

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: EFT \$100  
Company Tracking Number: AR-PA-2009-03  
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto  
Project Name/Number: /

## Filing at a Glance

Companies: EMCASCO Insurance Company, Employers Mutual Casualty Company

Product Name: Personal Auto SERFF Tr Num: EMCC-126257785 State: Arkansas  
TOI: 19.0 Personal Auto SERFF Status: Closed-Filed State Tr Num: EFT \$100  
Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: AR-PA-2009-03 State Status: Fees verified and received (PPA)  
Filing Type: Rate/Rule Reviewer(s): Alexa Grissom, Betty Montesi  
Author: Jo Byers Disposition Date: 08/27/2009  
Date Submitted: 08/06/2009 Disposition Status: Filed  
Effective Date Requested (New): 10/15/2009 Effective Date (New): 10/15/2009  
Effective Date Requested (Renewal): 10/15/2009 Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile: Not Filed  
Project Number: Domicile Status Comments:  
Reference Organization: Reference Number:  
Reference Title: Advisory Org. Circular:  
Filing Status Changed: 08/27/2009  
State Status Changed: 08/10/2009 Deemer Date:  
Created By: Jo Byers Submitted By: Jo Byers  
Corresponding Filing Tracking Number:  
Filing Description:  
August 6, 2009

Commissioner of Insurance  
Arkansas Insurance Department  
1200 West Third St.  
Little Rock, AR 72201-1904

EMPLOYERS MUTUAL CASUALTY COMPANY – 062-21415  
EMCASCO INSURANCE COMPANY – 062-21407

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Personal Auto

Rate and Rule Revision

Adoption of ISO's Custom Equipment Coverage Rule & Rating Provisions

Filing Designation # PP-2008-RCERU

Company File # AR-PA-2009-03

Effective: October 15, 2009

The captioned companies are members of Insurance Services Office (ISO), and ISO files the Personal Auto program on our behalf. We are transmitting for filing a rate revision that will result in an estimated decrease of -0.2% for the companies combined. Our revision consists of the changes below and will be applicable to policies effective on or after October 15, 2009.

Our rate revision consists of the following:

- Revised Base rates – EMC will continue to be rated 130% of EMCASCO
- Revised Uninsured and Underinsured Rates
- Revised Motor Home Deductible Relativities
- Revised Model Year/Symbol Relativities – added 2011 model year/symbols and re-based to 2009 symbol 8. In addition, we are adopting ISO's new 75-symbol table applicable to model years 2011 and newer.
- Revised the combination policy discount from 15% to 20%
- Introduce an accident free discount of 10% (Rule 5.F.)

Our rule revisions consist of the following:

- Introduce Rule 3. Customer Plus Program under which those risks meeting specific eligibility guidelines will receive a 15% discount.
- Rule 4. Customer Plus Program – Renewal Eligibility (36 Month History) – as part of our Customer Plus Program, risks which do not meet specified eligibility guidelines will have the 15% discount removed at next renewal.
- Rule 11. Whole Dollar Premium – added wording that premium involving \$0.50 or more shall be rounded to the next higher whole dollar (with the exception of premium for policy endorsements, policy level discounts and uninsured/underinsured motorists coverages).
- Rule 12. Rules for Determining Physical Damages Base Rates For Symbols Not Displayed on Rate Pages – amended in conjunction with our adoption of the new higher symbols. Under both paragraphs A. and B., item 1 now addresses 2011 and Subsequent Model Year Vehicles – Symbol 98 Vehicles (for Symbol 65 and over, refer to company); and item 2. now addresses 1990-2010 Symbol 27 Vehicles. Factors for 1989 and Prior Model Year Vehicles are now addressed under item 3.
- Rule 14. Miscellaneous Coverages – We are adopting ISO's Custom Equipment Coverage Rule revision found in filing designation number PP-2008-RCERU.

We supplement this filing with the following:

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- \$100.00 filing fee (EFT)
- Rate Filing Abstract
- Auto Premium Comparison Survey
- Calendar Year Actual Experience
- Current and Revised Base Rates
- Current and Revised Uninsured and Underinsured Rates
- Model Year/Symbol Relativities
- Investment Income Analysis
- Estimated Earnings on Unearned Premium and Loss Reserves
- Development of the Permissible Loss & LAE Ratio
- Rate Level Indications with Explanatory Notes
- Countrywide Incurred Loss Development Factors
- Summary of Changes
- Revised Motor Homes Deductible Relativities
- Combination Policy Discount Effect
- Accident Free Discount Effect
- Revised manual pages PA-1 – PA-47, PA-R-2 – PA-R-7, PA-T-1 – PA-T-10, PA-X-1 – PA-X-4; these pages replace the same pages currently filed.

We respectfully request your acknowledgment of this filing, to be applicable to policies effective on or after October 15, 2009. Thank you.

Jo L. Byers, Filings Analyst  
Rates and Filings Dept.  
(800) 247-2128 Ext. 2707  
jo.l.byers@emcins.com

## Company and Contact

### Filing Contact Information

Jo Byers, Filings Analyst  
PO Box 712  
Des Moines, IA 50306-0712

Jo.L.Byers@EMCIns.com  
800-247-2128 [Phone] 2707 [Ext]  
515-345-2223 [FAX]

### Filing Company Information

EMCASCO Insurance Company  
717 Mulberry Street  
Des Moines, IA 50309

CoCode: 21407  
Group Code: 62  
Group Name:

State of Domicile: Iowa  
Company Type: P & C  
State ID Number:

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 Product Name: Personal Auto  
 Project Name/Number: /

(800) 247-2128 ext. [Phone] FEIN Number: 42-6070764

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Employers Mutual Casualty Company CoCode: 21415 State of Domicile: Iowa  
 717 Mulberry Street Group Code: 62 Company Type: P & C  
 Des Moines, IA 50309 Group Name: State ID Number:  
 (800) 247-2128 ext. [Phone] FEIN Number: 42-0234980

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Employers Mutual Casualty Company	\$100.00	08/06/2009	29669416
EMCASCO Insurance Company	\$0.00	08/06/2009	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	08/27/2009	08/27/2009

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Alexa Grissom	08/27/2009	08/27/2009	Jo Byers	08/27/2009	08/27/2009
Pending Industry Response	Alexa Grissom	08/20/2009	08/20/2009	Jo Byers	08/24/2009	08/24/2009
Pending Industry Response	Alexa Grissom	08/11/2009	08/11/2009	Jo Byers	08/12/2009	08/12/2009

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
objection	Note To Reviewer	Jo Byers	08/11/2009	08/11/2009

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
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## Disposition

Disposition Date: 08/27/2009  
 Effective Date (New): 10/15/2009  
 Effective Date (Renewal):  
 Status: Filed  
 Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
EMCASCO Insurance Company	-1.200%	-0.200%	\$-822	556	\$395,570	%	%
Employers Mutual Casualty Company	-1.200%	0.300%	\$89	47	\$32,080	%	%

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	-1.200%
Overall Percentage Rate Impact For This Filing	-0.200%
Effect of Rate Filing-Written Premium Change For This Program	\$-733
Effect of Rate Filing - Number of Policyholders Affected	603

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
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 Product Name: Personal Auto  
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	A-1 Private Passenger Auto Abstract	Filed	Yes
Supporting Document (revised)	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	Exhibits	Filed	Yes
Rate	manual pages	Filed	Yes

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Product Name: Personal Auto  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 08/27/2009  
Submitted Date 08/27/2009  
Respond By Date

Dear Jo Byers,

This will acknowledge receipt of the captioned filing. We need a separate APCS for each insurer. Also, please omit the group code; only the NAIC number is required.

Please feel free to contact me if you have questions.

Sincerely,  
Alexa Grissom

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 08/27/2009  
Submitted Date 08/27/2009

Dear Alexa Grissom,

### Comments:

### Response 1

Comments: forms attached.

### Changed Items:

#### Supporting Document Schedule Item Changes

Satisfied -Name: APCS-Auto Premium Comparison Survey

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

*SERFF Tracking Number:* EMCC-126257785      *State:* Arkansas  
*First Filing Company:* EMCASCO Insurance Company, ...      *State Tracking Number:* EFT \$100  
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*TOI:* 19.0 Personal Auto      *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)  
*Product Name:* Personal Auto  
*Project Name/Number:* /  
**Jo Byers**

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
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TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 08/20/2009  
Submitted Date 08/20/2009  
Respond By Date

Dear Jo Byers,

This will acknowledge receipt of the captioned filing. The file is named with xlsx in lieu of xls and it asks for a password when we try to open it.

Please feel free to contact me if you have questions.

Sincerely,  
Alexa Grissom

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 08/24/2009  
Submitted Date 08/24/2009

Dear Alexa Grissom,

### Comments:

### Response 1

Comments: APCS attached

### Changed Items:

#### Supporting Document Schedule Item Changes

Satisfied -Name: APCS-Auto Premium Comparison Survey

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

*SERFF Tracking Number:* EMCC-126257785      *State:* Arkansas  
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*Company Tracking Number:* AR-PA-2009-03  
*TOI:* 19.0 Personal Auto      *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)  
*Product Name:* Personal Auto  
*Project Name/Number:* /  
**Jo Byers**

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Company Tracking Number: AR-PA-2009-03  
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 08/11/2009

Submitted Date 08/11/2009

Respond By Date

Dear Jo Byers,

This will acknowledge receipt of the captioned filing. The APCS must be completed without being altered. Do not change the password or attempt to password it.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

## Response Letter

Response Letter Status Submitted to State

Response Letter Date 08/12/2009

Submitted Date 08/12/2009

Dear Alexa Grissom,

### Comments:

### Response 1

Comments: As far as I know, the excel form has not been altered in any way. Please explain what you think has been altered. Thank you.

### Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

*SERFF Tracking Number:* EMCC-126257785      *State:* Arkansas  
*First Filing Company:* EMCASCO Insurance Company, ...      *State Tracking Number:* EFT \$100  
*Company Tracking Number:* AR-PA-2009-03  
*TOI:* 19.0 Personal Auto      *Sub-TOI:* 19.0001 Private Passenger Auto (PPA)  
*Product Name:* Personal Auto  
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**Jo Byers**

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Product Name: Personal Auto  
Project Name/Number: /

**Note To Reviewer**

**Created By:**

Jo Byers on 08/11/2009 02:54 PM

**Last Edited By:**

Alexa Grissom

**Submitted On:**

08/27/2009 01:27 PM

**Subject:**

objection

**Comments:**

Nothing was changed on the excel form that I am aware of. Please explain what you think has been altered. Thank you.

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 TOI: 19.0 Personal Auto  
 Product Name: Personal Auto  
 Project Name/Number: /

State: Arkansas  
 State Tracking Number: EFT \$100  
 Sub-TOI: 19.0001 Private Passenger Auto (PPA)

## Rate Information

Rate data applies to filing.

**Filing Method:** file & use  
**Rate Change Type:** Decrease  
**Overall Percentage of Last Rate Revision:** -4.800%  
**Effective Date of Last Rate Revision:** 12/15/2008  
**Filing Method of Last Filing:** file & use

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
EMCASCO Insurance Company	-1.200%	-0.200%	\$-822	556	\$395,570	%	%
Employers Mutual Casualty Company	-1.200%	0.300%	\$89	47	\$32,080	%	%

## Overall Rate Information for Multiple Company Filings

**Overall % Rate Indicated:** -1.200%  
**Overall Percentage Rate Impact For This Filing:** -0.200%  
**Effect of Rate Filing - Written Premium Change For This Program:** \$-733

SERFF Tracking Number: EMCC-126257785  
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Company Tracking Number: AR-PA-2009-03  
TOI: 19.0 Personal Auto  
Product Name: Personal Auto  
Project Name/Number: /

State: Arkansas  
State Tracking Number: EFT \$100  
Sub-TOI: 19.0001 Private Passenger Auto (PPA)

**Effect of Rate Filing - Number of Policyholders Affected:**

603

<i>SERFF Tracking Number:</i>	<i>EMCC-126257785</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>EMCASCO Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
<i>Company Tracking Number:</i>	<i>AR-PA-2009-03</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Personal Auto</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Rate/Rule Schedule

<b>Schedule Item</b>	<b>Exhibit Name:</b>	<b>Rule # or Page</b>	<b>Rate Action</b>	<b>Previous State Filing Attachments</b>
<b>Status:</b>		<b>#:</b>		<b>Number:</b>
Filed 08/27/2009 manual pages		PA-1 - PA-47, PA-R-2 - PA-R- 7, PA-T-1 - PA- T-10, PA-X-1 - PA-X-4	Replacement	rev_agency.pdf rev_xpg.pdf

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 UNDERWRITING ELIGIBILITY
 

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**1. NEW BUSINESS**


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The basis of our competitive rate structure is the careful selection of risks. Our agents have the authority to bind coverage for a maximum of 30 days for written binders, 72 hours for oral binders. Written binders are to be forwarded to your branch underwriter within 3 days of the effective date.

\*

**Minimum Requirements:**Deductibles for 2010 And Prior:

Vehicle Symbols 12 through 20:

\$100 Comprehensive

\$250 Collision

Vehicle Symbols 21 and higher:

\$250 Comprehensive

\$250 Collision

Deductibles for 2011 And After:

Vehicle Symbols 16 to 41:

\$100 Comprehensive

\$250 Collision

Vehicle Symbols 42 to 65:

\$250 Comprehensive

\$500 Collision

**A. PRIOR APPROVAL**

Coverage shall not be bound for a risk having any of the following characteristics or conditions until (1) all information has been reviewed by the company for appropriate underwriting and (2) the agent has been granted approval for binding coverage.

**1. Operators:**

- a. Any operator without a valid driver's license from the resident state. (An International driver's license is not acceptable). One-year permanent residency is required.
- b. Any operator with a physical impairment, severe heart or eyesight condition, inoperable limbs or a history of mental disorder which affects the operation of a vehicle

\*

**2. Vehicles:**

- a. Antique, classic or any auto 15 years and older with physical damage coverage.
- b. Vehicles Symbol 27 and higher.
- c. 2010 Model Year Vehicles and Prior Symbol 27 and higher
- d. 2011 Model Year Vehicles and After Symbol 65 and higher
- e. Motor homes over \$80,000
- f. Any vehicle on the Restricted Vehicle 'A' list refer to the Personal Auto Symbol and Vehicle Identification section of the Agent Manual at [www.emcins.com](http://www.emcins.com) to determine if a vehicle is one that is restricted.

**B. UNACCEPTABLE RISKS****THE FOLLOWING RISKS CANNOT BE SUBMITTED, ACCEPTED OR BOUND:****1. Operators:**

- a. Any operator who has not maintained auto insurance throughout the past 12 months.  
**Exception:** An interruption of coverage due to overseas military service in the Armed Forces will not affect eligibility.

**1. NEW BUSINESS ELIGIBILITY (Cont'd.)**

- b. Any operator with a major conviction (Refer to Violations and Convictions List, Group A) including all suspensions and revocations, and/or who has required a financial responsibility filing in the past 5 years.
- c. Any operator, whose coverage has been cancelled, declined, non-renewed (except for the termination of an agency contract), or written under the Automobile Insurance Plan (Assigned Risk).
- d. Any household member in the military unless a home is owned in the state where seeking insurance.
- e. Brokered business.

**2. Vehicles:**

- a. Any vehicle used for delivery or transportation of goods or people.
- b. Any vehicle on the Restricted Vehicle "A" List. refer to the Personal Auto Symbol and Vehicle Identification Information section of the Agent Manual at [www.emcins.com](http://www.emcins.com) to determine if a vehicle is one that is restricted.
  - 1. ATV's;
  - 2. Kit cars;
  - 3. Gray market cars;
  - 4. Dune buggies;
  - 5. Recreational type vehicles used in off road activities;
  - 6. Street rods;
  - 7. Modified/custom built "one of a kind" type vehicles.
- c. Vehicles used for snow removal or as service station vehicles.
- d. Defective vehicles, which may endanger public safety.
- e. Motor homes used as residences.
- f. Any vehicle garaged out of state where rates are not filed and/or without a non-resident agent license.
- g. Liability only risks. (Comprehensive and collision coverage are required on one vehicle)

**C. AGENT INFORMATION**

- 1. A Medical Statement may be requested for operators age 75 and over.
- 2. Photos are required for antique autos, classic autos and vehicles over 15 years, with physical damage coverage.
- 3. A completed Questionnaire is required for customized vans and pick-ups with physical damage coverage.
- 4. The Company will order an Insurance Score (CBR). Any risk with a score that does not qualify for EMCASCO shall be placed in EMCC.
- 5. Vehicles with Salvage Titles are eligible for liability coverage only in EMCC.

