

## Filing at a Glance

Company: State Auto Property and Casualty Insurance Company

Product Name: AR PIM

SERFF Tr Num: STAT-125230736 State: Arkansas

TOI: 09.0 Inland Marine

SERFF Status: Closed

State Tr Num: AR-PC-07-025463

Sub-TOI: 09.0000 Inland Marine Sub-TOI

Co Tr Num: PC-PIM-2007-572

State Status:

Combinations

Filing Type: Rule

Co Status:

Reviewer(s): Becky Harrington,  
Betty Montesi, Brittany Yielding

Authors: Doug Griffith, Barb  
Wickham

Disposition Date: 07-18-2007

Date Submitted: 07-16-2007

Disposition Status: Filed

Effective Date Requested (New): 12-30-2007

Effective Date (New): 12-30-2007

Effective Date Requested (Renewal): 12-30-2007

Effective Date (Renewal): 12-30-  
2007

## General Information

Project Name: AR PIM 12-30-07

Project Number: PC-PIM-2007-572

Reference Organization:

Reference Title:

Filing Status Changed: 07-18-2007

State Status Changed: 07-17-2007

Corresponding Filing Tracking Number:

Filing Description:

Please see the manual revisions in the Rate/Rules Section.

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

## Company and Contact

### Filing Contact Information

Doug Griffith, Supervisor, State Filings

doug.griffith@stateauto.com

518 E. Broad Street

(614) 917-5492 [Phone]

Columbus, OH 43215

(614) 887-1615[FAX]

### Filing Company Information

State Auto Property and Casualty Insurance  
Company

CoCode: 25127

State of Domicile: Iowa

1300 Woodland Ave

Group Code: 175

Company Type: Property and  
Casualty

PO Box 66150

West Des Moines, IA 50265-0150

Group Name:

State ID Number:

Created by SERFF on 07-18-2007 09:04 AM

(614) 464-5000 ext. [Phone]

FEIN Number: 57-6010814

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## Filing Fees

Fee Required? Yes  
Fee Amount: \$25.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

| COMPANY   | AMOUNT  | DATE PROCESSED | TRANSACTION # |
|---|---------|----------------|---------------|
| State Auto Property and Casualty Insurance<br>Company | \$25.00 | 07-16-2007     | 14617595      |

## Correspondence Summary

### Dispositions

| <b>Status</b> | <b>Created By</b> | <b>Created On</b> | <b>Date Submitted</b> |
|---------------|-------------------|-------------------|-----------------------|
| Filed         | Becky Harrington  | 07-18-2007        | 07-18-2007            |

## Disposition

Disposition Date: 07-18-2007

Effective Date (New): 12-30-2007

Effective Date (Renewal): 12-30-2007

Status: Filed

Comment:

Rate data does NOT apply to filing.

| <b>Item Type</b>           | <b>Item Name</b>            | <b>Item Status</b> | <b>Public Access</b> |
|----------------------------|-----------------------------|--------------------|----------------------|
| <b>Supporting Document</b> | AR PIM Transmittal          | Filed              | Yes                  |
| <b>Supporting Document</b> | AR PIM Revised Manual Pages | Filed              | Yes                  |

## Supporting Document Schedules

**Satisfied -Name:** AR PIM Transmittal **Review Status:** Filed 07-18-2007  
**Comments:**  
**Attachment:**  
AR PIM Transmittal Header.pdf

**Satisfied -Name:** AR PIM Revised Manual Pages **Review Status:** Filed 07-18-2007  
**Comments:**  
**Attachment:**  
AR PIM Revised Manual Pages.pdf

## Property &amp; 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>                             | State Auto Insurance Companies |               |               |                | <b>Group NAIC #</b> | 175 |
| <b>4. Company Name(s)</b>                        | <b>Domicile</b>                | <b>NAIC #</b> | <b>FEIN #</b> | <b>State #</b> |                     |     |
| State Auto Property & Casualty Insurance Company | IA                             | 25127         | 57-6010814    |                |                     |     |
|  |                                |               |               |                |                     |     |
|  |                                |               |               |                |                     |     |
|  |                                |               |               |                |                     |     |

|                                   |                        |
|-----------------------------------|------------------------|
| <b>5. Company Tracking Number</b> | <b>PC-PIM-2007-572</b> |
|-----------------------------------|------------------------|

