; border: none;"> <tr> <td style="width: 15%;">Check #:</td> <td>EFT</td> </tr> <tr> <td>Amount:</td> <td>50.00</td> </tr> </table> <p style="text-align: center; margin-top: 20px;">Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>	Check #:	EFT	Amount:	50.00
Check #:	EFT			
Amount:	50.00			

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

Sentry Select Insurance Company
1800 North Point Drive
P.O. Box 8036
Stevens Point, WI 54481-8036

Lori Daul
Compliance/Development

lori.daul@sentry.com

715 346-7080
800 610-4888
715 346-6044 Fax



SENTRY[®]
INSURANCE

July 10, 2007

Commissioner Julie Benafield Bowman
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Attn: Property & Casualty Division

SENTRY SELECT INSURANCE COMPANY#: 169-21180 FEIN#: 36-2674180
MOTOR CARRIER NON-PASSENGER PROGRAM
DIVISION ONE – COMMERCIAL AUTO
FORM FILING
IMPLEMENTATION DATE: Policies Written on and after 10-1-2007
COMPANY TRACKING NUMBER: CA AR06999TRF01
Cross Reference Rate and Rule Company Filing Number: CA AR06999TRR01

We are filing a number of changes to our Motor Carrier Non-Passenger Program Commercial Auto endorsements. Please refer to the attached Commercial Auto Forms Filing Memo for additional information regarding these changes.

We ask you approval of this filing for policies written 1 October, 2007.

Policy Form(s) and Endorsement(s) Submitted:

Form Title: Pollution Liability - Broadened Coverage For Covered Autos
Form No.: CA 85 01 06 07 Replaces: CA 99 48 03/06
Edition Date: 06/07

Form Title: Physical Damage Coverage - Downtime
Form No.: CA 85 02 06 07 Replaces: JDT 235 04/98
Edition Date: 06/07

Form Title: Truckers Insurance - Non-Trucking Use - Unladen Liability
Form No.: CA 85 03 06 07
Edition Date: 06/07

Form Title: Physical Damage Coverage - Extension of Coverage
Form No.: CA 85 04 06 07 Replaces: JDT 227 05/02
Edition Date: 06/07

Form Title: Single Deductible Endorsement
Form No.: IL 100 06 07 Replaces: IL 100 08/98
Edition Date: 06/07

S T R E N G T H • P R O T E C T I O N • V I G I L A N C E[®]
SINCE 1904

ARKANSAS INSURANCE DEPARTMENT

FORM FILING ABSTRACT

ALL QUESTIONS MUST BE ANSWERED

Page 1 of 2

Companies filing for a group may use a consolidated abstract if all forms are identical.

1. Date Filed 7-10-2007

2. Company Name(s) Sentry Select Insurance Company

Group Name Sentry Insurance Group NAIC No. 21180 Group No. 169

3. (a) Annual Statement Line of Business Number (Page 14) _____

(b) Class of Business non-passenger motor carrier

© Coverages Affected all

4. (a) Name of Advisory Organization, if any ISO

(b) Affiliations with Advisory Organization: Member () Subscriber ()

5. Is this a reference filing? Yes () No () If yes, please provide the following:

(a) Name of Advisory Organization (or Affiliated Company) _____

(b) Date of Filing _____

© Filing Designation Number or Description _____

PROVIDE THE INFORMATION REQUESTED ON PAGE 2 OF THIS FORM

7. Has the form(s) been approved for use in your domiciliary state and/or other states?

yes

8. Is the form filed in response to or due to legislation? If so, specify legislation.

no

9. Is the form in response to or due to recent court decisions? If so, give citation.

no

THIS INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



Signature

Lori Daul

Title

715-346-7080

Telephone Number

Page 2 of 2

Old Form No.	Proposed Effective Date of New Form	New Form No.	Title of the Form(s); also Indicate Withdrawals: Provide Synopsis of Coverage
CA 99 48 03/06		CA 85 01 06 07 06/07	Pollution Liability - Broadened Coverage For Covered Autos
JDT 35 04/98		CA 85 02 06 07 06/07	Physical Damage Coverage - Downtime
JDT 227 05/02		CA 85 03 06 07 06/07	Truckers Insurance - Non-Trucking Use - Unladen Liability
IL 100 08/98		CA 85 04 06 07 06/07	Physical Damage Coverage - Extension of Coverage
		IL 100 06 07 06/07	Single Deductible Endorsement