**D. DRIVING EXPERIENCE**

<b>EMCC:</b>	5 years
<b>EMCASCO:</b>	7 years Single*
	5 years Married*

\*Youthful Operators with less than 5 years driving experience are acceptable in EMCASCO if written in conjunction with their parents' policy. A clear MVR is required in EMCASCO and one non-moving violation is permitted in EMCC.

9 years-driving experience is required for the operator of any vehicle on the Restricted Vehicle "B" List. Refer to [www.emcins.com](http://www.emcins.com) for complete list of restricted vehicles.

**1. NEW BUSINESS ELIGIBILITY (Cont'd.)****E. MAXIMUM ALLOWABLE ACCIDENTS AND VIOLATIONS PER OPERATOR  
(36 MONTH HISTORY)**

ARKANSAS	EMCASCO	EMCC
<b>Moving Violations</b>		
Youthful Operator	NOT ELIGIBLE*	1
All Other Operators	0	1
Per Household	0	1
<b>Non-Moving Violations</b>		
Youthful Operator	NOT ELIGIBLE*	1
All Other Operators	0	1
Per Household	0	2
<b>At-Fault Accidents</b>		
Youthful Operator	NOT ELIGIBLE*	0
All Other Operators	0	0

\*Youthful Operators with less than 5 years driving experience are acceptable in EMCASCO if written in conjunction with their parent's policy.

Refer to the Violations and Convictions section for a list of moving and non-moving violations.

**F. MAXIMUM OTC (COMPREHENSIVE) LOSSES AND TOWING CLAIMS PER HOUSEHOLD  
(36 MONTH HISTORY)**

	OTC	TOWING
<b>EMCC</b>	2 Over \$200	2
<b>EMCASCO</b>	1 Over \$200	1

**2. NON-PAYMENT CANCELLATION**

When a policy has been cancelled for non-payment of premium, it will not be reinstated after the cancellation date has become effective.

Subject to the underwriter's authorization, a policy may be reinstated prior to the effective date of cancellation. However, this will not be done more than three times, or more than twice in a two year period, regardless of how long the policy has been in force.

Agents are not authorized to accept payments for direct bill policies on the company's behalf under any circumstance without prior company approval.

\*

**3. CUSTOMER PLUS PROGRAM**

Those risks meeting the eligibility guidelines below will be eligible for the Customer Plus program which will result in a 15% discount applied to the total policy premium, as follows:

1. Zero moving violations per household
2. Zero non-moving violations per household
3. Zero at-fault accidents per household
4. Home owned and insured with EMC in Union
5. At least one vehicle with comprehensive and collision coverages

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\* **4. CUSTOMER PLUS PROGRAM — RENEWAL ELIGIBILITY — (36 MONTH HISTORY)**

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Risks which do not meet the guidelines listed below will have the Customer Plus discount removed upon the following renewal.

1. Zero moving violations per household
2. Zero non-moving violations per household
3. Zero at-fault accidents per household
4. Home owned and insured with EMC in Union
5. At least one vehicle with comprehensive and collision coverages

\* **5. RENEWAL GUIDELINE ELIGIBILITY — MAXIMUM PER HOUSEHOLD — (36 MONTH HISTORY)**

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- A. No more than one additional at fault accident; or,
- B. No more than one additional moving violation, Group B; or,
- C. No more than two additional non-moving violations, Group C; or,
- D. No more than one additional comprehensive loss; or,
- E. No more than one additional towing loss.

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**\* 6. VIOLATIONS AND CONVICTIONS**

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This is a condensed list of countrywide violations and convictions. It is NOT all-inclusive and many categories shown are generalizations. Any violation or conviction that cannot be categorized will be routed to Underwriting. "All" refers to any version of a similar conviction/violation, which may vary by state.

**A. GROUP A: Operators charged/convicted with any Group A Violation/Conviction are UNACCEPTABLE**

1. Altered, forged, or counterfeit title, registration or plates
2. Cancellation, denial or disqualification – ALL
3. Drag racing – ALL
4. Driving to endanger
5. Driving under the influence; Operating while intoxicated; Refusal to submit to chemical test; open container – alcohol or drugs – ALL
6. Driving While registration cancelled or suspended
7. Driving while suspended, revoked, disqualified, barred or withdrawn – ALL
8. Failure to notify – ALL
9. Failure to surrender suspended or revoked license
10. Failure to comply with financial responsibility law; failure to post security; Failure to file SR-22 – ALL
11. Fleeing or attempting to elude police officer
12. Habitual violator or offender – ALL
13. Hit & run; Leaving accident scene before police arrive – ALL
14. Involuntary manslaughter; Homicide; Violation of vehicle law resulting in death
15. Mutilated License
16. Reckless driving – ALL
17. Revocation – ALL
18. Serious offense – ALL – including speeding in excess of 15 mph
19. Suspension – ALL
20. Unauthorized use of motor vehicle
21. Unsatisfied judgment
22. Withdrawal – ALL

**B. GROUP B: Moving Violations**

1. Allowing unauthorized person to drive
2. Careless or negligent operation
3. Crossing fire hose
4. Driving over center lane or on wrong side of road
5. Driving too slow
6. Driving where prohibited – ALL
7. Failure to file future proof following conviction, or reason unspecified
8. Failure to obey traffic device, traffic control signal, sign or police officer – ALL
9. Failure to stop

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**6 VIOLATIONS AND CONVICTIONS (Cont'd.)**

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10. Failure to yield – ALL
11. Failure to maintain safe distance – ALL
12. Failure to dim headlights
13. Failure to use lamps, signals – ALL
14. Failure to have vehicle under control
15. Following too close
16. Improper backing
17. Improper lane use/change
18. Improper passing – ALL
19. Improper signal/fail to signal
20. Improper start
21. Improper turn – ALL
22. Improperly transporting passenger
23. Obstructed vision
24. Out of state violation
25. Passed a stopped school bus
26. Passing where prohibited – ALL
27. Speeding – ALL
28. Spinning wheels; excessive acceleration, etc.
29. Unlawful use of license; lending, displaying – ALL
30. Unsafe U-turn
31. Unspecified lane violation
32. Violation of provisional, probational, juvenile, school, restricted license or permit
33. Wrong way – ALL

**C. GROUP C: Non-moving Violations**

1. Defective equipment (brakes, lights, mirrors, wipers, horn, muffler, unsafe tires, etc.)
2. Driving without correct license class
3. Excessive noise
4. Failure to use child restraint system
5. Failure to use headlights, lamps, signals – ALL
6. Illegal equipment
7. Improper towing
8. Litter, drop or throw any object at a vehicle or on the road
9. Miscellaneous – DMV designation
10. No drivers license (Driver is to carry license and display on demand)
11. Obstructed vision (snow, ice, etc.)
12. Operating vehicle in unsafe condition
13. Seat belt or restraint system violation
14. Tinted windows
15. Unlawful possession of vehicle equipment

## PERSONAL VEHICLE MANUAL RULES

**A. ADDITIONAL COMPANY RULES****1. COMBINATION POLICY DISCOUNT****A. Eligibility**

\*

*When the same named insured has both a Personal Auto and a Homeowners policy written in any company within the EMC Group, a 20% discount is applied to the final premium of each policy after application of all other premium modifications.*

**B. Discount Effective Date**

*If a qualifying policy is written with a non-concurrent date, the discount will be applied to both the auto and homeowners policies at the earliest date that concurrent coverage is in effect. The discount may be applied or deleted midterm.*

**C. Cancellation or Non-Renewal**

*In the event either the Personal Auto or Homeowners Policy is cancelled or non-renewed, the discount may be deleted from the remaining policy midterm (date concurrent coverage is no longer in effect) or at the next renewal date.*

**2. INSURANCE SCORING**

*A discount will be applied to the Personal Auto Policy premium, based upon the current Insurance Score derived from ChoicePoint's insurance scoring model, to reflect the correlation found between an individual's ability to handle and manage credit (responsibility characteristics) and the ability to manage insurance risk in the same responsible manner. The premium is computed by multiplying the Coverage Premiums (BI, PD, CSL, MED, COMP, COLL, UM, UIM) by the appropriate factor as follows (Point of Sale message will indicate score level discount to apply):*

*Score Level A – 1.00*

*Score Level B – .80 (includes No Hits/Unscorables—shown as Score Level N)*

*Score Level C – .70*

*Score Level D – .60*

*Score Level E – .55*

**3. LIABILITY & PIP/MEDICAL PAYMENTS (PIP) VEHICLE RATING PLAN (LPMP)****A. Introduction**

The following contains the rules and rating provisions governing the Liability and PIP/Medical Payments (LPMP) Vehicle Rating Plan.

**B. LPMP Symbols**

The LPMP Symbols Pages (hereafter, the Symbol Pages) contain the rating symbols for the LPMP Vehicle Rating Plan.

The Symbol Pages display LPMP symbols for all vehicles to which this Rating Plan applies.

For each vehicle listed on the Symbol Pages, two LPMP rating symbols are provided: one symbol applicable to BI and PD Liability Coverages, and a second symbol applicable to Medical Payments Coverage.

The symbols are displayed on a vehicle series basis, and apply to all vehicles (all VINs) in a vehicle series. The LPMP symbols do not vary by model year of vehicle unless otherwise noted.

**C Model Years**

1. The LPMP symbols are applicable to 2004 and subsequent model years.

**A. ADDITIONAL COMPANY RULES (Cont'd.)****D. Premium Determination**

1. The LPMP vehicle rating factors are multiplicative factors that are applied to the premiums for BI & PD liability coverage and Medical Payments coverage after applying the classification rating factor.

**Note:**

The premium determination procedure applicable to BI & PD Liability coverages also applies to Single Limit Liability Coverages). See examples below

- a. BI Liability Premium = BI Rate X Classification rating factor X LPMP BI & PD Liability vehicle rating factor.
  - b. PD Liability Premium = PD Rate X Classification rating factor X LPMP BI & PD Liability vehicle rating factor.
  - c. Medical Payments(PIP) = Med Pay Rate X Classification rating factor X LPMP Medical Payments (PIP) vehicle rating factor.
2. The LPMP Vehicle Rating Plan does not affect the premium determination procedures that apply to Comprehensive and Collision coverage , or to other coverages not specified in these rules.
  3. If the provisions of Personal Vehicle Manual (PVM) Rule **3.F.** apply to the risk, or if the an expense fees are applicable, apply those rating provisions in accordance with the premium determination procedures.
  4. LPMP vehicle rating factors do not apply to risks rated in accordance with PVM Rule **16.**, Named Non-Owner Coverage, or Rule **17.**, Extended Non-Owned Liability Coverage.

**E. Vehicle Rating Factors**

Refer to page PA-F-9

**1. DEFINITIONS****A. PRIVATE PASSENGER AUTO**

1. A private passenger auto is a four wheel motor vehicle, other than a truck type, owned or leased under contract for a continuous period of at least six months, and
  - a. not used as a public or livery conveyance for passengers,
  - b. not rented to others.
2. A motor vehicle that is a pickup or van shall be considered a private passenger auto, if it:
  - a. has a Gross Vehicle Weight Rating of 10,000 lbs. or less, or is a vehicle with a Gross Vehicle Weight Rating greater than 10,000 lbs. for which a symbol is displayed on the Symbol and Identification section; and
  - b. is not used for the delivery or transportation of goods or materials unless such use is:
    - (1) incidental to the insured's business of installing, maintaining or repairing furnishings or equipment, or
    - (2) for farming or ranching.

A pickup or van used in the business of the United States Government, by an employee of the Government, shall be considered a private passenger auto only if:

- a. it meets the conditions in a. and b. above; and
- b. coverage is limited in accordance with the federal employees using autos in government business endorsement. **(PP0301)**

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**1. DEFINITIONS (Cont'd.)**


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3. A motor vehicle owned by a farm family co-partnership, or farm family corporation shall be considered a private passenger auto owned by two or more relatives who are residents of the same household if:
  - a. it is principally garaged on a farm or ranch, and
  - b. it otherwise meets the definitions in 1. and 2. above.
- B. AUTO** as used in this manual, refers to a private passenger auto or a vehicle considered as a private passenger auto.
- C. LIABILITY** as used in this manual, refers only to Bodily Injury and Property Damage Coverages.
- D. SINGLE LIMIT LIABILITY** as used in this manual, refers to one limit of liability that covers both Bodily Injury and Property Damage.
- E. COMPREHENSIVE COVERAGE** as used in this manual, refers to other than collision damage to a motor vehicle.
- F. OWNED** as used in this manual includes:
  1. An auto leased under contract for a continuous period of at least six months. If an auto lease contract requires the lessee to provide primary insurance for the lessor, attach the additional insured-lessor endorsement. **(PP0319)**
  2. A vehicle owned by a trust. Refer to Rule **2.E.** for eligibility requirements applicable to vehicles owned by a trust.
- G. GROSS VEHICLE WEIGHT RATING** as used in this manual refers to the maximum loaded weight for which a single vehicle is designed, as specified by the manufacturer.

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**2. PERSONAL AUTO POLICY – ELIGIBILITY**


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- A.** A Personal Auto Policy shall be used to afford coverage to private passenger autos and motor vehicles considered as private passenger autos in Rule 1. if:
  1. They are written on a specified auto basis, and
  2. They are owned by an individual or by a husband and wife who are residents of the same household. Both husband and wife who are residents in the same household may be listed as named insureds on the declaration page.
- B.** A Personal Auto Policy shall be used to afford coverage to private passenger autos and pickups and vans as defined in Rule 1. that are owned jointly by two or more:
  1. resident relatives other than husband and wife; or
  2. resident individuals; or
  3. non-resident relatives, including a non-resident husband and wife; if
    - (a) They are written on a specified auto basis, and
    - (b) The policy affords coverage only for such private passenger autos, pickups or vans which are jointly owned, and
    - (c) The Joint Ownership Coverage endorsement is attached. Refer to the endorsement for the extent of coverage. **(PP0334)**

**Note**  
The insurer may elect to not apply the non-owned auto liability coverage exclusion under the Joint Ownership Coverage endorsement. Refer to company for the application of this exclusion.
- C.** A Personal Auto Policy shall be used to afford coverage to motorcycles, motor homes, golfcarts or other similar type vehicles and snowmobiles if:
  1. They are written on a specified vehicle basis.

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**2. PERSONAL AUTO POLICY – ELIGIBILITY (Cont'd.)**

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2. They are owned by:
    - (a) an individual;
    - (b) a husband and wife;
    - (c) two or more relatives other than husband and wife; or
    - (d) two or more resident individuals; and
  3. Coverage is limited in accordance with the miscellaneous type vehicle (**PP0323**) or snowmobile (**PP0320**) endorsement.
- D.** A Personal Auto Policy shall be used to afford coverage to a named individual who does not own an auto. The named non-owner coverage endorsement must be attached (**PP0322**).
- Exception:** Exposure A., B. or C. above may be written under a commercial auto policy when combined with a commercial risk.
- E.** A Personal Auto Policy shall be used to afford coverage to:
1. Private passenger autos and motor vehicles considered as private passenger autos in Rule 1.; and
  2. Motorcycles, motor homes, golf carts or other similar types of vehicles and snowmobiles; if title to the vehicle(s) has been transferred to a trust, subject to the following requirements:
    1. Requirements
      - a. The grantor of the trust must be:
        - (1) An individual or a husband and wife; and
        - (2) The only named insured(s) shown in the Declarations.
      - b. All vehicles insured under the policy must be owned by the trust.
      - c. A vehicle owned by a trust, in which the grantor is a corporate entity, is not eligible under the Personal Auto Program but may be written under a commercial auto policy.
    2. Endorsement  
Attach endorsement **PP1303 – Trust Endorsement** to the policy.

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**3. PREMIUM DETERMINATION**

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Single Limit Liability, or Bodily Injury Liability and Property Damage Liability; Medical Payments; Comprehensive and Collision premiums are determined as follows:

- A.** Refer to the Classification Rule to determine the applicable Classification, Rating Factor and Statistical Code.
- B.** Model Year and Symbol Determination
  1. Refer to the Model Year Rule to determine the model year of the auto and refer to the Symbol and Identification Section for the appropriate symbol of the auto.  
When model year is used in rating and the rates for a model year are not displayed in the Rate Pages, use the rates shown for the latest model year.
  2. If no Rating Symbol is shown in the Symbol and Identification (S&I) Section, use the following procedure to determine an interim rating symbol.
    - a. If the S&I Section displays a rating symbol for the PRIOR MODEL YEAR version of the same vehicle, use the prior model year's Rating Symbol for the new model year vehicle.
    - b. If the S&I Section does NOT display a rating symbol for the PRIOR MODEL YEAR version of the same vehicle, assign a symbol based on the cost new of the auto, using the Price/Symbol Chart located in the reference pages of the S&I Section.