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

|  |                              |                             |              |                             |
|--|------------------------------|-----------------------------|--------------|-----------------------------|
| <b>6. Name and address</b>                                 | <b>Title</b>                 | <b>Telephone #s</b>         | <b>FAX #</b> | <b>e-mail</b>               |
| Doug Griffith<br>518 E. Broad Street<br>Columbus, OH 43215 | Supervisor,<br>State Filings | 800.695.9436<br>(ext. 5492) | 614.887.1615 | doug.griffith@stateauto.com |
|  |                              |                             |              |                             |
| <b>7. Signature of authorized filer</b>                    |                              |                             |              |                             |
| <b>8. Please print name of authorized filer</b>            | Doug Griffith                |                             |              |                             |

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

|   |  |                   |          |                   |
|---|--|-------------------|----------|-------------------|
| <b>9. Type of Insurance (TOI)</b>   | 09.0 Inland Marine   |                   |          |                   |
| <b>10. Sub-Type of Insurance (Sub-TOI)</b>  | 09.0006 Other Personal Inland Marine   |                   |          |                   |
| <b>11. State Specific Product code(s)(if applicable)[See State Specific Requirements]</b> |  |                   |          |                   |
| <b>12. Company Program Title (Marketing title)</b>  | Personal Inland Marine   |                   |          |                   |
| <b>13. Filing Type</b>  | <input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules<br><input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms<br><input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description) |                   |          |                   |
| <b>14. Effective Date(s) Requested</b>  | New:   | December 30, 2007 | Renewal: | December 30, 2007 |
| <b>15. Reference Filing?</b>  | <input type="checkbox"/> Yes <input type="checkbox"/> No   |                   |          |                   |
| <b>16. Reference Organization (if applicable)</b>   |  |                   |          |                   |
| <b>17. Reference Organization # &amp; Title</b>   |  |                   |          |                   |
| <b>18. Company's Date of Filing</b>   | July 16, 2007  |                   |          |                   |
| <b>19. Status of filing in domicile</b>   | <input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input 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>PC-PIM-2007-572</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] |
|------------|--|

**1. Manual Revisions:**

Please see the manual revisions in the Rate/Rules Section.

|  |   |
|--|---|
| <b>22.</b>   | <b>Filing Fees</b> (Filer must provide check # and fee amount if applicable)<br>[If a state requires you to show how you calculated your filing fees, place that calculation below] |
| <b>Check #: EFT</b><br><b>Amount: \$25.00</b>  |   |
| <b>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</b> |   |

\*\*\*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> | <b>PC-PIM-2007-572</b> |
|-----------|--|------------------------|

|           |   |  |
|-----------|---|--|
| <b>2.</b> | <b>This filing corresponds to form filing number</b><br>(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> | File and Use |
|-----------|--|--------------|

| <b>4a. 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) |
| State Auto Property & Casualty Insurance Company |  |                       | N/A                                     | N/A  | N/A                              |                                   |                                   |
|  |  |                       |   |  |                                  |                                   |                                   |

| <b>4b. 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 | Minimum % Change |
|  |  |                       |   |  |                                  |                  |                  |
|  |  |                       |   |  |                                  |                  |                  |

| 5. Overall Rate Information (Complete for Multiple Company Filings only) |  |             |           |
|--|--|-------------|-----------|
|  |  | COMPANY USE | STATE USE |
| <b>5a</b>  | <b>Overall percentage rate indication (when applicable)</b>            |             |           |
| <b>5b</b>  | <b>Overall percentage rate impact for this filing</b>                  |             |           |
| <b>5c</b>  | <b>Effect of Rate Filing – Written premium change for this program</b> |             |           |
| <b>5d</b>  | <b>Effect of Rate Filing – Number of policyholders affected</b>        |             |           |

|           |   |              |
|-----------|---|--------------|
| <b>6.</b> | <b>Overall percentage of last rate revision</b>                                       | 0            |
| <b>7.</b> | <b>Effective Date of last rate revision</b>   | 12-30-2005   |
| <b>8.</b> | <b>Filing Method of Last filing (Prior Approval, File &amp; Use, Flex Band, etc.)</b> | File and Use |

| 9. | Rule # or Page # Submitted for Review  | Replacement or withdrawn?   | Previous state filing number, if required by state |
|----|--|---|--|
| 01 | Rule 3, Pages 1-3, Added "Customers Can Pay Online / Credit Card Payments". As a result, the rules which followed have been moved. | <input type="checkbox"/> New<br><input checked="" type="checkbox"/> Replacement<br><input type="checkbox"/> Withdrawn |  |
| 02 |  | <input type="checkbox"/> New<br><input type="checkbox"/> Replacement<br><input type="checkbox"/> Withdrawn            |  |