ARKANSAS CERTIFICATE OF COMPLIANCE

(You may print or type the information required by this form)



I, Janet Fagan, Vice President of
(Name) (Title of Authorized Officer)

Sentry Select Insurance Company
(Name of Insurer)

declare that I am authorized to execute and file this certificate of compliance and do hereby certify that I am knowledgeable of the legal requirements under Arkansas law applicable to the insurance forms that are the subject of this filing and further aver:

1. Upon information and belief, I certify that the insurance forms filed herewith are complete and comply with all Arkansas laws, including the:

- a. Arkansas Code Annotated;
- b. Arkansas Rules and Regulations;
- c. Arkansas Insurance Bulletins, Directives and Orders;
- d. Applicable filing requirements including the applicable product standards set forth in the product checklists; and
- e. Rulings and decisions of any court of this state.

2. I understand and acknowledge that the Commissioner will rely upon this certificate and if it is subsequently determined that any form filed herewith is false or misleading, appropriate corrective action shall be taken by the commissioner against the company.

3. Pursuant to Ark. Code Ann. § 23-79-109(a)(1)(C), I understand that by certifying that a form complies with paragraph 1 hereof, it is not to be taken by the undersigned or by my company as meaning that any insurance effected by use of such form may in any fashion be inconsistent with the statutory and common law of Arkansas.

4. Pursuant to Ark. Code Ann. §23-79-118, I understand and acknowledge that any insurance policy, rider, endorsement or other insurance form filed under this certificate, that is subsequently issued to an insured, and contains any condition or provision not in compliance with the requirements of the laws of the State of Arkansas, as set forth in paragraph 1 hereof, shall be construed and applied in accordance with such condition or provision as would have applied if the policy, rider, endorsement or form had been in full compliance with the law.

Does this Certification apply to all the companies in this filing? <i>(Yes or No)</i> •	YES
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If "NO", to which companies does this Certification apply?

Company Name(s)	NAIC #
Sentry Select Insurance Company	169-21180

Company Tracking Number • CA AR06999TRF01	
Signature of Authorized Officer •	
Name of Authorized Officer •	Janet Fagan
Title of Authorized Officer •	Vice President
Email address of Authorized Officer •	
Telephone # of Authorized Officer •	715-346-7080
Date •	7-10-2007

This form may be computer generated by the company. So long as the wording and general layout is the same, the format may vary. For more information, contact the Property & Casualty Division of the Arkansas Insurance Department at 1200 W 3rd St., Little Rock, AR 72201, telephone: 501-371-2800, or email: information.pnc@state.ar.us

FORM FILING MEMO

SENTRY SELECT INSURANCE COMPANY – MOTOR CARRIER NON-PASSENGER 2007 COMMERCIAL AUTO ENHANCEMENT FILING

Sentry Select Insurance Company is filing the following enhancements or revisions to its Motor Carrier – Non-Passenger Commercial Auto Program. We are filing the following new or replacement endorsements:

- **CA 85 01 06 07 POLLUTION LIABILITY – BROADENED COVERAGE FOR COVERED AUTOS**

This is a new endorsement that will be used in place of the ISO Pollution Liability – Broadened Coverage For Covered Autos, CA 99 48. The endorsement will limit the application of paragraph a of the Liability Coverage Pollution Exclusion to contractually assumed liability, but only for amounts up to the Broadened Pollution Coverage sublimit indicated in the Schedule for the endorsement.

This sublimit provision is the primary difference between the ISO endorsement and this replacement endorsement.

This endorsement will be provided for all commercial trucking insureds under this program except “non-trucking use” (aka bobtail) policies issued under rule 24.B.1 or Unladen risks under our new independent Commercial Auto Additional Rule for Unladen Coverage. Coverage will be provided without additional charge for a standard limit of the smaller of the policy Liability Coverage Limit of Insurance or \$100,000. Limits equal to the Liability Coverage Limit of Insurance (if excess of \$100,000) will be available for an additional charge.