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**3. PREMIUM DETERMINATION (Cont'd.)**

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C. Refer to Territory Definitions to determine the territory code number for the location where the auto is principally garaged.

**NOTE:** When a risk is statutorily required to have, or is eligible for, a coverage that is not available in the territory of principal garaging, use the registration address to determine the territory for that coverage.

D. Refer to the Rate Pages to determine base rates for the desired coverage for the appropriate territory.

E. *The premium for each coverage is determined by multiplying the base rate by the appropriate rating factor.*

F. When a surcharge is applicable under the Certified Risk – Financial Responsibility Laws Rule, the surcharge is to be applied to the liability premium determined by the foregoing provisions.

**G. College Graduate Scholastic Achievement Discount**

1. A 5% discount on Bodily Injury and Property Damage Liability (or Single Limit Liability), Medical Payments, Comprehensive and Collision coverage premiums shall be afforded to those insureds who meet the College Graduate Scholastic Achievement Discount eligibility criteria set forth in 2. below.

The discount shall be afforded to the one vehicle to which the eligible insured is assigned for classification and rating purposes. If the eligible insured has **not** been used to classify any vehicle on the policy, the discount shall be afforded to the one vehicle that the eligible insured operates most frequently.

2. **Eligibility:** An insured is eligible for this discount if:

a. he or she is under twenty-five years old and has graduated from a college or university, and

b. his or her cumulative scholastic record shows that he or she attained one of the following:

(1) a grade average of "B" or higher, if letter grades are used, or

(2) at least a 3 point average on a 4 point scale (or equivalent).

An insured is **not** eligible for this discount if he or she is a married operator who has been used to classify a vehicle on the policy.

3. This discount shall be provided to each eligible insured on the policy who qualifies for the discount.

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**4. CLASSIFICATIONS**

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This rule does not apply to risks rated in accordance with the Miscellaneous Types Rule unless the Miscellaneous Types rule states, *Classify and rate as a private passenger auto.*

Refer to Section C below for definitions of terms used in this rule.

A. Autos owned by an individual or owned jointly by two or more relatives or resident individuals are classified as follows:

**1. Primary Classification**

a. Classify the auto according to the age, sex and marital status of the operators, the use of the auto and the eligibility of licensed youthful operators for the Driver Training and/or Good Student classes, and

b. Determine the applicable factor from the Primary Rating Factor tables.

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#### 4. CLASSIFICATIONS (Cont'd.)

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##### 2. Secondary Classification

- a. Determine if the auto is:
  - (1) a single car, or
  - (2) part of a multi-car risk.
- b. Refer to the Safe Driver Insurance Plan, to classify licensed operators according to the provisions of the Plan.
- c. Refer to the Secondary Rating Factor table to determine the appropriate factor to be added to, or subtracted from the Primary Rating Factor.

##### 3. Classification Changes

Compute premium adjustments on a pro-rata basis when changes in Primary and Secondary Rating Classifications are made. This includes the addition or deletion of an operator during the policy term.

##### Exceptions:

1. A policy shall **not** be changed mid-term because of the attained age of an operator of the auto.
2. A policy shall **not** be changed mid-term to affect a change in the Driving Record Sub-Classification.
3. Policies exceeding one year.  
*Section 3. does not apply.*
4. A policy shall not be changed midterm solely due to the change in symbol assignment based on a review of loss experience.

#### B. Private Passenger Autos owned by farm family co-partnerships or farm family corporations and covered by a Personal Auto Policy

A private passenger auto owned by a farm family co-partnership or farm family corporation, and principally garaged on a farm or ranch shall be classified and rated in accordance with Rule 4.A., provided that vehicle is:

1. Not experience rated; and
2. Not used in an occupation other than farming or ranching; or
3. Used only in driving to or from work.

#### C. Definitions

##### 1. Use Classifications

- a. **BUSINESS USE** means that the use of the auto is required by or customarily involved in the duties of the applicant or any other person customarily operating the auto, in an occupation, profession or business, other than going to or from the principal place of occupation, profession or business.
- b. **FARM USE** means the auto is principally garaged on a farm or ranch, and
  - (1) it is not customarily used in going to or from work other than farming or ranching, or driving to or from school, and
  - (2) it is not customarily used in any occupation other than farming or ranching.
- c. **PLEASURE USE** means:
  - (1) no **BUSINESS USE**,
  - (2) personal use including driving to or from work or school:
    - (a) less than 3 road miles one way; and
    - (b) 3 or more, but less than 15 road miles one way for not more than 2 days per week or not more than 2 weeks in any 5 week period.

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**4. CLASSIFICATIONS (Cont'd.)**


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- d. **WORK LESS THAN 15 MILES** means:
- (1) no **BUSINESS USE**,
  - (2) personal use including driving to or from work or school:
    - (a) 3 or more, but less than 15 road miles one way if such usage is more than 2 days per week or more than 2 weeks per 5 week period; or
    - (b) 15 or more road miles one way, for not more than 2 days per week or not more than 2 weeks in any 5 week period.
- e. **WORK 15 OR MORE MILES** means:
- (1) no **BUSINESS USE**,
  - (2) personal use including driving to or from work or school 15 or more road miles one way more than 2 days per week or more than 2 weeks in any 5 week period.
- f. An auto driven part way to or from work or school, such as to a railroad or bus depot, whether or not the auto is parked at the depot during the day, shall be considered as driving to or from work or school.

**LIABILITY**

- g. An auto used in the business of the U.S. Government by one of its employees may be classified and rated as PLEASURE USE, WORK LESS THAN 15 MILES OR WORK 15 OR MORE MILES when the federal employees using autos in government business endorsement is used to limit coverage.
- 2. Age, Sex and Marital Status Classifications**
- a. **YOUTHFUL OPERATOR**
- means an applicant or any other operator resident in the same household as the applicant who customarily operates the auto, or any other person who customarily operates the auto, who is one of the following:
- (1) **YOUTHFUL UNMARRIED MALE OPERATOR** — unmarried male under 25 years of age who is not an owner or principal operator;
  - (2) **YOUTHFUL UNMARRIED MALE OWNER OR PRINCIPAL OPERATOR** — unmarried male under 30 years of age who is an owner or principal operator.
  - (3) **YOUTHFUL MARRIED MALE OPERATOR** — married male under 25 years of age;
  - (4) **YOUTHFUL UNMARRIED FEMALE OPERATOR** — unmarried female under 25 years of age who is not an owner or principal operator;
  - (5) **YOUTHFUL UNMARRIED FEMALE OWNER OR PRINCIPAL OPERATOR** — unmarried female under 30 years of age who is an owner or principal operator;
  - (6) **YOUTHFUL MARRIED FEMALE OPERATOR** — married female under 25 years of age
- b. **NO YOUTHFUL OPERATOR** means;
- (1) A Youthful Operator classification is not applicable to the auto, and
  - (2) The applicant or any other operator resident in the same household as the applicant who customarily operates the auto, or any other person who customarily operates the auto, is one of the following:
    - (a) Operator Age 30-39
    - (b) Operator Age 40-49
    - (c) Operator Age 50-64
    - (d) Operator Age 65-74

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**4. CLASSIFICATIONS (Cont'd.)**


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- (e) Operator Age 75-79
  - (f) Operator Age 80-84
  - (g) Operator Age 85 or Over
  - (h) All Other Operators Age 25-29: Operators who are ages 25-29 but who are not eligible for any Youthful Operator classification.
- c. **AGE** means the age attained on the last birthday.
  - d. **MARRIED** means a married person living with his or her spouse and includes a person widowed, divorced or legally separated only if such person has custody of one or more resident children.
  - e. **RESIDENT** means anyone residing in the same household.

**Exceptions:**

- 1) A person in active military service with the armed forces of the United States of America is not considered a resident in the applicant's household unless this person customarily operates the auto.
- 2) If a **YOUTHFUL UNMARRIED FEMALE OPERATOR** or a **YOUTHFUL UNMARRIED MALE OPERATOR** is a student residing at an educational institution over 100 road miles from the auto's place of principal garaging, the auto is rated as if the student is **MARRIED**.

**3. Single Car and Multi-Car Risks: Operator Assignment Rule**

- a. Classify Single Car risks and Multi-Car risks according to Rules **4.C.3.b.** or **4.C.3.c.** below, depending on whether a Youthful Operator classification applies to any auto being insured on the policy.
  - (1) Rule **4.C.3.b.** applies if a Youthful Operator classification applies to any auto on the policy.
  - (2) Rule **4.C.3.c.** applies if a Youthful Operator classification does NOT apply to any auto on the policy
- b. **Operator assignment:** Policies insuring one or more **Youthful Operators**.
  - (1) Single Car Risks – The youthful operator with the highest Primary Rating Factor shall apply.
  - (2) Multi-Car Risks
    - (a) Assign each youthful principal operator to the auto he/she principally operates. If a youthful operator is the principal operator of more than one auto, assign that operator to the auto with the highest total base premium.
    - (b) Assign other youthful operators to remaining autos as follows:
      - (i) Determine the pleasure use primary rating factors of all youthful operators.
      - (ii) Assign the youthful operator with the highest primary rating factor to the auto he/she operates most frequently.
      - (iii) *Remaining youthful operators are assigned to remaining autos. but not more than one youthful operator assigned to any one auto.*
      - (iv) After assigning youthful operators to autos on the basis of pleasure use rating factors, each factor must be adjusted for the actual use of the auto before determining and applying the Secondary Rating Factor.

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**4. CLASSIFICATIONS (Cont'd.)**

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- (c) After all youthful operators have been assigned to autos according to (a) and (b) above, assign the appropriate No Youthful Operator classification to remaining autos equal to the number of operators insured on the policy. Use the following operator assignment criteria:
    - (i) Establish the auto's classification rating factor based on the driver who most frequently operates the auto. If two or more drivers operate one auto equally, establish the classification rating factor based on the driver with the highest primary rating factor.
    - (ii) An operator who is used to establish an auto's classification rating factor shall not be used to classify any other auto insured on the policy.
    - (iii) Any remaining operators are assigned to remaining autos in the order of the highest rated operator to the auto with the highest Total Base Premium.
  - (d) If the number of autos exceeds the number of operators, the Excess Autos 1 classification shall apply to the autos in excess of the number of operators.
- c. **Operator assignment:** Policies insuring **NO** drivers eligible for a **Youthful Operator** classification.
  - (1) Single Car Risks . Assign the appropriate No Youthful Operator classification based on the driver who most frequently operates the auto. If two or more drivers operate the auto equally, assign the driver with the highest primary rating factor to the auto.
  - (2) Multi-Car Risks . Assign operators to autos in accordance with Paragraph (a) below, then determine the classification rating factor for each auto in accordance with Paragraphs (b) and (c) below.
    - (a) Assign each operator to the autos he/she customarily operates. For the purpose of this operator assignment rule, each operator must be assigned to at least one auto, and each auto must have an operator assigned to it.
    - (b) Determine the classification rating factor for each auto as follows:
      - (i) If only one operator has been assigned to an auto, use that operator to establish the classification rating factor for the auto, except as noted in (ii) below.
      - (ii) If an operator is assigned to two or more autos and is the only operator assigned to those autos, use that operator to classify the auto with the highest total base premium that the individual operates.
      - (iii) An operator who is used to establish an auto's classification rating factor shall not be used to classify any other auto insured on the policy.
      - (iv) If more than one operator has been assigned to an auto, establish the classification rating factor based on the driver who most frequently operates the auto. If two or more drivers operate one auto equally, establish the classification rating factor based on the driver with the highest primary rating factor.
      - (v) Any remaining operators are assigned to remaining autos in the order of the highest rated operator to the auto with the highest Total Base Premium.
    - (c) If the number of autos exceeds the number of operators, refer to Rule **4.C.3.c.(3)** to classify autos in excess of the number of operators insured on the policy.
  - (3) Excess Autos . Classify autos in excess of the number of operators as follows:
    - (a) If all operators on the policy are age 40-74, the Excess Autos 2 (All Operators Age 40-74) classification shall apply to the autos in excess of the number of operators.
    - (b) If not all operators on the policy are age 40-74, the Excess Autos 1 classification shall apply to the autos in excess of the number of operators.

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**4. CLASSIFICATIONS (Cont'd.)**

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**d. Multi-Car Discount**

The applicable Multi-Car Rating Factor applies if more than one private passenger auto is owned by an individual or owned jointly by two or more relatives or resident individuals, and two or more autos are insured in the same company for any of the following coverages: single limit liability (or bodily injury and property damage liability,) medical payments, no-fault, comprehensive or collision.

*Exception: This credit is available for a Single Car Risk if the named insured is provided a company car by his/her employer for business and personal use.*

- e. TOTAL BASE PREMIUM** is the sum of the base premium for single limit liability or bodily injury and property damage liability, medical payments, no-fault, comprehensive and collision coverages that apply to the auto.

**4. Driver Training**

The applicable Driver Training Classification applies to each Youthful Operator under 21 years of age where "Satisfactory Evidence" is presented that such operator has successfully completed a driver education course meeting the following standards:

- a.** The course included a minimum of 30 clock hours of classroom instruction plus a minimum of 6 clock hours of actual driving experience per student. These requirements may be met in either of the following ways:
- (1)** A minimum of 6 clock hours per student of actual driving experience exclusive of observation time in the car.  
In this case, part of the required 30 clock hours of classroom instruction can be met by the time spent in an approved simulated practice driving trainer.  
Use of the driving trainer must be authorized by the State Department of Education or other responsible educational agency.
- (2)** A minimum of 3 clock hours per student of actual driving experience exclusive of observation time in the car, and  
A minimum of 12 clock hours per student in an approved practice driving trainer.  
In this case only time spent in excess of 12 clock hours may be counted as part of the required 30 clock hours of classroom instruction.  
Use of the driving trainer must be authorized by the State Department of Education or other responsible educational agency.
- b.** The course was conducted by instructors certified by the State Department of Education or other responsible educational agency, and
- c.** The course was conducted by a recognized secondary school, college or university and had the approval of the State Department of Education or other responsible educational agency, or
- d.** The course was conducted by other schools, and such course and school had the approval and supervision of the State Department of Education or other responsible educational agency, or
- e.** The course was conducted by a commercial driving school under the jurisdiction of the Motor Vehicle Department, provided that by Statute or Regulation such school meets the same requirements as schools having official sanction from the responsible state educational agency.
- f.** "Satisfactory Evidence" is a certificate signed by a school official certifying to the fulfillment of the requirements in a., b. and c., or d. or e. above.

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#### 4. CLASSIFICATIONS (Cont'd.)

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##### 5. Good Student

The applicable Good Student Classification applies provided:

- a. The owner or operator is –
  - (1) at least 16 years of age; and
  - (2) a full-time high school, college or university student.
- b. A certified statement from a school official is presented to the Company on each anniversary date of the policy indicating that the student has met one of the following requirements during the immediately preceding school semester:
  - (1) is in the upper 20% of his/her class scholastically, or
  - (2) maintains a “B” average, or its equivalent.
 

If the letter grading system cannot be averaged, then no grade can be below “B”.
  - (3) when in a school maintaining a numerical grade, must have at least a 3 in a 4, 3, 2, 1 point system or its equivalent.
  - (4) student is included in a “Dean’s List”, “Honor Roll” or comparable list indicating scholastic achievement.

A classification change resulting from a change in the scholastic standing of the student cannot be effected between anniversary dates of the policy.

##### 6. Vehicles Equipped With Anti-Theft Devices

These discounts apply to comprehensive coverage only. To qualify, the vehicle must be equipped with:

- a. a hood lock which can be released only from inside the vehicle, and
- b. a device meeting the criteria of either paragraph 1. or 2. below.

If a vehicle is equipped with more than one qualifying device, only the single highest discount shall apply.

Refer to Company for required evidence of installation of anti-theft devices meeting the following criteria prior to granting a discount.

##### (1) Alarm ONLY (Cov. Code 1) and Active Disabling Devices (Cov. Code 2)

A 5% discount on Comprehensive Coverage shall be afforded on vehicles equipped with (1) alarm only devices which sound an audible alarm that can be heard at a distance of at least 300 feet for a minimum of three minutes, or (2) active disabling devices which disable the vehicle by making the fuel, ignition or starting system inoperative. A disabling device is categorized as active if a separate manual step is required to engage the device.

##### (2) Passive Disabling Devices (Cov. Code 3)

A 15% discount on Comprehensive Coverage shall be afforded on vehicles equipped with passive disabling devices which disable the vehicle by making the fuel, ignition or starting system inoperative.