# ARKANSAS PERSONAL INLAND MARINE MANUAL

## 1. UNDERWRITING REQUIREMENTS

- A. Property must be insured to 100% of current market value. It is the insured's responsibility to establish the current market value of the property to substantiate the amount of insurance. However, because values are often difficult to establish, every effort should be made to assist the insured in determining the insurable value of the property to be covered.
- B. A complete detailed description of the items to be insured is required in addition to evidence of valuation. Refer to personal property classes and rates section.
  - 1. For jewelry, furs, fine arts, antiques and various types of collections, detailed appraisals are required.
  - 2. The amount of insurance written under a previous policy is not satisfactory evidence of value.
  - 3. For all other items, a bill of sale from an established store is acceptable as satisfactory evidence of value, if the sale was made within the past three years. If a current bill of sale is not available or an appraisal is not required, a complete detailed description of the items to be insured is required.
  - 4. Photographs of insured property are desirable, especially with valuable and intricate items.
- C. We do not insure unset diamonds or gold or silver bullion.
- D. Property used for business purposes or held for sale must be submitted for review prior to binding.
- E. The policy must be written in the name of the individual owner(s). Property titled in the name of a company or corporation is not eligible for coverage.

## 2. MINIMUM PREMIUM

A single minimum annual policy premium will apply, either \$35.00 or \$50.00, based on the type of property insured. Refer to the rate page in order to determine which minimum premium applies. In the event that two different deductibles could apply, only the \$50.00 deductible will apply.

## 3. POLICY TERM/PAYMENT OPTION

- A. The policy is written for 12 months. Renewal terms are processed according to the current rates and forms.

A full pay policy is also eligible for the E-Pay option.

- B. Electronic Funds Transfer ("E-Pay")

An option available to insureds is to have their payment automatically transferred, on a monthly basis, from their checking account to State Auto electronically. The insured has the option of choosing the date they would like the deduction to take place. The insured will be notified by the company of the initial monthly amount of premium to be transferred, as well as any changes to that amount of one dollar (\$1.00) or more.

This option is available for new and existing business. Once State Auto receives the enrollment form, the insured's policy will be set up for the electronic funds transfer. This option is not available on premium financed policies.

# ARKANSAS PERSONAL INLAND MARINE MANUAL

## 3. POLICY TERM/PAYMENT OPTION (continued)

- C. Customers Can Pay Online / Credit Card Payments.** Direct bill customers can now make premium payments online at [www.stateauto.com](http://www.stateauto.com). After selecting the option to "Pay Your Policy" customers can make a one-time payment without enrolling in the system or they can enroll in our "Pay Now" program where personal and payment type information is stored to facilitate and expedite future payments. Whether direct bill customers are making a one-time online payment or are enrolled in our "Pay Now" program, they can opt to pay through use of an automated check (ACH payment) or can make payment using a VISA™ or MasterCard™ credit or "pin-less" debit card. Credit card and "pin-less" debit card payments are accepted for all transactions with the exception of the initial downpayment on a policy.
- D. NSF Charge:** A \$20 non-sufficient fund fee will be charged on all returned checks

## 4. CANCELLATION

- A.** If the policy or form of coverage is canceled or reduced, the return premium is computed pro-rata.
- B.** In the event of cancellation, return premium amounts under \$1.00 will be retained by the company unless requested by the insured.

## 5. PROCESSING INSTRUCTIONS

- A.** A current application should be secured and submitted to the company for each new risk. The application serves as a combination binder and application. It must be completed in its entirety, indicating coverage desired, and submitted to the company for policy issuance.
- B.** Endorsements will also be issued by the company. A completed Change Request (ACORD 70) provides the information needed to endorse a policy. When indicating "Additional Coverages," if the added endorsement is a "fill-in," indicate the information in the remarks section or attach a completed endorsement.