Refer to the corresponding rate and rule filing for additional information regarding use and pricing for this endorsement.

- **CA 85 02 06 07 PHYSICAL DAMAGE COVERAGE – DOWNTIME**

This endorsement will replace our current Downtime endorsement, JDT 235 (04-98). We have revised the endorsement to clarify when coverage applies. Specifically, we have replaced language that coverage begins the later of 7 days after we approve the repair of a covered auto or the covered auto is taken from service for repair after a covered accident to the later of 7 days from the date of a covered accident or 7 days from the date it is actually taken from service for repair of damage from a covered accident.

This revised language will better address when coverage applies in situations where the covered auto is deemed to be a total loss.

We have also made other editorial changes and an annotated endorsement showing revisions via change tracking is included as an exhibit for your review.

- **CA 85 03 06 07 TRUCKERS INSURANCE – NON-TRUCKING USE – UNLADEN LIABILITY**

This is a new endorsement for the Business Auto policies for owner operators who are under permanent lease to a specific trucking company to allow compliance with certain lease requirements and an additional option to non-trucking use or bobtail endorsements. Typically these agreements require the Trucking company to provide primary coverage for Trucker and Owner Operator when under dispatch and transporting loads. If the lease requires the Owner Operator to provide coverage when not under dispatch, current Bobtail coverage would be appropriate. However, some contracts require the Owner Operator to provide primary liability whenever the truck is not loaded and actually engaged in trucking operations.

The purpose of this endorsement is to provide coverage for the requirements described above but not covered under the current bobtail endorsements.

Rules and rates for this endorsement are included in the accompanying rate and rule filing.

- **CA 85 04 06 07 PHYSICAL DAMAGE COVERAGE – EXTENSION OF COVERAGE**

This endorsement replaces our current endorsement JDT 227 (05-02).

In addition to the change in endorsement number we have made some editorial changes and added an additional coverage extension for the cost to tow a covered auto that sustains damage from a covered cause of loss from the site of the loss to an agreed upon repair or storage facility. This coverage extension is provided without a specific limit of insurance and amounts paid are in addition to the limit of coverage available for damage to the covered auto.

This endorsement is provided without an additional charge to all motor carrier non-passenger program insureds who purchase Physical Damage Coverage.

- **IL 100 06 07 SINGLE DEDUCTIBLE ENDORSEMENT**

This endorsement will replace the current IL 100 (08-98).

The primary change is to broaden the application of this endorsement. In addition to the Automobile Physical Damage and Motor Truck Cargo coverages, this endorsement will also apply Trailer Interchange coverage.

In the event of loss or damage to multiple covered autos and/or Cargo or Trailer Interchange coverages, we will only apply one deductible to the loss. The applied deductible will be the largest deductible that would otherwise apply.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - DOWNTIME

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Item **A. COVERAGE - PHYSICAL DAMAGE**, the following is added:

If this policy provides Physical Damage Coverage on a truck or truck tractor, and a covered "loss" occurs to that vehicle, the coverage is extended to cover, in addition to the **LIMIT OF INSURANCE** on the vehicle, the following:

COVERAGE

We will pay for "downtime" in an amount of up to a maximum of \$150 each day and a maximum of \$5,000 each "loss" subject to the following:

"Downtime" coverage will begin the later of:

1. The seventh day after a covered "loss" has been reported to us; or
2. The seventh day after we have given you our agreement to pay for certain repairs and you have given the repair facility your authorization to repair your vehicle that is not road-worthy, or
- If you choose to wait, or use your vehicle for a while before repairing it, then "downtime" coverage will begin on the seventh day after those repairs, which we had previously given our agreement to pay for, actually start.

"Downtime" coverage will cease:

- When the covered repairs are completed by the repair facility and they determine that the vehicle is road-worthy, or
- In the event of a total "loss" to the vehicle, the claim for physical damage coverage has been settled and payment has been issued by us.