A disabling device is categorized as passive if a separate manual step is not required to engage the device.

##### 7. Safety Equipment Discounts

##### a. Passive Restraint Discount

The following discounts apply to Medical Payments and/or any No Fault Coverage only. To qualify, the private passenger auto must be equipped with a factory installed automatic occupant restraint, conforming to the federal crash protection requirements, and meeting the criteria of either paragraph 1. or 2. below:

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**4. CLASSIFICATIONS (Cont'd.)**


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(1) 20% discount shall be afforded when the restraint is installed in the driver-side-only position.

(2) 30% discount shall be afforded when the restraints are installed in both front out-board seat positions.

**b. Anti-Lock Braking System Discount**

A 5% discount for Single Limit Liability or Bodily Injury and Property Damage Liability coverage shall be afforded for those private passenger autos equipped with a factory installed four wheel Anti-Lock Braking System (ABS).

Refer to company for required evidence of factory installation of an Anti-Lock Braking System prior to granting a discount.

\*

**8. Pickups and Vans**

a. Liability and Physical Damage: Rate as private passenger auto.

For non-symbolled pickups, determine a symbol based on the original cost new from the Price/Symbol Charts in the Symbol and Identification Manual Section.

b. Refer to Rule **14.H** for rating of custom equipment on pickups and vans.

c. Camper bodies with or without facilities for cooking or sleeping: Rate as a separate item. Refer to Rule **19.B**.

**D. Motor Vehicle Accident Prevention Course Discount**

**LIABILITY, MEDICAL PAYMENTS, AND COLLISION**

1. The Motor Vehicle Accident Prevention Course Discount applies to the premiums for single limit liability, or bodily injury and property damage liability, medical payments and collision coverages.

**Exception:**

This discount does not apply to vehicles classified and rated under the Miscellaneous Types Rule unless otherwise specified.

2. Private Passenger Autos principally operated by an adult operator (including autos classified under Youthful **Non-Principal** Operator classifications) shall be subject to a Motor Vehicle Accident Prevention Course Discount of 10% provided the adult principal operator of the auto:

a. is age 55 or over, and

b. has a completion certificate, dated within the last 36 months, certifying that the principal operator has successfully completed an approved Motor Vehicle Accident Prevention Course.

3. The 10% Motor Vehicle Accident Prevention Course Discount shall be applied in accordance with the following:

a. only to the auto principally operated by the operator with the course completion certificate.

b. only once to each such auto regardless of the number of operators with course completion certificates.

4. An approved Motor Vehicle Accident Prevention Course shall:

a. be approved by the Arkansas Department of Motor Vehicles, and

b. be taught by an approved instructor, and

c. include the minimum hours of classroom and field driving instruction prescribed by the Arkansas Department of Motor Vehicles, and

d. shall not be self-instructed.

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**5. SAFE DRIVER INSURANCE PLAN (SDIP)**

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The SDIP applies to policies written in Companies authorizing its use.

When SDIP is used it is to be applied to all eligible autos.

**A. Eligibility**

An auto is eligible for rating under this Plan if it is:

1. Owned by an individual or owned jointly by two or more relatives or resident individuals.
2. Owned by a family partnership or family corporation, provided the vehicle is:
  - a. Garaged on a farm or ranch;
  - b. Not rated as part of a fleet; and
  - c. Not used in any occupation other than farming or ranching.

**Exceptions:**

- 1) The SDIP does not apply to an auto that is used in the business of driver training.
- 2) The SDIP does not apply to policies written for a term in excess of 12 months unless such policy provides for an annual adjustment of premium.

**B. Definitions****1. Driving Record Points****a. Convictions**

Points shall be assigned for convictions during the experience period for motor vehicle violations of the applicant or any other currently resident operator as follows:

- (1) Three points are assigned for conviction of:
  - (a) driving while intoxicated or under the influence of drugs; or
  - (b) failure to stop and report when involved in an accident; or
  - (c) homicide or assault arising out of the operation of a motor vehicle; or
  - (d) driving while licensed is suspended or revoked.
- (2) One point is assigned for conviction of any other moving traffic violation resulting in:
  - (a) suspension or revocation of an operator's license, or
  - (b) the filing of evidence of financial responsibility under any Financial Responsibility Law required as of the effective date of the policy.

**b. Accidents**

*Points shall be assigned for at fault accidents that occurred during the experience period involving the applicant or any current resident operator, while operating an auto.*

- (1) One point is assigned for each auto accident that results in:
  - (a) bodily injury, or death; or
  - (b) total damage to all property including his or her own in excess of \$1000.
- (2) One point is assigned if, during the experience period there were two or more accidents each of which resulted in damage to property but have not been assigned a point under (1) above.

**Exceptions:**

1. No points are assigned for accidents incurred by an operator demonstrated to be a named insured or a principal operator of an auto insured under a separate policy; and
2. No points are assigned for accidents occurring under the following circumstances:
  - (a) auto lawfully parked (if the parked vehicle rolls from the parked position then any such accident is charged to the person who parked the auto); or

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)**

- (b) the applicant, owner or other resident operator reimbursed by, or on behalf of, a person who is responsible for the accident or has judgment against such person; or
- (c) auto is struck in the rear by another vehicle and the applicant or other resident operator has not been convicted of a moving traffic violation in connection with this accident; or
- (d) operator of the other auto involved in the accident was convicted of a moving traffic violation and the applicant or resident operator was not convicted of a moving traffic violation in connection with the accident; or
- (e) auto operated by the applicant or any resident operator is struck by a "hit-and-run" vehicle, if the accident is reported to the proper authority within 24 hours by the applicant or resident operator; or
- (f) accidents involving damage by contact with animals or fowl; or
- (g) accidents involving Physical Damage, limited to and caused by flying gravel, missiles or falling objects; or
- (h) accidents occurring when using auto in response to an emergency if the operator of the auto at the time of accident was a paid or volunteer member of any Police or Fire Department, First Aid Squad, or any law enforcement agency. This exception does not include an accident occurring after the auto ceases to be used in response to such emergency.

**c. Inexperienced Operator**

If the principal operator of the auto has no surcharge for an accident, but has been licensed less than two years, one point is assigned. Sub-Classification 1B applies.

If any operator of the auto has a surcharge for an accident or conviction, Sub-Classification 1A applies.

**d. Refund of Surcharged Premium**

If a point has been assigned for an accident and it is later determined that the accident falls under one of the exceptions in this rule, the company shall refund to the insured the increased portion of the premium generated by the accident.

**2. Experience Period**

The experience period shall be the three years immediately preceding the date of application or the preparation of the renewal.

**C. Driving Record Sub-Classification**

The driving record sub-classification shall be determined from the number of Driving Record Points accumulated during the experience period as follows:

<b>Number of Driving Record Points</b>	<b>Driving Record Sub-Classification</b>
0	0
1	1
2	2
3	3
4 or more	4

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**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)**

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**D. Multi-Car Risk****1. Two Car Risk**

The Driving Record Sub-Classification, as determined above, shall apply to each auto as shown under the Multi-Car Section in the Secondary Table.

**2. Three or More Car Risk**

Any points developed under SDIP are assigned to the two cars with the highest Total Base Premiums. The remaining autos are rated at Sub-Class 0.

**TOTAL BASE PREMIUM** is the sum of the base premium for Single Limit Liability or Bodily Injury and Property Damage Liability, Medical Payments, Comprehensive and Collision Coverages that apply to the auto.

**E. Administration of SDIP****1. New Business**

- a. Initial information necessary to assign the proper Driving Record Sub-Classification shall be obtained from an application signed personally by the applicant.
- b. The signature of the applicant on all applications received from an agent, broker or solicitor shall be certified by such agent, broker or solicitor.

**2. Renewal Business**

Information necessary to assign proper renewal Driving Record Sub-Classification shall be determined from any one or combination of the following:

- a. Company's own records; or
- b. Motor vehicle records; or
- c. An application signed by the applicant and producer.

\*

**F. Accident Free Discount**

*For eligible policies described below, a 10% accident free discount shall be applied to the total policy premium before application of other policy level discounts.*

*A 10% discount will be applied to all policies having 0 driving record points in the prior 3 years experience period. Upon assignment of a point, the discount will be removed at next renewal.*

## 202 CLASS PLAN: PRIMARY CLASSIFICATIONS

**RATING FACTORS AND STATISTICAL CODES**  
**NO YOUTHFUL OPERATOR**

Operator Age		Pleasure Use	Drive To or From Work		Business Use	Farm Use
			Less Than 15 Miles	15 or More Miles		
<b>30-39</b>	<b>Factor</b>	<b>1.00</b>	<b>1.05</b>	<b>1.15</b>	<b>1.20</b>	<b>.85</b>
	Code	8161 — —	8162 — —	8163 — —	8168 — —	8169 — —
<b>40-49</b>	<b>Factor</b>	<b>.90</b>	<b>.95</b>	<b>1.05</b>	<b>1.10</b>	<b>.75</b>
	Code	8151 — —	8152 — —	8153 — —	8158 — —	8159 — —
<b>50-64</b>	<b>Factor</b>	<b>.80</b>	<b>.85</b>	<b>.95</b>	<b>1.00</b>	<b>.65</b>
	Code	8851 — —	8852 — —	8853 — —	8858 — —	8859 — —
<b>65-74</b>	<b>Factor</b>	<b>.85</b>	<b>.90</b>	<b>1.00</b>	<b>1.05</b>	<b>.70</b>
	Code	8801 — —	8802 — —	8803 — —	8808 — —	8809 — —
<b>75-79</b>	<b>Factor</b>	<b>1.00</b>	<b>1.05</b>	<b>1.15</b>	<b>1.20</b>	<b>.85</b>
	Code	8121 — —	8122 — —	8123 — —	8128 — —	8129 — —
<b>80-84</b>	<b>Factor</b>	<b>1.15</b>	<b>1.20</b>	<b>1.30</b>	<b>1.35</b>	<b>1.00</b>
	Code	8141 — —	8142 — —	8143 — —	8148 — —	8149 — —
<b>85 or Over</b>	<b>Factor</b>	<b>1.15</b>	<b>1.20</b>	<b>1.30</b>	<b>1.35</b>	<b>1.00</b>
	Code	8201 — —	8202 — —	8203 — —	8208 — —	8259 — —

**ALL OTHER OPERATORS AGE 25-29:** In accordance with Rule 4.C.2, this classification applies to operators age 25-29 who are NOT eligible for any Youthful Operator classification.

<b>25-29</b>	<b>Factor</b>	<b>1.00</b>	<b>1.05</b>	<b>1.15</b>	<b>1.20</b>	<b>.85</b>
	Code	8301 — —	8302 — —	8303 — —	8308 — —	8459 — —

**EXCESS AUTOS:** Refer to Rule 4.C.3. for the rules of application for these classifications.  
 (Applicable to NO YOUTHFUL OPERATOR and to YOUTHFUL OPERATOR risks)

<b>Excess Autos 1</b>	<b>Factor</b>	<b>1.00</b>
	Code	8990 — —
<b>Excess Autos 2 (All Operators Age 40-74)</b>	<b>Factor</b>	<b>.80</b>
	Code	8980 — —

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)**

**202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)**

**YOUTHFUL OPERATOR  
UNMARRIED FEMALE  
NOT ELIGIBLE FOR GOOD STUDENT CREDIT**

AGE		Not Owner or Principal Operator		Owner or Principal Operator	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive To Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>2.10</b>	<b>2.25</b>	<b>2.75</b>	<b>2.90</b>
		8024 — —	8025 — —	8124 — —	8125 — —
<b>18</b>	<b>Factor Code</b>	<b>2.10</b>	<b>2.25</b>	<b>2.75</b>	<b>2.90</b>
		8034 — —	8035 — —	8134 — —	8135 — —
<b>19</b>	<b>Factor Code</b>	<b>2.10</b>	<b>2.25</b>	<b>2.75</b>	<b>2.90</b>
		8044 — —	8045 — —	8144 — —	8145 — —
<b>20</b>	<b>Factor Code</b>	<b>2.10</b>	<b>2.25</b>	<b>2.75</b>	<b>2.90</b>
		8054 — —	8055 — —	8154 — —	8155 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8064 — —	8065 — —	8164 — —	8165 — —
<b>18</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8074 — —	8075 — —	8174 — —	8175 — —
<b>19</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8084 — —	8085 — —	8184 — —	8185 — —
<b>20</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8094 — —	8095 — —	8194 — —	8195 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.30</b>	<b>1.45</b>	<b>1.75</b>	<b>1.90</b>
		8254 — —	8255 — —	8354 — —	8355 — —
<b>25 thru 29</b>	<b>Factor Code</b>	<b>CLASSIFY AS ALL OTHER OPERATORS AGE 25-29</b>		<b>1.10</b>	<b>1.25</b>
				8358 — —	8359 — —

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)****202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)**

**YOUTHFUL OPERATOR  
UNMARRIED MALE NOT  
ELIGIBLE FOR GOOD STUDENT CREDIT**

AGE		Not Owner or Principal Operator		Owner or Principal Operator	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive To Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>2.50</b>	<b>2.65</b>	<b>3.45</b>	<b>3.60</b>
		8400 — —	8403 — —	8600 — —	8603 — —
<b>18</b>	<b>Factor Code</b>	<b>2.50</b>	<b>2.65</b>	<b>3.45</b>	<b>3.60</b>
		8401 — —	8405 — —	8601 — —	8605 — —
<b>19</b>	<b>Factor Code</b>	<b>2.50</b>	<b>2.65</b>	<b>3.45</b>	<b>3.60</b>
		8451 — —	8455 — —	8651 — —	8655 — —
<b>20</b>	<b>Factor Code</b>	<b>2.50</b>	<b>2.65</b>	<b>3.45</b>	<b>3.60</b>
		8450 — —	8453 — —	8650 — —	8653 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8460 — —	8463 — —	8660 — —	8663 — —
<b>18</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8470 — —	8473 — —	8670 — —	8673 — —
<b>19</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8480 — —	8483 — —	8680 — —	8683 — —
<b>20</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8490 — —	8493 — —	8690 — —	8693 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.35</b>	<b>1.50</b>	<b>1.90</b>	<b>2.05</b>
		8754 — —	8755 — —	8704 — —	8705 — —
<b>25 thru 29</b>	<b>Factor Code</b>	<b>CLASSIFY AS ALL OTHER OPERATORS AGE 25-29</b>		<b>1.30</b>	<b>1.45</b>
				8708 — —	8709 — —

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)****202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)****YOUTHFUL OPERATOR  
UNMARRIED FEMALE  
GOOD STUDENT CLASSIFICATIONS**

AGE		Not Owner or Principal Operator		Owner or Principal Operator	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive To Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8026 — —	8027 — —	8126 — —	8127 — —
<b>18</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8036 — —	8037 — —	8136 — —	8137 — —
<b>19</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8046 — —	8047 — —	8146 — —	8147 — —
<b>20</b>	<b>Factor Code</b>	<b>1.90</b>	<b>2.05</b>	<b>2.50</b>	<b>2.65</b>
		8056 — —	8057 — —	8156 — —	8157 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.70</b>	<b>1.85</b>	<b>2.25</b>	<b>2.40</b>
		8066 — —	8067 — —	8166 — —	8167 — —
<b>18</b>	<b>Factor Code</b>	<b>1.70</b>	<b>1.85</b>	<b>2.25</b>	<b>2.40</b>
		8076 — —	8077 — —	8176 — —	8177 — —
<b>19</b>	<b>Factor Code</b>	<b>1.70</b>	<b>1.85</b>	<b>2.25</b>	<b>2.40</b>
		8086 — —	8087 — —	8186 — —	8187 — —
<b>20</b>	<b>Factor Code</b>	<b>1.70</b>	<b>1.85</b>	<b>2.25</b>	<b>2.40</b>
		8096 — —	8097 — —	8196 — —	8197 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.10</b>	<b>1.25</b>	<b>1.50</b>	<b>1.65</b>
		8256 — —	8257 — —	8356 — —	8357 — —

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)****202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)**