## 6. RATING

All premium calculations in this program are rounded to the nearest dollar. Amounts of fifty cents or more are carried to the next highest dollar amount. Where multiple rating steps are performed, round at the end of each step. **Refer to rate pages to determine base rates for the desired coverage.**

## 7. PERSONAL PROPERTY CLASSES

The various forms contained in this manual are designed to cover property acceptable to the State Auto Insurance Companies. Property that does not meet the following guidelines may be considered by submitting a completed application along with an appraisal or valuation. Refer to the policy form for complete and specific information regarding coverages.

### A. PERSONAL ARTICLES

Form **IM-175** provides all - risk coverage and is used with policy jacket **FI-102** to cover the classes of personal property shown below.

- |                       |                           |
|-----------------------|---------------------------|
| 1. Bicycles           | 6. Jewelry                |
| 2. Coin Collections   | 7. Musical Instruments    |
| 3. Fine Arts          | 8. Photographic Equipment |
| 4. Furs               | 9. Silverware             |
| 5. Golfers' Equipment | 10. Stamp Collections     |

**ARKANSAS  
PERSONAL INLAND MARINE MANUAL**

**7. PERSONAL PROPERTY CLASSES (continued)**

**1. Bicycles IM-175**

Coverage available for property owned by individuals and family members residing in the insured's household. Covers bicycles within the continental limits of the United States and Canada.

**2. Coin Collections IM-175**

Covers rare and current coins, medals, paper money, bank notes, tokens of money and other numismatic property, including coin albums, containers, frames, cards and display cabinets in use with such collections. The policy provides worldwide coverage. Any single item to be insured for more than \$5,000 or any schedule of items to be insured for more than \$20,000 must be accompanied by an appraisal.

**3. Fine Arts IM-175**

Covers fine arts and antiques, such as paintings, etchings, pictures, tapestries, art-glass windows, and other bonafide works of art (such as valuable rugs, statuary, marbles, bronzes, antique furniture, books, antique silver, manuscripts, porcelains, glass and bric-a-brac) of rarity, historical value or artistic merit, within the continental United States and Canada. Coverage on premises of fair grounds or any national or international exposition is not provided. Any single item to be insured for more than \$5,000 or any schedule of items to be insured for more than \$20,000 must be accompanied by an appraisal.

**Breakage Rates --** The exclusion relating to breakage of fragile articles may be deleted for an additional premium computed at the rate applied to the aggregate value of articles given such protection. Use endorsement **IM-664-2** in addition to **IM-175**.

**4. Furs IM-175**

Covers fur garments and garments trimmed with fur, anywhere in the world. This does NOT include artificial "furs" of man-made fabrics. Any single item to be insured for more than \$5,000 must be accompanied by an appraisal. Do not write or bind coverage on any one item valued at \$15,000 or more without prior approval by the company.

**5. Golfers' Equipment IM-175**

Covers golf clubs, golf clothing, golf equipment and self-propelled pull carts. The form covers such property anywhere in the world and also covers other clothing of the insured while contained in any locker situated in a clubhouse or other building used in connection with the game of golf.

**6. Jewelry IM-175**

Covers personal jewelry anywhere in the world. Jewelry is defined as articles of personal adornment made from precious and semi-precious metals, with or without gems or semi precious stones. Silverware, plated ware, and pewter are NOT considered to be jewelry. In addition, we do not insure unset gemstones.

**Jewelry in vaults:** Specific items of scheduled jewelry which are kept in a vault in a bank may be insured at a rate of \$5.20 per \$1,000 of insurance per year. The company must be notified in advance of removal from the vault and a short rate additional premium is charged for the period the jewelry is not vaulted. Use **IM-175-4** in addition to **IM-175**.

Appraisals are required for each item of jewelry valued at more than \$2,500. A complete description -- including color, clarity, cut and carat weight along with the type of mounting (gold, silver, platinum) and its weight -- is needed in order to identify covered property. A previous policy with another company is not satisfactory evidence of value. Do not bind coverage on any one item valued at \$15,000 or more or a schedule of items totaling \$50,000 or more without prior approval by the Company.