If repairs have been completed and you dispute the quality of work done by the facility, then "downtime" coverage will continue immediately after we agree to pay for certain additional repairs by the repair facility.

EXCLUSIONS

We will not pay for "loss" arising out of any dishonest or illegal act, alone or in collusion with another by you, others in the employ or service of you or any person or persons to whom the property may be entrusted.

DEFINITIONS

"Downtime" means the time a covered auto is out of service for repair and in the custody of a repair facility. "Downtime" payment is determined by taking the gross revenue generated by the covered auto and deducting all non-continuing expenses to reach the net loss of profit.

Policy No:	Issued To:	Effective:
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CA 85 02 06 07

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

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Paragraph A. COVERAGE of the PHYSICAL DAMAGE COVERAGE Section is amended by the addition of the following:

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If this policy provides Physical Damage Coverage for a covered "auto", and a covered "loss" occurs to the covered "auto", the coverage extensions described in paragraphs 1 through 6 below will also apply. Except for Extension 5. Physical Damage For Temporary Substitute Autos, these coverage extensions will apply in addition to the Limit Of Insurance that applies to the covered "auto".

1. MISCELLANEOUS EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$2,500 any one occurrence, for "loss" to hand trucks, dollies, pallets, pads, covers, tarpaulins, chains, binders or any similar equipment used in the shipping or handling of property being transported.

If the equipment is being used on a "trailer" at the time of "loss", the truck or truck tractor operating with the "trailer" must have physical damage coverage in order for this coverage to apply.

In the event of other insurance with us for the same coverage, this policy will be primary and the other policy will be excess.

2. ELECTRONIC EQUIPMENT

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$5,000 any one occurrence, for "loss" to electronic equipment including satellite communication equipment, antennas, tapes, records, discs or other similar devices used with the electronic equipment and other accessories used for audio, visual or data purposes. At the time of "loss", the equipment must be in or on the covered "auto".

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We will not pay for the following: equipment used to operate the covered "auto"; radar detection devices; actual data, facts, concepts or instructions converted to a form for use with the electronic equipment nor the cost to reproduce the information.

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This insurance will not apply to theft coverage if, at the time of "loss", the covered "auto" is unattended, unless the "loss" is the result of forced entry into the covered "auto" while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

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In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

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PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE (continued)

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

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3. PERSONAL PROPERTY/EFFECTS

We will pay the actual cash value, repair cost or replacement cost, whichever is less, up to a limit of \$5,000 any one occurrence, for "loss" to personal property or effects of the "insured". At the time of "loss", the property must be in or on the covered "auto".

This insurance will not apply to theft coverage if, at the time of "loss", the covered "auto" is unattended, unless the "loss" is the result of forced entry into the covered "auto" while all doors, windows or other openings are closed and locked and there is evidence of forced entry.

Under this extension, we will not pay for "loss" to the following: accounts, bills, currency, deeds, evidences of debt, money, notes or securities; electronic equipment or tapes, records, discs or other similar audio, visual or data electronic devices designed for use with audio, visual or data electronic equipment; jewelry, watches, necklaces, bracelets, gems, gold, platinum, silver, furs; animals, birds, or fish; or any motorized vehicle.

In the event of other insurance for the same coverage, this policy coverage will be excess over any other collectable insurance.

4. RENTAL REIMBURSEMENT

We will pay for rental reimbursement expenses for a truck or truck tractor of up to \$150 each day or \$750 each week subject to a maximum of \$5,000 any one occurrence, which are incurred by you for the rental of a replacement "auto". Coverage will begin on the seventh day after the "loss" has been reported to us and will terminate, regardless of the expiration date of the policy, when the first of the following occurs:

- a. The covered "auto" has been replaced;
- b. The covered "auto" has been repaired;
- c. The need for the replacement "auto" no longer exists; or
- d. If the covered "auto" is a total "loss", the claim has been settled and payment has been issued by us.