**YOUTHFUL OPERATOR  
UNMARRIED MALE  
GOOD STUDENT CLASSIFICATIONS**

AGE		Not Owner or Principal Operator		Owner or Principal Operator	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive To Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8406 — —	8408 — —	8606 — —	8608 — —
<b>18</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8402 — —	8404 — —	8602 — —	8604 — —
<b>19</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8452 — —	8454 — —	8652 — —	8654 — —
<b>20</b>	<b>Factor Code</b>	<b>2.25</b>	<b>2.40</b>	<b>3.15</b>	<b>3.30</b>
		8456 — —	8458 — —	8656 — —	8658 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>2.00</b>	<b>2.15</b>	<b>2.80</b>	<b>2.95</b>
		8466 — —	8468 — —	8666 — —	8668 — —
<b>18</b>	<b>Factor Code</b>	<b>2.00</b>	<b>2.15</b>	<b>2.80</b>	<b>2.95</b>
		8476 — —	8478 — —	8676 — —	8678 — —
<b>19</b>	<b>Factor Code</b>	<b>2.00</b>	<b>2.15</b>	<b>2.80</b>	<b>2.95</b>
		8486 — —	8488 — —	8686 — —	8688 — —
<b>20</b>	<b>Factor Code</b>	<b>2.00</b>	<b>2.15</b>	<b>2.80</b>	<b>2.95</b>
		8496 — —	8498 — —	8696 — —	8698 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.15</b>	<b>1.30</b>	<b>1.65</b>	<b>1.80</b>
		8756 — —	8757 — —	8706 — —	8707 — —

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)****202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)****YOUTHFUL OPERATOR  
MARRIED MALE**

AGE		Not Eligible for Good Student Credit		Eligible for Good Student Credit	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive To Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.55</b>	<b>1.70</b>	<b>1.40</b>	<b>1.55</b>
		8924 — —	8925 — —	8926 — —	8927 — —
<b>18</b>	<b>Factor Code</b>	<b>1.55</b>	<b>1.70</b>	<b>1.40</b>	<b>1.55</b>
		8934 — —	8935 — —	8936 — —	8937 — —
<b>19</b>	<b>Factor Code</b>	<b>1.55</b>	<b>1.70</b>	<b>1.40</b>	<b>1.55</b>
		8944 — —	8945 — —	8946 — —	8947 — —
<b>20</b>	<b>Factor Code</b>	<b>1.55</b>	<b>1.70</b>	<b>1.40</b>	<b>1.55</b>
		8954 — —	8955 — —	8956 — —	8957 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.40</b>	<b>1.55</b>	<b>1.25</b>	<b>1.40</b>
		8964 — —	8965 — —	8966 — —	8967 — —
<b>18</b>	<b>Factor Code</b>	<b>1.40</b>	<b>1.55</b>	<b>1.25</b>	<b>1.40</b>
		8974 — —	8975 — —	8976 — —	8977 — —
<b>19</b>	<b>Factor Code</b>	<b>1.40</b>	<b>1.55</b>	<b>1.25</b>	<b>1.40</b>
		8984 — —	8985 — —	8986 — —	8987 — —
<b>20</b>	<b>Factor Code</b>	<b>1.40</b>	<b>1.55</b>	<b>1.25</b>	<b>1.40</b>
		8994 — —	8995 — —	8996 — —	8997 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.25</b>	<b>1.40</b>	<b>1.05</b>	<b>1.20</b>
		8554 — —	8555 — —	8556 — —	8557 — —
<b>25 thru 29</b>	<b>CLASSIFY AS ALL OTHER OPERATORS AGE 25-29</b>				

**5. SAFE DRIVER INSURANCE PLAN (SDIP) (Cont'd.)**

**202 CLASS PLAN: PRIMARY CLASSIFICATIONS (Cont'd.)**

**YOUTHFUL OPERATOR  
MARRIED FEMALE**

AGE		Not Eligible for Good Student Credit		Eligible for Good Student Credit	
		Pleasure Use or Farm Use	Drive to Work or Business Use	Pleasure Use or Farm Use	Drive to Work or Business Use
<b>WITHOUT DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.30</b> 8804 — —	<b>1.45</b> 8805 — —	<b>1.15</b> 8806 — —	<b>1.30</b> 8807 — —
<b>18</b>	<b>Factor Code</b>	<b>1.30</b> 8854 — —	<b>1.45</b> 8855 — —	<b>1.15</b> 8856 — —	<b>1.30</b> 8857 — —
<b>19</b>	<b>Factor Code</b>	<b>1.30</b> 8864 — —	<b>1.45</b> 8865 — —	<b>1.15</b> 8866 — —	<b>1.30</b> 8867 — —
<b>20</b>	<b>Factor Code</b>	<b>1.30</b> 8874 — —	<b>1.45</b> 8875 — —	<b>1.15</b> 8876 — —	<b>1.30</b> 8877 — —
<b>WITH DRIVER TRAINING</b>					
<b>17 or Less</b>	<b>Factor Code</b>	<b>1.15</b> 8884 — —	<b>1.30</b> 8885 — —	<b>1.05</b> 8886 — —	<b>1.20</b> 8887 — —
<b>18</b>	<b>Factor Code</b>	<b>1.15</b> 8894 — —	<b>1.30</b> 8895 — —	<b>1.05</b> 8896 — —	<b>1.20</b> 8897 — —
<b>19</b>	<b>Factor Code</b>	<b>1.15</b> 8904 — —	<b>1.30</b> 8905 — —	<b>1.05</b> 8906 — —	<b>1.20</b> 8907 — —
<b>20</b>	<b>Factor Code</b>	<b>1.15</b> 8914 — —	<b>1.30</b> 8915 — —	<b>1.05</b> 8916 — —	<b>1.20</b> 8917 — —
<b>WITH OR WITHOUT DRIVER TRAINING</b>					
<b>21 thru 24</b>	<b>Factor Code</b>	<b>1.15</b> 8664 — —	<b>1.30</b> 8665 — —	<b>1.00</b> 8006 — —	<b>1.15</b> 8007 — —
<b>25 thru 29</b>	<b>CLASSIFY AS ALL OTHER OPERATORS AGE 25-29</b>				

## 202 CLASS PLAN: SECONDARY CLASSIFICATIONS

**RATING FACTORS AND STATISTICAL CODES**

The Rating Factors applicable to Single or Multi-Car risks and risks with one or more points assigned under the Safe Driver Insurance Plan shall be determined by the addition, or subtraction, of the appropriate Factor from the applicable table below to the Primary Rating Factor.

		<b>Sub-Class</b>					
		<b>0</b>	<b>1A</b>	<b>1B</b>	<b>2</b>	<b>3</b>	<b>4</b>
<b>Single Car Risk</b>	<b>Factor</b>	<b>0.00</b>	<b>+0.40</b>	<b>+0.40</b>	<b>+0.90</b>	<b>+1.50</b>	<b>+2.20</b>
	Code*	10	11	15	12	13	14
<b>Multi-Car Risk</b>	<b>Factor</b>	<b>-0.20</b>	<b>0.00</b>	<b>0.00</b>	<b>+0.25</b>	<b>+0.55</b>	<b>+0.90</b>
	Code*	20	21	25	22	23	24

\* These two digits are to be appended to the four-digit code corresponding to the Primary Rating Factor to which the Factor in this table is added or subtracted.

**6. MODEL YEAR FOR COMPREHENSIVE AND COLLISION COVERAGES****A. Where Model Year is Used in Rating**

1. The model year of the auto is the year assigned by the auto manufacturer.
2. Rebuilt or Structurally Altered Autos – the model year of the chassis determines the model year of the auto.
3. If the rates for a model year are not displayed in the rate pages, use the rates shown for the latest model year.

**B. Where Age is Used in Rating**

*Section B. does not apply.*

**C. Coding applicable where Model Year is used in rating.****1. Policies effective July 1, 1980 and subsequent:**

Code the last two digits of the model year, for example, code 1980 vehicles as 80, 1981 as 81, etc.

**2. Policies effective prior to July 1, 1980:**

<b>Description</b>	<b>Code</b>
Current Model Year	1
First Preceding Model Year	2
Second Preceding Model Year	3
Third Preceding Model Year	4
Fourth Preceding Model Year	5
Fifth and Prior Model Years	6

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**7. MINIMUM PREMIUM RULE**

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- A. A minimum premium charge of \$10 shall be made for each policy, certificate, declaration or binder covering one or more of the following perils:
1. Comprehensive,
  2. Collision,
  3. Single Limit Liability,
  4. Bodily Injury Liability, or
  5. Property Damage Liability.
- B. Premium for other coverages which may also be included in the policy shall be in addition to the minimum premium.
- C. The minimum premium charge is not subject to reduction except – in the event of cancellation or short term policy, the minimum premium charge shall be adjusted on a pro rata or short rate basis, as the conditions require.

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**8. POLICY PERIOD**

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- A. *No policy may be written for a period longer than 12 months.*
- B. Premium charged for policy terms not exceeding 12 months is as follows:
1. Twelve Month Policies  
Charge the annual premium.
  2. Six Month Policies
    - a. *For a 6 month period the premium charge is 50% of the annual auto premium.*
    - b. *For Policies issued for a 6 month period with an effective date on the 29th, 30th or 31st of any month, the first policy term can be extended from the expiration date to the first day of the next calendar month.*
  3. *Other Short Term Policies*  
*Policies written for less than 12 months and other than 6 months shall be written on a pro rata basis in accordance with the Pro Rata calculation procedure shown in the Cancellation rule.*  
**Exceptions:**  
The premium is computed Pro Rata:
    - 1) When coverage is written to secure a common policy date with other coverages or lines of insurance.
    - 2) When a policy is issued on a short rate basis to replace an outstanding policy of a company in liquidation, provided the new policy is based upon the rules and rates in effect at the time replacement is made and shall be in effect for a period equal to the unexpired term of the outstanding policy.
    - 3) When a statutory policy is required by a state or municipality to expire on a fixed date and the policy is written to expire on such date.
- C. **Long Term Physical Damage Policies**  
*Section C. does not apply.*

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**9. CHANGES**

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- A. All changes requiring premium adjustments shall be computed pro rata.
- B. If an auto or a form of coverage that was cancelled from a policy at the request of the insured is reinstated within 30 days, the premium shall be the same as the amount that was returned at the time of cancellation.
- C. Minimal Premium Adjustments**
  - 1. If an outstanding policy is amended and results in a minimal premium adjustment of \$5 or less, the amount may be waived, except that the actual return premium shall be returned at the request of the insured.
  - 2. Companies need not refund minimal premium of \$5 or less if the insured requests the following:
    - a. cancellation of coverage,
    - b. reduction of limits of liability,
    - c. increase in deductible,
 except that actual return premium shall be returned at the request of the insured.
  - 3. *This rule no longer applies.*

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**10. CANCELLATION**

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- A. If a policy, vehicle or form of coverage is cancelled,
  - 1. **By the Company:**  
Compute the return premium pro rata.
  - 2. **By the Insured:**
    - a. **For Six month Policies**  
Compute return premium at 90% of the prorated unearned premium for one year.
- B. *Use the formula shown below to determine the pro rata factor:*

$$\frac{\# \text{ Of Unearned Days}}{\# \text{ Days in Policy Period}}$$

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**11. WHOLE DOLLAR PREMIUM**

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The premium for each exposure shall be rounded to the nearest whole dollar, separately for each coverage provided by the policy.

\* *A premium involving \$0.50 or more shall be rounded to the next higher whole dollar (with the exception of premium for policy endorsements, policy level discounts and uninsured/underinsured motorists' coverages).*

This procedure shall apply to all interim premium adjustments, including endorsements or cancellations at the request of the insured. In the case of cancellation by the company, the return premium may be carried to the next higher whole dollar.

The phrase "each exposure" as used herein shall mean each premium developed (after the application of all applicable adjustments) for (1) each auto, if written on a per car basis, and (2) for all other business.

\* 12. RULES FOR DETERMINING PHYSICAL DAMAGE BASE RATES FOR SYMBOLS NOT DISPLAYED ON RATE PAGES

**A. Other Than Collision**

1. *2011 and Later Model Year Vehicles – Symbol 98 Vehicles (For symbol 65 and over refer to Company)*
2. **1990 – 2010 Model Years – Symbol 27 Vehicles**  
Develop factor for Symbol 27 as follows:
  - a. Increase the factor for Symbol 26 by +0.74 for each \$10,000 or fraction of \$10,000 above \$80,000 of Original Cost; and
  - b. Apply this factor to the applicable vehicle model year symbol 8 relativity on the relativity page.
3. **1989 and Prior Model Year Vehicles**

*Apply the following factors to the Comprehensive Base Rate on the rate pages for the applicable territory.*

<i>Symbol</i>	<i>Factor</i>	<i>Symbol</i>	<i>Factor</i>
<i>1-4</i>	<i>.12</i>	<i>14</i>	<i>.93</i>
<i>5</i>	<i>.14</i>	<i>15</i>	<i>1.11</i>
<i>6</i>	<i>.22</i>	<i>16</i>	<i>1.29</i>
<i>7</i>	<i>.28</i>	<i>17</i>	<i>1.50</i>
<i>8</i>	<i>.36</i>	<i>18</i>	<i>1.74</i>
<i>10</i>	<i>.46</i>	<i>19</i>	<i>2.02</i>
<i>11</i>	<i>.55</i>	<i>20</i>	<i>2.36</i>
<i>12</i>	<i>.65</i>	<i>21</i>	<i>2.95</i>
<i>13</i>	<i>.78</i>		

**B. Collision**

1. *2011 and Later Model Year Vehicles – Symbol 98 Vehicles (For symbol 65 and over refer to Company)*
2. **1990 – 2010 Model Years – Symbol 27 Vehicles**  
Develop the factor for Symbol 27 as follows:
  - a. Increase the factor for Symbol 26 by +0.35 for each \$10,000 or fraction of \$10,000 above \$80,000 of Original Cost; and
  - b. Apply this factor to the applicable vehicle model year symbol 8 relativity on the relativity page.
3. **1989 and Prior Model Year Vehicles**

*Apply the following factors to the Collision Base Rate on the rate pages for the applicable territory.*

<i>Symbol</i>	<i>Factor</i>	<i>Symbol</i>	<i>Factor</i>
<i>1-4</i>	<i>.20</i>	<i>14</i>	<i>.63</i>
<i>5</i>	<i>.25</i>	<i>15</i>	<i>.71</i>
<i>6</i>	<i>.30</i>	<i>16</i>	<i>.79</i>
<i>7</i>	<i>.34</i>	<i>17</i>	<i>.86</i>
<i>8</i>	<i>.38</i>	<i>18</i>	<i>.93</i>
<i>10</i>	<i>.42</i>	<i>19</i>	<i>1.01</i>
<i>11</i>	<i>.47</i>	<i>20</i>	<i>1.11</i>
<i>12</i>	<i>.51</i>	<i>21</i>	<i>1.30</i>

**C. Original Cost Means:**

1. Manufacturer's Suggested Retail Price for autos built in U.S.
2. Manufacturer's Suggested Retail Price in U.S. for specially built autos.
3. Manufacturer's Suggested Retail Price in U.S. for imported autos.

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**13. SUSPENSION**

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- A.** Insurance may be suspended by use of the suspension of insurance endorsement, **PP0201**. However, coverage may not be suspended for:
1. The minimum required insurance coverages for a motor vehicle which is registered in the state; or
  2. Risks for which a financial responsibility filing is in effect.
- B.** Insurance may be reinstated by use of the reinstatement of insurance endorsement. **PP0202**
- C.** The reinstatement of insurance endorsement shall not extend the policy beyond its original expiration date.
- D.** Pro rata premium credit shall be granted for the period of suspension upon reinstatement provided the period of suspension is at least thirty (30) consecutive days.. Companies can retain a minimum of ninety days premium calculated on a pro rata basis for the policy period.
- E.** If the policy expires during the period of suspension, the named insured shall be entitled to pro rata return premium in accordance with the foregoing provisions of this rule with respect to the minimum period of suspension and minimum premium retention by the company.
- F.** *This rule does not apply.*

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**14. MISCELLANEOUS COVERAGES**

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**A. Uninsured Motorists Coverage**

1. **Owners** – (Class Code – Refer to Statistical Plan)

**BODILY INJURY**

This form or auto insurance must be afforded at limits not less than the financial responsibility limits under every auto liability policy issued or delivered to the owner of a motor vehicle registered or principally garaged in Arkansas.

**Attach Endorsement PP0495 – Uninsured Motorists Coverage****For Single Limits, Attach Endorsement PP0401 – Single Uninsured Motorists Limits****Exceptions:**

- (1) The named insured has the right to reject such coverage in writing.
- (2) After a named insured rejects such coverage, the insurer shall not be required to notify any insured in any renewal, reinstatement, substitute, amended, or replacement policy as to the availability of such coverage.
- (3) The written agreement to reject such coverage shall continue until the rejection is withdrawn in writing by the named insured.

**a. Basic Limits**

Rates for \$50,000 Single Limit Bodily Injury, \$75,000 Single Limit Bodily Injury and Property Damage\*, 25,000/50,000 Split Limit Bodily Injury and 25,000/50,000/25,000 Split Limit Bodily Injury and Property Damage, Uninsured Motorists Coverage are shown below.

**b. Increased Limits**

If a named insured or applicant purchases liability limits greater than the financial responsibility limits, increased limits of Uninsured Motorists Coverage must be offered in amounts up to the liability limits on the policy.

**NOTE:**

- (1) For new policies written on or after July 30, 1999, but prior to January 1, 2000, such offer need not be rejected in writing.
- (2) For new policies written on or after January 1, 2000, an insured or applicant who does not want to purchase increase limits shall reject such increased limits in writing on the application for insurance coverage.

\* **14. MISCELLANEOUS COVERAGES (Cont'd.)**

(3) For existing policies written prior to July 30, 1999, the insurer shall provide at the next two renewals on or after July 30, 1999, notice that increased limits are available.

If such renewal policy has Uninsured Motorists Coverage at limits less than the liability limits provided on the policy, increased limits shall not be afforded unless a named insured requests such coverage in writing.

\* **c. Rates**

Rates for basic and increased limits coverage are displayed below. Uninsured Motorists Coverage rates are provided for the following risks:

(1) Single Car Risk

(2) Multi-Car Risk

Rates for multi-car risks are on a per-car basis. Apply these rates to each car including the first car.

The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

**ANNUAL RATES – UMBI ONLY**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 50,000	\$ 67.00	\$ 53.50	\$ 37.50	\$ 30.00	\$ 26.50	\$ 21.00
75,000	78.50	63.00	44.00	35.00	31.00	25.00
100,000	87.50	70.00	49.00	39.00	34.50	27.50
200,000	108.00	86.50	60.00	48.00	42.50	34.00
300,000	119.00	95.50	66.50	53.00	47.00	37.50
500,000	131.50	105.00	73.00	58.50	51.50	41.50

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 25/50	\$ 53.00	\$ 42.50	\$ 29.50	\$ 23.50	\$ 21.00	\$ 17.00
50/100	70.00	56.00	39.00	31.50	27.50	22.00
100/300	90.50	72.50	50.50	40.50	35.50	28.50
250/500	115.50	92.50	64.00	51.50	45.50	36.50

**ANNUAL RATES – UMBI/PD**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 75,000	\$138.50	\$ 111.00	\$ 89.50	\$ 71.50	\$ 63.00	\$ 50.50
100,000	148.00	118.50	94.50	75.50	66.50	53.00
200,000	168.00	134.50	105.50	84.50	74.00	59.50
300,000	179.50	143.50	111.50	89.50	78.50	63.00
500,000	191.50	153.00	118.50	95.00	83.50	66.50

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 25/50	\$ 116.00	\$ 92.50	\$ 76.00	\$60.50	\$52.50	\$42.00
50/100	133.00	106.50	85.50	68.50	59.00	47.00
100/300	153.00	122.50	96.50	77.50	67.00	53.50
250/500	178.00	142.50	110.50	88.50	77.00	61.50

**PROPERTY DAMAGE**

If Bodily Injury Uninsured Motorists Coverage is purchased, the named insured must be offered Property Damage Uninsured Motorists Coverage, subject to a \$200 deductible.

**Exceptions:**

- (1) Property Damage Uninsured Motorists limits shall be made available up to the policy's property damage liability limits.
  - (2) The named insured has the right to reject Property Damage Uninsured Motorists Coverage in writing.
  - (3) After the named insured has rejected such coverage, it need not again be made available in any continuation, renewal, reinstatement, or replacement policy issued by the same insurer unless the insured requests such coverage in writing.
  - (4) Whenever a new application is submitted in connection with any renewal, reinstatement, or replacement policy, the provisions of this rule shall apply in the same manner as if a new policy is being issued.
- d. For higher limits of the Property Damage base of \$25,000, add the following charges to the appropriate Split UMBI/PD Limit shown above.

\*

Property Damage Annual Rates		
Limit	Single Car Add-on Rate	Multi-Car Add-on Rate
\$ 50,000	\$1.50	\$1.50
100,000	3.50	3.00

For limits not shown, use the additional charge for the next higher limit.

- e. **Rates** – The rates are not subject to classification rating or modification by any rating plan.

**2. Non-Owners (Class Code 9900)**

If a named non-owned policy is extended to afford Uninsured Motorists coverage, the rate for such extension of coverage shall be the applicable single car Uninsured Motorists Coverage rate shown for owners.

**B. Underinsured Motorists Coverage**

**1. Owners**

- a. This form of auto insurance shall be offered in limits at least equal to the Financial Responsibility law limits under every automobile liability insurance policy covering liability arising out of the ownership, maintenance or use of any motor vehicle in Arkansas.

Underinsured Motorists Coverage must be offered for:

- (1) All new policies issued on or after July 1, 1993; and
- (2) The first renewal on or after January 1, 1994 of all policies in effect prior to July 1, 1993.

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

**Exceptions**

- (1) If the named insured does not elect Underinsured Motorists Coverage, the coverage must be rejected in writing.
- (2) This coverage shall not be provided and must be rejected in writing if the named insured has rejected Bodily Injury Uninsured Motorists Coverage.
- (3) Subsequent continuation, renewal or reinstatement policies issued by the insurer need not provide the rejected coverage unless the named insured requests such coverage. However, if the insured adds another vehicle to the policy, whether or not it replaces another vehicle on the policy, a new rejection of Underinsured Motorists Coverage is required.

**b. If Underinsured Motorists Coverage is provided:**

- (1) The coverage shall apply to all vehicles insured under the policy.
- (2) Uninsured Motorists Coverage and Underinsured Motorists Coverage must be provided at the same limits.
- (3) Attach the applicable endorsement at basic or increased limits.

**Attach PP0434 – Underinsured Motorists Coverage**

**Attach PP0402 – Single Underinsured Motorists Limit**

\*

**c. Rates**

- (1) Rates for basic and increased limits coverage are displayed below. Underinsured Motorists Coverage rates are provided for the following risks:

**(a) Single Car Risk**

**(b) Multi Car Risk**

Rates for multi-car risks are on a per-car basis. Apply these rates to each car including the first car.

- (2) The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

**ANNUAL RATES**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 50,000	\$ 77.50	\$ 62.00	\$ 82.00	\$ 65.50	\$ 64.00	\$ 51.00
75,000	101.50	81.50	107.50	86.00	84.00	67.00
100,000	122.50	98.00	129.50	103.50	101.00	81.00
200,000	174.50	139.50	184.00	147.50	144.00	115.00
300,000	206.50	165.50	218.00	174.50	170.50	136.50
500,000	245.00	196.00	258.50	207.00	202.00	161.50

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 25/50	\$ 46.50	\$ 37.50	\$ 49.00	\$ 39.50	\$ 38.50	\$ 31.00
50/100	79.00	63.00	83.50	66.50	65.00	52.00
100/300	125.50	100.50	132.50	106.00	103.50	83.00
250/500	194.50	155.50	205.50	164.50	160.50	128.50

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

**2. Non-Owners**

If a named non-owner policy is extended to afford Underinsured Motorists coverage, the rate for such extension of coverage shall be the applicable single car underinsured motorists coverage rate shown on the rate pages for owners.

**C. Deductible Insurance**

1. **Deductible Liability Insurance** is not available for automobiles classified and rated according to the rules of this manual.

2. *Refer to the rate pages for:*

(a) *Rates for Basic \$500 Comprehensive Deductible*

(b) *Rates for Basic \$500 Collision Deductible*

3. *Relativities for Other Deductibles are displayed below.*

*The other deductible relativities are to be applied to the \$500 base deductible rate for the applicable model year/symbol of the vehicle being rated.*

Deductibles					
Comprehensive			Collision		
Deductible	Relativity	Ded Code	Deductible	Relativity	Ded Code
\$ 50	1.58	(003)			
100	1.49	(010)	\$ 100	1.18	(074)
200	1.33	(015)	200	1.13	(073)
250	1.26	(055)	250	1.11	(076)
500	1.00	(726)	500	1.00	(077)
1,000	.74	(727)	1,000	.83	(078)
1,500	.58	(745)	1,500	.70	(845)
2,000	.47	(749)	2,000	.60	(846)
2,500	.38	(760)	2,500	.51	(820)

**D. Optional Limits Transportation Expenses Coverage**

1. The \$20/\$600 limit for Transportation Expenses Coverage may be increased to the following limits:

Limits	Annual Rate Per Auto
30/900	\$ 8
40/1200	16
50/1500	22

2. **Rating.** The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply to the rates for this coverage.

3. **Endorsement.** Attach the Optional Limits Transportation Expenses Coverage endorsement to the policy (**PP0302**)

**E. Towing and Labor Costs**

1. *Towing and Labor Costs may be written when both comprehensive and collision coverages are provided. When written in connection with a Miscellaneous Type Vehicle, a \$300 limit shall apply.*

2. *Rate – Annual rate per auto – \$6.*

**Attach Endorsement PP7173 – Towing and Labor Costs Coverage**

**14. MISCELLANEOUS COVERAGES (Cont'd.)****F. Excess Electronic Equipment Coverage****1. Coverage**

Electronic equipment that reproduces, receives or transmits audio, visual or data signals which is permanently installed in the vehicle at the time of loss is automatically covered under the policy without additional premium charge. Such equipment includes, but is not limited to:

- a. Radio and Stereos;
- b. Tape Decks;
- c. Compact Disk Systems
- d. Navigation Systems;
- e. Internet Access Systems;
- f. Personal Computers;
- g. Video Entertainment Systems;
- h. Telephones;
- i. Televisions;
- j. Two-way Mobile Radios;
- k. Scanners; or
- l. Citizens Band Radios.

However, electronic equipment that reproduces, receives or transmits audio, visual or data signals which is permanently installed in locations not used by the vehicle manufacturer for installation of such equipment, is subject to a sublimit of \$1000. This sublimit may be increased to any one of the limits shown below.

**2. Rating**

The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply for this coverage.

<b>Maximum Limit of Liability For Excess Electronic Equipment</b>	<b>Annual Premium Per Auto</b>
\$1,500	\$ 44
2,000	88
2,500	132
3,000	174
3,500	218
4,000	262
4,500	306
5,000	350
For limits in excess of \$5,000	Refer to Company

**3. Endorsement**

Attach the excess electronic equipment coverage endorsement to the policy. **(PP0313)**

**G. Tapes, Records, Disks and Other Media Coverage**

1. Additional coverage for \$200 worth of tapes, records, disks and other media applies at no additional charge when coverage is provided for increased limits for excess electronic equipment.:
2. **Tapes, Records, Disks and Other Media Only**

When coverage is not provided for increased limits for excess electronic equipment, coverage for \$200 worth of tapes, records, disks, and other media is available for an additional charge. The annual premium per auto is \$16.

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

The provisions of Rule 4. Classifications and Rule 5. Safe Driver Insurance Plan do not apply for this coverage.

**3. Endorsement**

Attach the excess electronic equipment coverage endorsement to the policy **(PP0313)**

**\* H. Excess Custom Equipment Coverage****1. Coverage**

Coverage for original manufacturer custom equipment is automatically provided for any vehicle when Comprehensive and/or Collision coverage is afforded.

Coverage for aftermarket custom equipment is automatically provided for any vehicle up to \$1,500, without additional premium charge, when Comprehensive and/or Collision coverage is afforded. This limit may be increased.

Aftermarket custom equipment includes, but is not limited to:

- a. Special carpeting or insulation;
- b. Furniture or bars;
- c. Height-extending roofs
- d. Body, engine, exhaust or suspension enhancers;
- e. Winches, or anti-roll or anti-sway bars;
- f. Custom grilles, louvers, side pipes, hood scoops or spoilers;
- g. Custom wheels, tires or spinners;
- h. Custom chrome, murals, paintwork, decals or other graphics; or
- i. Caps, covers or bedliners.

**2. Rating**

- a. The \$1,500 limit for aftermarket custom equipment may be increased to any of the following limits;

Maximum Limit of Liability For Excess Custom Equipment	Annual Rate Per Auto
\$ 2,000	\$ 8
3,000	23
4,000	39
5,000	55
6,000	70
7,000	86
8,000	101
9,000	117
10,000	133
For limits in excess of \$10,000	Refer to Company

- b. The provisions of Rule 4. Classifications and Rule 5., safe Driver Insurance Plan do not apply for this coverage.
- c. Refer to Rule 19.A. for rating of motor homes and vans converted into motor homes.
- d. Refer to Rule 19.B. for rating of trailers and camper bodies designed for use with private passenger autos and pickups.

**3. Endorsement**

Attach the Excess Custom Equipment Coverage Endorsement. **(PP0318)**

**14. MISCELLANEOUS COVERAGES (Cont'd.)****I. Limited Mexico Coverage**

1. At the option of the company, and at the request of the insured, a policy may be extended to apply to accidents occurring in Mexico on a trip of ten days or less if within twenty-five miles of the United States border.
2. **Rate** – Annual rate per auto - \$6.
3. **Modification** – This premium shall not be subject to classification rating or modification by the Safe Driver Insurance Plan.

**Attach Endorsement PP0321 – Limited Mexico Coverage****J. Auto Loan/Lease Coverage****1. Eligibility**

A policy providing both collision and comprehensive coverage may be extended to provide coverage for the difference between the outstanding indebtedness on a loan/lease agreement on a vehicle, and the actual cash value of the vehicle, subject to the following:

- a. Auto Loan/Lease Coverage may be provided only to a vehicle that is a private passenger auto, pickup or van; or
- b. The insured must request the auto/lease coverage within 30 days of leasing or financing a vehicle.

**2. Rates**

Charge 7% of both the Collision and Comprehensive Coverage premiums for the auto loan/lease coverage.

**3. Endorsement**

Attach the Auto Loan/Lease Coverage endorsement to the policy (**PP0335**)

**K. Trip Interruption Coverage****1. Description**

This coverage is available only for vehicles to which Collision and Other Than Collision coverages are afforded.

Trip Interruption Coverage provides:

- a. Transportation expenses incurred in the event of a mechanical or electrical breakdown of a specified auto.
- b. Expenses incurred for lodging and meals in the event of a covered physical damage loss or mechanical or electrical breakdown of a specified auto.

**2. Rating**

All premiums apply for the period of coverage

Limit of Coverage	Annual Rate Per Auto
\$600	\$ 14.00

**3. Endorsement**

Attach endorsement – **PP1302 Trip Interruption Coverage** endorsement to the policy

**15. CERTIFIED RISKS – FINANCIAL RESPONSIBILITY LAWS**

*This rule does not apply.*

**16. NAMED NON-OWNER COVERAGE****A. Eligibility**

The named Non-Owner Coverage endorsement may be used for an individual who does not own an auto but drives borrowed or rented autos.

Coverage may also be extended to the spouse and resident relatives of that named individual

**B. Rating****1. Liability and Medical Payments Coverage**

Charge the following percentage of the applicable premiums that would apply if the named individual owned an auto, using the premium determination procedures set forth in Rule 3. Premium Determination.

- a. Exclusions for vehicles furnished or available for regular use apply;

Person(s) Named	Percentage Charge
Named Individual	40%
Named individual and Resident Relatives (including Named Individual's Spouse)	60%

- b. Exclusions for vehicles furnished or available for regular use do NOT apply;

Person(s) Named	Percentage Charge
Named Individual	60%
Named individual and Resident Relatives (including Named Individual's Spouse)	80%

**2. Uninsured Motorists Coverage**

Charge the Single Car Uninsured Motorists Coverage rate that would apply if such individual owned an auto.

**3. Underinsured Motorists Coverage**

Charge the Single Car Underinsured Motorists Coverage rate that would apply if such individual owned an auto.

**C. Endorsement**

**Attach endorsement PP0322 – Named Non-Owner Coverage endorsement to the policy**

**17. EXTENDED NON-OWNED COVERAGE****A. Eligibility**

The Extended Non-Owned Coverage endorsement may be used for an individual who owns an auto but also driver borrowed or rented autos.

Coverage may also be extended to the spouse and resident relatives of that named individual.

**B. Coverage**

The Personal Auto Policy (PAP) may be extended to cover the following liability exposures:

**1. Vehicles Furnished Or Available For Regular Use Except As Public Or Livery Conveyances**

Under the liability coverage section of the PAP, coverage is not provided for non-owned vehicles furnished or available for regular use. By choosing liability coverage under the Extended Non-Owned Coverage 0 Vehicles Furnished Or Available For Regular Use endorsement, liability coverage afforded under the basic PAP may be extended to cover vehicles furnished or available for regular use except vehicles furnished for use as public or livery conveyances.