5. PHYSICAL DAMAGE FOR TEMPORARY SUBSTITUTE AUTOS

If this policy provides a Physical Damage Coverage on an owned truck or truck tractor and that truck or truck tractor is out of service because of its:

- a. Breakdown;
- b. Repair;
- c. Servicing;
- d. "Loss"; or
- e. Destruction;

A covered "auto" for that Physical Damage Coverage shall include a truck or truck tractor you do not own while used with the permission of its owner as a temporary substitute for that covered truck or truck tractor.

For "loss" to a temporary substitute truck or truck tractor, the most we will pay is the actual cash value, repair cost or replacement cost, whichever is less.

This coverage extension will end when the first of the following occurs:

- (1) When the owned covered "auto" has either been repaired or replaced;
- (2) If the covered "auto" you own is a total "loss", when the claim has been settled and payment has been made by us;
- (3) 30 days from the date you take possession of the temporary substitute "auto"; or
- (4) The date the policy is cancelled or expires;

6. TOWING COVERAGE

If "loss" to a covered "auto" from a covered cause of "loss" occurs and the "loss" requires the covered "auto" be towed or hauled from the site of the "loss" to a repair or salvage facility, we will also pay the actual cost to tow or haul the covered "auto" to a repair or salvage facility agreed upon by you and us.

ENDORSEMENT EXCLUSIONS

We will not pay for "loss" under these coverage extensions arising out of any dishonest or illegal act, alone or in collusion with others by you, others in your employ or service or any person or persons to whom the property may be entrusted.

ENDORSEMENT DEDUCTIBLE PROVISIONS

Coverages 1,2,3 as provided by this endorsement are subject to an aggregate deductible amount of \$250 any one occurrence, after all other adjustments, including application of the limits, have been made. This deductible shall apply separately from any other physical damage deductible and is not reduced or waived by the application of any Combined Deductible or Single Deductible or any other deductible provision.

Coverages 4 and 6 provided by this endorsement are not subject to a separate deductible.

A temporary substitute "auto" under Coverage 5 of this endorsement is subject to the same physical damage deductible that applied to the covered owned "auto" that is temporarily out of service.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PHYSICAL DAMAGE COVERAGE - EXTENSION OF COVERAGE (continued)

Policy No:	Issued To:	Effective:
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SINGLE DEDUCTIBLE

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM,
- TRUCKERS COVERAGE FORM,
- MOTOR CARRIER COVERAGE FORM,
- MOTOR TRUCK CARGO COVERAGE FORM

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The applicable Physical Damage Coverage, Trailer Interchange Coverage or Motor Truck Cargo Coverage **DEDUCTIBLE** provision is determined as follows:

In any one accident, the amount we pay for covered "loss" will be reduced by the application of only one deductible. To determine the amount of this deductible for "loss", one of the following circumstances must apply:

1. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to at least one of the vehicles and to the cargo carried, the highest deductible of the damaged vehicle or the cargo will apply to the entire "loss".
2. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to all vehicles and to the cargo carried, the highest deductible of the damaged vehicles and cargo will apply to the entire "loss".
3. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to all vehicles but no loss to the cargo carried, the highest deductible of the damaged vehicles will apply to the entire "loss".
4. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident and "loss" results to only the cargo carried, then the cargo deductible will apply.
5. If a truck or truck tractor or a trailer(s) or semi-trailer(s) are involved in the accident, and "loss" results to only one vehicle and no cargo "loss", then that vehicle physical damage deductible will apply.

CONDITIONS

1. The deductibles to be considered are those found in the applicable Coverage Form or on the Declarations or Vehicle Schedule.
2. Deductibles not eligible for single deductible consideration are those in which the Coverage Form or a policy endorsement specifically excludes from consideration.
3. In determining the highest deductible, the deductibles to be considered for this "loss" are only those in coverage forms written with "us".

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This endorsement forms a part of and is for attachment to the following described policy issued by the company designated therein, takes effect on the effective date of said policy, unless another effective date is shown below, at the hour stated in said policy and expires concurrently with said policy.

<i>Complete Only When This Endorsement Is Not Prepared with the Policy or Is Not to be Effective with the Policy</i>		
<small>POLICY NO.</small>	<small>ISSUED TO</small>	<small>EFFECTIVE DATE</small>

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