**17. EXTENDED NON-OWNED COVERAGE (Cont'd.)**

2. *This rule does not apply.*

3. If liability coverage is extended under the extended non-owned coverage – vehicles furnished or available for regular use endorsement, Medical Payments coverage may also be similarly extended.

If medical payments insurance is provided, primary medical payments insurance must be in effect for any non-owned vehicles furnished or available for use as public or livery conveyances.

**C. Rating****Liability and Medical Payments Coverage**

Charge the following percentage of the applicable premiums that would apply as if the insured owned the auto being covered, using the premium determination procedures set forth in Rule 3. Premium Determination:

<b>Primary Liability/Medical Payments Insurance in Effect</b>	
<b>Person(s) Named</b>	<b>Percentage Charge</b>
Named Individual	12%
Named Individual and Resident Relatives (including Named Individual's Spouse)	13%

<b>No Primary Liability/Medical Payments Insurance in Effect</b>	
<b>Person(s) Named</b>	<b>Percentage Charge</b>
Named Individual	90%
Named Individual and Resident Relatives (including Named Individual's Spouse)	100%

**D. Endorsements**

**Attach endorsement PP0306 – Extended Non-Owned Coverage – Vehicles Furnished Or Available For Regular Use**

**18. INCREASED LIMITS****A. Liability Increased Limits Tables****1. \$75,000 Single Limit Liability Increased Limits**

<b>Single Limits</b>	<b>Factor</b>
\$ 75,000	1.00
100,000	1.05
200,000	1.14
300,000	1.19
500,000	1.24

**Attach Endorsement PP0309 if Single Liability Limits apply**

**2. \$25,000/50,000 Bodily Injury Liability Increased Limits**

<b>Split Limits</b>	<b>Factor</b>
25/50	1.00
50/100	1.20
100/300	1.39
250/500	1.58

**18. INCREASED LIMITS (Cont'd.)****3. \$25,000 Property Damage Liability Increased Limits**

P.D. Limit	Factor
25,000	1.00
50,000	1.03
100,000	1.08

**D. Medical Payments Increased Limits**

The following table contains the factors to be applied to the basic \$1,000 Medical Payments Coverage limit rate:

Limits	Factor
\$ 1,000	1.00
2,000	1.70
5,000	2.70
10,000	3.46
25,000	4.52

**19. MISCELLANEOUS TYPES****A. Motor Homes**

A motor home is a self-propelled motor vehicle with a living area that is an integral part of the vehicle chassis. The living area typically consists of cooking, dining, sleeping, plumbing, and refrigeration facilities.

**Attach the Endorsement PP0323 – Miscellaneous Type Vehicle and PP0328 – Miscellaneous Type Vehicle Amendment (Motor Homes)**

**LIABILITY, MEDICAL PAYMENTS, UNINSURED AND  
UNDERINSURED MOTORISTS COVERAGES**

**1. Motor Homes used in driving to or from work or used in business** – Classify and rate as private passenger autos.

**2. Pleasure Use Motor Homes**

Charge 50% of the otherwise applicable No Youthful Operator base class rate (Operator Age 30-39/Pleasure Use) for private passenger autos. (The Safe Driver Insurance Plan does not apply.) (Class Code 943700)

**(a) Expense Fees**

*Paragraph (a) does not apply.*

**PHYSICAL DAMAGE**

**3. Determine the value, including the value of any additional facilities or equipment.** Additional facilities or equipment may include cooking, dining, sleeping, plumbing or refrigeration facilities, roof-top air conditioners, awnings, cabanas, or other equipment designed to be used with the motor home.

**a.** Assign a symbol based on the stated amount determined in **3.** above, using the tables on pages 1 & 2 of the Symbol & Identification Section corresponding to the model year of the motor home. Refer to the rate pages to determine base rates for the appropriate symbol and model year of the motor home and its facilities and equipment.

**b.** To determine the base rates for symbols not displayed on rate pages, determine rates in accordance with Rule 12., depending on the model year of the motor home.

**Exception:** For 1989 and Prior Model Year motor homes with stated value of \$65,001 and over, increase the Symbol 20 base rate (as calculated in Rule 12.) as follows:

**(i) Comprehensive** – 1.7% for each \$1,000 or part of \$1,000 in excess of \$65,000.

**19. MISCELLANEOUS TYPES (Cont'd.)**

(ii) **Collision** – 1.4% for each \$1,000 or part of \$1,000 in excess of \$65,000.

(Statistical Code – Use the code for Symbol 21 (A) )

- c. **Motor Homes Used in Driving to or from Work or Used in Business** – classify and rate as private passenger autos, using the base rates calculated in a. and b.
- d. **Pleasure Use Motor Homes** – charge 35% of the base rates calculated in a. and b. (The Safe Driver Insurance Plan does not apply.) (Class Code 943700)
- e. **Expense Fees** — *Paragraph e. does not apply.*
- f. For custom built Motor Homes, the model year of the chassis determines the model year of the motor home.

\*

g. **Deductibles**

<i>Comprehensive</i>		<i>Collision</i>	
<i>Deductible</i>	<i>Factor</i>	<i>Deductible</i>	<i>Factor</i>
50	1.57		
100	1.47	100	1.18
200	1.29	200	1.13
250	1.20	250	1.11
500	1.00	500	1.00
1,000	.90	1,000	.90
2,500	.85	2,500	.85
5,000	.78	5,000	.78

**RENTAL COVERAGE**

- 4. Liability, Medical Payments, Comprehensive and Collision Coverages may be extended to apply while a motor home is rented to others. To determine the **additional** premium, apply the following factor separately to the otherwise applicable motor home coverage premium:

<b>Number of Weeks Rented Per Year</b>	<b>Factor</b>
1 – 4	0.50
Over 4	1.00

**B. Trailers and Camper Bodies Designed For Use with Private Passenger Autos and Pickups**

**LIABILITY**

A Personal Auto Policy affording liability coverage covers trailers designed for use with a private passenger auto, pickup or van, and camper bodies designed for use with a pickup, without additional premium charge and without specific description of the trailer or camper body:

**Exceptions:** Coverage is not provided for a trailer or camper body:

- (1) used for business purposes with other than a private passenger auto or owned pickup or van, or
- (2) when no auto is owned by the insured.

**MEDICAL PAYMENTS**

A Personal Auto Policy affording medical payments coverage covers trailers designed for use with a private passenger auto, pickup, or van and camper bodies designed for use with a pickup, without additional premium charge and without specific description of the trailer or camper body.

**Exceptions:** Coverage is not provided for a trailer or camper body:

- (1) used for business purposes with other than a private passenger auto or owned pickup or van,
- (2) when no auto is owned by the insured, or
- (3) located for use as a residence or premises.

**19. MISCELLANEOUS TYPES (Cont'd.)****LIABILITY AND MEDICAL PAYMENTS**

Liability and Medical Payments Coverage is afforded without additional premium charge for farm wagons and farm implements when attached to a private passenger auto, pickup or van.

**PHYSICAL DAMAGE**

Trailers and camper bodies are to be insured as separate items with separate premiums shown for each unit. The deductible applies separately to each unit. Attach the trailer/camper body coverage maximum limit of liability) endorsement (**PP0307**)

**Note:** Coverage is not provided on an "agreed value" basis.

**1. Recreational Trailers and Camper Bodies**

(Class Code 958200)

- a. A recreational trailer is a non-self-propelled recreational unit equipped as living quarters, including cooking, dining, sleeping, plumbing or refrigeration facilities.
- b. A camper body is a non-self-propelled unit designed to be transported by a pickup, with or without cooking, dining, sleeping, plumbing or refrigeration facilities.

To be eligible for coverage, the insured must maintain a separate and permanent residence other than the recreational trailer or camper body.

**Comprehensive and Collision** – use Motor Home rates.

**2. All Other Trailers**

(Class Code 941000)

<b>Comprehensive Deductibles</b>	<b>Coverage Code</b>	<b>Annual Rate Per \$100</b>
100	010	\$1.00
200	015	0.84
<b>Collision Deductibles</b>	<b>Coverage Code</b>	<b>Annual Rate Per \$100</b>
200	073	0.80
300	082	0.72

**C. MOTORCYCLES** – Refer to Motorcycle and RV Section of this manual.

**D. Snowmobiles and All-Terrain Vehicles**

*Refer to Company for rule and rates on file with the Insurance Department.*

**E. Dune Buggies**

*Refer to Company for rule and rates on file with the Insurance Department.*

**F. Golf Carts**

*Refer to Company for rule and rates on file with the Insurance Department.*

**G. Antique Autos**

(Class Code 962000)

An antique auto is a motor vehicle of the private passenger type which is 25 or more years old and is maintained primarily for use in exhibitions, club activities, parades and other functions of public interest, and occasionally used for other purposes.

**LIABILITY**

Charge 40% of the private passenger base rate.

**MEDICAL PAYMENTS, UNINSURED AND UNDERINSURED MOTORISTS**

Charge the private passenger base rate.

**19. MISCELLANEOUS TYPES (Cont'd.)****PHYSICAL DAMAGE**

<b>Coverage</b>	<b>Deductible</b>	<b>Annual Rate Per \$100</b>
Comprehensive	\$100	\$1.04
	200	.84
Collision	\$200	1.20
	300	1.10

**Attach Endorsement – PP0308 – Coverage for Damage to Your Auto (Stated Amount Maximum Limit of Liability)**

**Note:** Coverage is not provided on an “agreed value” basis.

**H. Classic Autos**

A classic auto is a motor vehicle of the private passenger type which is 10 or more years old and may be used on a regular basis. Its value is significantly higher than the average value of other autos of the same make and model year.

**LIABILITY, MEDICAL PAYMENTS, UNINSURED AND UNDERINSURED MOTORISTS**

Classify and rate as a private passenger auto.

**PHYSICAL DAMAGE**

Attach the coverage for damage to your auto (maximum limit of liability) endorsement (**PP0308**).

**Note:** Coverage is not provided on an “agreed value” basis.

1. Determine the amount of coverage applicable to the vehicle.
2. Assign a symbol based on the stated amount, from the table for 1990 and subsequent model years on Page 1 of the Symbol and Identification Section.
3. Classify and rate as a private passenger auto using the base rate for the current model year.

**20. RATING TERRITORIES**

- A. The Rate Pages display rates by territory.
- B. A rating territory is a geographical area defined in terms of U.S Postal Service zip codes, as shown on the Territory Definitions pages.
  1. Determine the applicable rating territory based on the zip code of the location of principal garaging of the vehicle. If the zip code of the mailing address differs from the zip code of the location of principal garaging, use the zip code of the garaging location to assign the rating territory.
  2. As zip code boundaries are changed by the U.S. Postal Service, new zip code may be created. If this new zip code is not yet listed in the Territory Definitions, use the zip code that formerly applied to the risk before the zip code boundaries were changed in order to determine the rating territory for a risk located in the new zip code.
  3. Future USPS zip code changes will be reflected in ISO's territory definitions in accordance with the ISO zip code territory maintenance procedures on file with the Insurance Department. Manual pages will be updated on a regular basis to reflect future zip code changes.

**21. ADDITIONAL RULE****ARKANSAS MEDICAL PAYMENTS INSURANCE, WORK LOSS COVERAGE & ACCIDENTAL DEATH BENEFIT****A. Eligibility**

Medical Payments Insurance, Work Loss Coverage and Accidental Death Benefit must be afforded under every auto liability policy issued or delivered to the owner of an auto, motorcycle, motorscooter, motorbike or similar motor vehicle registered or principally garaged in Arkansas.

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**21. ADDITIONAL RULE (Cont'd.)**

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If one or more of these coverages are afforded, attach Endorsement **PP0582** – Personal injury Protection Coverage – Arkansas.

**Exception:**

1. The named insured has the right to reject one or more of such coverages in writing and must reject the Statutory Limit of Medical Payments in writing if lower or higher limits are requested.
2. Subsequent renewal policies issued by the same insurer need not provide the rejected coverage(s) or limit unless the named insured requests such coverage(s) or limit in writing.

**B. Coverages and Rates****1. Medical Payments**

a. **Limits:** Statutory Limit per person – \$5,000.

- (1) Lower or higher limits are permitted, only when the named insured has rejected the Statutory Limit.
- (2) A maximum limit of \$5,000 applies to pedestrians who are other than the named insured or a relative.
- (3) Basic and Increased Limits of Personal Auto Medical Payments Coverage may be purchased only when the named insured has rejected Arkansas Medical Payments Coverage.

Refer to the Exceptions to Eligibility above for rejection procedures.

b. **Rates**

- (1) Use the base rates for Medical Payments Insurance.
- (2) The Classifications and SDIP rules apply.

**2. Work Loss Coverage**

a. **Limits:** Maximum per person –

- (1) For an Income Earner – \$140 per week for 52 weeks.
- (2) For a Non-Income Earner – \$70 per week for 52 weeks.

b. **Rates**

- (1) Motorcycles, Motorscooters, Motorbikes or Similar Motor Vehicles – This section does not apply.
- (2) All Other Motor Vehicles  
\$5.00 per unit, annually. (See Note Below.)  
The Classifications and SDIP Rules do NOT apply.

**3. Accidental Death Benefit**

a. **Limits:** Maximum per person – \$5,000.

b. **Rates:**

- (1) Motorcycles, Motorscooters, Motorbikes or Similar Motor Vehicles – This section does not apply.
- (2) All Other Motor Vehicles  
\$3.00 per unit, annually. (See Note below.)  
The Classifications and SDIP Rules do NOT apply.

**NOTE:** When adding Work Loss Coverage and/or Accidental Death Benefit to outstanding policies:

Charge 10% of the rates shown above for each month, or part of a month insured subject to a minimum of \$3.00 per policy up to a maximum of the rate per car, annually shown above.

## PERSONAL VEHICLE MANUAL

## COMPREHENSIVE MODEL YEAR / SYMBOL RELATIVITIES

Symbol	MODEL YEAR													
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998
1	0.34	0.40	0.38	0.36	0.34	0.33	0.31	0.29	0.28	0.27	0.25	0.24	0.23	0.22
2	0.42	0.51	0.49	0.47	0.44	0.42	0.40	0.38	0.36	0.34	0.32	0.31	0.29	0.28
3	0.52	0.62	0.59	0.56	0.53	0.51	0.48	0.45	0.44	0.41	0.39	0.37	0.35	0.34
4	0.64	0.70	0.67	0.64	0.60	0.58	0.54	0.52	0.50	0.47	0.44	0.42	0.40	0.38
5	0.73	0.79	0.75	0.71	0.68	0.65	0.61	0.58	0.56	0.53	0.50	0.47	0.45	0.43
6	0.80	0.88	0.84	0.80	0.76	0.72	0.68	0.65	0.62	0.59	0.55	0.53	0.50	0.48
7	0.89	0.97	0.92	0.87	0.83	0.79	0.75	0.71	0.68	0.64	0.61	0.58	0.55	0.52
8	0.96	1.05	1.00	0.95	0.90	0.86	0.81	0.77	0.74	0.70	0.66	0.63	0.60	0.57
10	1.03	1.14	1.09	1.04	0.98	0.94	0.88	0.84	0.81	0.76	0.72	0.69	0.65	0.62
11	1.10	1.26	1.20	1.14	1.08	1.03	0.97	0.92	0.89	0.84	0.79	0.76	0.72	0.68
12	1.17	1.38	1.31	1.24	1.18	1.13	1.06	1.01	0.97	0.92	0.86	0.83	0.79	0.75
13	1.22	1.50	1.43	1.36	1.29	1.23	1.16	1.10	1.06	1.00	0.94	0.90	0.86	0.82
14	1.28	1.64	1.56	1.48	1.40	1.34	1.26	1.20	1.15	1.09	1.03	0.98	0.94	0.89
15	1.34	1.81	1.72	1.63	1.55	1.48	1.39	1.32	1.27	1.20	1.14	1.08	1.03	0.98
16	1.40	1.96	1.87	1.78	1.68	1.61	1.51	1.44	1.38	1.31	1.23	1.18	1.12	1.07
17	1.46	2.12	2.02	1.92	1.82	1.74	1.64	1.56	1.49	1.41	1.33	1.27	1.21	1.15
18	1.53	2.27	2.16	2.05	1.94	1.86	1.75	1.66	1.60	1.51	1.43	1.36	1.30	1.23
19	1.58	2.46	2.34	2.22	2.11	2.01	1.90	1.80	1.73	1.64	1.54	1.47	1.40	1.33
20	1.64	2.67	2.54	2.41	2.29	2.18	2.06	1.96	1.88	1.78	1.68	1.60	1.52	1.45
21	1.69	2.91	2.77	2.63	2.49	2.38	2.24	2.13	2.05	1.94	1.83	1.75	1.66	1.58
22	1.75	3.21	3.06	2.91	2.75	2.63	2.48	2.36	2.26	2.14	2.02	1.93	1.84	1.74
23	1.80	3.54	3.37	3.20	3.03	2.90	2.73	2.59	2.49	2.36	2.22	2.12	2.02	1.92
24	1.86	4.02	3.83	3.64	3.45	3.29	3.10	2.95	2.83	2.68	2.53	2.41	2.30	2.18
25	1.91	4.71	4.49	4.27	4.04	3.86	3.64	3.46	3.32	3.14	2.96	2.83	2.69	2.56
26	1.96	5.43	5.17	4.91	4.65	4.45	4.19	3.98	3.83	3.62	3.41	3.26	3.10	2.95
27	2.01	6.21	5.91	5.61	5.32	5.08	4.79	4.55	4.37	4.14	3.90	3.72	3.55	3.37
28	2.07													
29	2.11													
30	2.17													
31	2.22													
32	2.27													
33	2.31													
34	2.37													
35	2.41													
36	2.48													
37	2.55													
38	2.63													
39	2.70													
40	2.77													

1989 AND PRIOR MODEL YEAR SYMBOLS REFER TO RULE 12

PERSONAL VEHICLE MANUAL

COMPREHENSIVE MODEL YEAR / SYMBOL RELATIVITIES (Cont'd.)

Symbol	MODEL YEAR													
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998 1990
41	2.84													
42	2.92													
43	2.98													
44	3.06													
45	3.12													
46	3.20													
47	3.29													
48	3.38													
49	3.47													
50	3.54													
51	3.63													
52	3.72													
53	3.80													
54	3.93													
55	4.09													
56	4.27													
57	4.44													
58	4.72													
59	5.08													
60	5.46													
61	5.84													
62	6.24													
63	6.64													
64	7.05													
65	7.45													

1989 AND PRIOR MODEL YEAR SYMBOLS REFER TO RULE 12

## PERSONAL VEHICLE MANUAL

## COLLISION MODEL YEAR / SYMBOL RELATIVITIES

Symbol	MODEL YEAR													
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998
1	0.48	0.65	0.62	0.58	0.55	0.51	0.47	0.43	0.41	0.38	0.36	0.34	0.32	0.30
2	0.61	0.74	0.70	0.66	0.62	0.58	0.53	0.49	0.46	0.43	0.41	0.39	0.36	0.34
3	0.74	0.81	0.77	0.72	0.68	0.64	0.59	0.54	0.51	0.48	0.45	0.42	0.39	0.37
4	0.85	0.86	0.82	0.77	0.72	0.68	0.62	0.57	0.54	0.51	0.48	0.45	0.42	0.39
5	0.90	0.90	0.86	0.81	0.76	0.71	0.65	0.60	0.57	0.53	0.50	0.47	0.44	0.41
6	0.94	0.95	0.90	0.85	0.79	0.75	0.68	0.63	0.59	0.56	0.52	0.50	0.46	0.43
7	0.97	1.00	0.95	0.89	0.84	0.79	0.72	0.67	0.63	0.59	0.55	0.52	0.48	0.46
8	1.01	1.05	1.00	0.94	0.88	0.83	0.76	0.70	0.66	0.62	0.58	0.55	0.51	0.48
10	1.06	1.10	1.05	0.99	0.92	0.87	0.80	0.74	0.69	0.65	0.61	0.58	0.54	0.50
11	1.10	1.16	1.10	1.03	0.97	0.91	0.84	0.77	0.73	0.68	0.64	0.61	0.56	0.53
12	1.13	1.21	1.15	1.08	1.01	0.95	0.87	0.81	0.76	0.71	0.67	0.63	0.59	0.55
13	1.17	1.27	1.21	1.14	1.06	1.00	0.92	0.85	0.80	0.75	0.70	0.67	0.62	0.58
14	1.19	1.34	1.28	1.20	1.13	1.06	0.97	0.90	0.84	0.79	0.74	0.70	0.65	0.61
15	1.22	1.44	1.37	1.29	1.21	1.14	1.04	0.96	0.90	0.85	0.79	0.75	0.70	0.66
16	1.24	1.51	1.44	1.35	1.27	1.20	1.09	1.01	0.95	0.89	0.84	0.79	0.73	0.69
17	1.28	1.60	1.52	1.43	1.34	1.26	1.16	1.06	1.00	0.94	0.88	0.84	0.78	0.73
18	1.31	1.68	1.60	1.50	1.41	1.33	1.22	1.12	1.06	0.99	0.93	0.88	0.82	0.77
19	1.34	1.76	1.68	1.58	1.48	1.39	1.28	1.18	1.11	1.04	0.97	0.92	0.86	0.81
20	1.36	1.85	1.76	1.65	1.55	1.46	1.34	1.23	1.16	1.09	1.02	0.97	0.90	0.84
21	1.40	1.93	1.84	1.73	1.62	1.53	1.40	1.29	1.21	1.14	1.07	1.01	0.94	0.88
22	1.43	2.04	1.94	1.82	1.71	1.61	1.47	1.36	1.28	1.20	1.13	1.07	0.99	0.93
23	1.46	2.15	2.05	1.93	1.80	1.70	1.56	1.44	1.35	1.27	1.19	1.13	1.05	0.98
24	1.49	2.32	2.21	2.08	1.94	1.83	1.68	1.55	1.46	1.37	1.28	1.22	1.13	1.06
25	1.52	2.58	2.46	2.31	2.16	2.04	1.87	1.72	1.62	1.53	1.43	1.35	1.25	1.18
26	1.54	2.85	2.71	2.55	2.38	2.25	2.06	1.90	1.79	1.68	1.57	1.49	1.38	1.30
27	1.56	3.21	3.06	2.88	2.69	2.54	2.33	2.14	2.02	1.90	1.77	1.68	1.56	1.47
28	1.60													
29	1.62													
30	1.65													
31	1.67													
32	1.69													
33	1.73													
34	1.75													
35	1.77													
36	1.80													
37	1.84													
38	1.87													
39	1.89													
40	1.93													

1989 AND PRIOR MODEL YEAR SYMBOLS REFER TO RULE 12

PERSONAL VEHICLE MANUAL

COLLISION MODEL YEAR / SYMBOL RELATIVITIES

Symbol	MODEL YEAR													
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998 1990
41	1.95													
42	1.98													
43	2.00													
44	2.02													
45	2.05													
46	2.08													
47	2.11													
48	2.13													
49	2.17													
50	2.20													
51	2.23													
52	2.26													
53	2.29													
54	2.33													
55	2.39													
56	2.45													
57	2.52													
58	2.63													
59	2.76													
60	2.89													
61	3.06													
62	3.26													
63	3.44													
64	3.64													
65	3.83													

1989 AND PRIOR MODEL YEAR SYMBOLS REFER TO RULE 12

**PERSONAL VEHICLE MANUAL  
ANNUAL RATES**

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**EMCC**


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<b>TERRITORY</b>	<b>BI 25/50</b>	<b>PD 25,000</b>	<b>CSL 75,000</b>	<b>MED 1,000</b>	<b>COMP \$500 Deductible</b>	<b>COLL</b>
<b>021</b>	408	408	948	25	250	745
<b>022</b>	269	342	694	25	238	758
<b>023</b>	246	355	683	25	224	712
<b>024</b>	254	296	632	25	238	736
<b>025</b>	280	247	612	25	283	855
<b>026</b>	252	283	615	25	257	781
<b>027</b>	242	283	603	25	299	807
<b>028</b>	265	265	615	25	283	833
<b>029</b>	238	303	615	25	277	807
<b>030</b>	238	316	629	25	185	693
<b>031</b>	222	319	615	25	252	712
<b>032</b>	248	281	608	25	265	781
<b>033</b>	247	289	615	25	272	762

INCREASED LIMIT FACTORS FOR BI, PD AND CSL REFER TO RULE 18.  
DEDUCTIBLE OPTIONS REFER TO DEDUCTIBLE INSURANCE UNDER RULE 14.  
LIABILITY & PIP/MEDICAL (LPMP) SYMBOLS REFER TO PAGE PA-R-1.  
MODEL YEAR SYMBOL RELATIVITIES REFER TO PAGE PA-R-2.  
TERRITORIAL ZIP CODE DEFINITIONS BEGIN ON PAGE PA-T-1.

**PERSONAL VEHICLE MANUAL  
ANNUAL RATES**

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**EMCASCO**


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<b>TERRITORY</b>	<b>BI 25/50</b>	<b>PD 25,000</b>	<b>CSL 75,000</b>	<b>MED 1,000</b>	<b>COMP \$500 Deductible</b>	<b>COLL</b>
<b>021</b>	314	314	729	19	192	573
<b>022</b>	207	263	534	19	183	583
<b>023</b>	189	273	525	19	172	548
<b>024</b>	195	228	486	19	183	566
<b>025</b>	215	190	471	19	218	658
<b>026</b>	194	218	473	19	198	601
<b>027</b>	186	218	464	19	230	621
<b>028</b>	204	204	473	19	218	641
<b>029</b>	183	233	473	19	213	621
<b>030</b>	183	243	484	19	142	533
<b>031</b>	171	245	473	19	194	548
<b>032</b>	191	216	468	19	204	601
<b>033</b>	190	222	473	19	209	586

INCREASED LIMIT FACTORS FOR BI, PD AND CSL REFER TO RULE 18.  
DEDUCTIBLE OPTIONS REFER TO DEDUCTIBLE INSURANCE UNDER RULE 14.  
LIABILITY & PIP/MEDICAL (LPMP) SYMBOLS REFER TO PAGE PA-R-1.  
MODEL YEAR SYMBOL RELATIVITIES REFER TO PAGE PA-R-2.  
TERRITORIAL ZIP CODE DEFINITIONS BEGIN ON PAGE PA-T-1.

## TERRITORY DEFINITIONS

TERRITORY	ZIP CODE									
021	72053	72164	72183	72204	72206	72209	72214	72216	72219	
022	72201	72202	72203	72205	72215	72225	72260	72295		
023	72113 72222	72116 72227	72118	72190	72199	72207	72211	72212	72217	72221
024	71602 72002 72027 72046 72087 72119 72142 72223	71612 72007 72028 72057 72089 72120 72150 72231	71901 72011 72030 72063 72099 72122 72156	71902 72013 72031 72065 72103 72124 72157	71903 72015 72032 72070 72105 72125 72167	71913 72016 72033 72076 72106 72126 72173	71914 72018 72034 72078 72110 72128 72176	71964 72019 72035 72079 72114 72129 72180	71968 72022 72037 72083 72115 72132 72198	72001 72023 72039 72086 72117 72135 72210
025	71601	71603	71611	71613	71659	71665	71667			
026	71630 71678 72024 72048 72068 72107 72137 72168 72326 72359 72389 72527 72575	71639 72003 72026 72052 72069 72108 72139 72170 72328 72366 72390 72534 72579	71643 72004 72029 72055 72072 72111 72140 72175 72333 72367 72392 72543	71644 72006 72036 72058 72073 72121 72143 72178 72335 72368 72394 72545	71654 72010 72038 72059 72074 72123 72145 72179 72336 72369 72396 72546	71662 72012 72040 72060 72081 72127 72149 72181 72340 72372 72501 72550	71666 72014 72041 72061 72082 72131 72152 72182 72342 72374 72503 72553	71670 72017 72042 72064 72085 72133 72160 72311 72352 72379 72521 72564	71674 72020 72045 72066 72101 72134 72165 72312 72353 72383 72523 72568	71677 72021 72047 72067 72102 72136 72166 72322 72355 72387 72526 72571
027	71631 71658 71721 71751 71831 71862 71999	71638 71660 71722 71752 71832 71864 72084	71640 71661 71725 71758 71833 71922 72104	71646 71663 71726 71763 71835 71923	71647 71671 71728 71764 71846 71940	71652 71675 71742 71766 71847 71941	71653 71676 71743 71770 71851 71942	71655 71701 71744 71772 71852 71958	71656 71711 71745 71823 71858 71962	71657 71720 71748 71828 71859 71998
028	71635 71753 71825 71845	71642 71754 71826 71853	71651 71759 71827 71854	71724 71762 71834 71855	71730 71765 71836 71857	71731 71768 71837 71860	71740 71801 71838 71861	71747 71802 71839 71865	71749 71820 71840 71866	71750 71822 71842

## TERRITORY DEFINITIONS (Cont'd.)

TERRITORY	ZIP CODE										
029	71841	71909	71910	71920	71921	71929	71932	71933	71935	71937	
	71943	71944	71945	71949	71950	71952	71953	71956	71957	71959	
	71960	71961	71965	71969	71970	71971	71972	71973	72025	72051	
	72080	72141	72533	72544	72601	72602	72611	72613	72615	72616	
	72617	72619	72624	72626	72628	72629	72630	72631	72632	72633	
	72634	72635	72636	72638	72639	72640	72641	72642	72644	72645	
	72648	72650	72651	72653	72654	72655	72657	72658	72659	72660	
	72661	72662	72663	72666	72668	72669	72670	72672	72675	72677	
	72679	72680	72682	72683	72685	72686	72687	72721	72729	72732	
	72733	72738	72740	72742	72744	72749	72752	72760	72773	72776	
	72801	72802	72811	72812	72820	72821	72823	72824	72826	72827	
	72828	72829	72830	72832	72833	72834	72835	72837	72838	72839	
	72840	72841	72842	72843	72845	72846	72847	72851	72852	72853	
	72854	72855	72856	72857	72858	72860	72863	72865	72905	72926	
	72927	72928	72930	72932	72933	72934	72943	72946	72947	72948	
	72949	72950	72951	72952	72955	72958	72959				
	030	72901	72902	72903	72904	72906	72908	72913	72914	72916	72917
		72918	72919	72921	72923	72935	72936	72937	72938	72940	72941
		72944	72945	72956	72957						
031	72701	72702	72703	72704	72711	72712	72714	72715	72716	72717	
	72718	72719	72722	72727	72728	72730	72734	72735	72736	72737	
	72739	72741	72745	72747	72751	72753	72756	72757	72758	72761	
	72762	72764	72765	72766	72768	72769	72770	72774			
032	72005	72043	72044	72075	72088	72112	72130	72153	72169	72301	
	72303	72320	72324	72325	72327	72331	72332	72339	72341	72346	
	72347	72348	72360	72364	72373	72376	72384	72386	72429	72431	
	72432	72440	72469	72473	72475	72479	72482	72512	72513	72515	
	72517	72519	72520	72522	72524	72528	72530	72531	72532	72536	
	72537	72538	72539	72540	72554	72555	72556	72560	72561	72562	
	72565	72566	72567	72569	72572	72573	72576	72577	72578	72581	
	72583	72584	72585	72587	72623						
033	72310	72313	72315	72316	72319	72321	72329	72330	72338	72350	
	72351	72354	72358	72365	72370	72377	72391	72395	72401	72402	
	72403	72404	72410	72411	72412	72413	72414	72415	72416	72417	
	72419	72421	72422	72424	72425	72426	72427	72428	72430	72433	
	72434	72435	72436	72437	72438	72439	72441	72442	72443	72444	
	72445	72447	72449	72450	72451	72453	72454	72455	72456	72457	
	72458	72459	72460	72461	72462	72464	72465	72466	72467	72470	
	72471	72472	72474	72476	72478	72525	72529	72542			

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
71601	PINE BLUFF	025	71728	CURTIS	027
71602	WHITE HALL	024	71730	EL DORADO	028
71603	PINE BLUFF	025	71731	EL DORADO	028
71611	PINE BLUFF	025	71740	EMERSON	028
71612	WHITE HALL	024	71742	FORDYCE	027
71613	PINE BLUFF	025	71743	GURDON	027
71630	ARKANSAS CITY	026	71744	HAMPTON	027
71631	BANKS	027	71745	HARRELL	027
71635	CROSSET	028	71747	HUTTIG	028
71638	DERMOTT	027	71748	IVAN	027
71639	DUMAS	026	71749	JUNCTION CITY	028
71640	EUDORA	027	71750	LAWSON	028
71642	FOUNTAIN HILL	028	71751	LOUANN	027
71643	GOULD	026	71752	MC NEIL	027
71644	GRADY	026	71753	MAGNOLIA	028
71646	HAMBURG	027	71754	MAGNOLIA	028
71647	HERMITAGE	027	71758	MOUNT HOLLY	027
71651	JERSEY	028	71759	NORPHLET	028
71652	KINGSLAND	027	71762	SMACKOVER	028
71653	LAKE VILLAGE	027	71763	SPARKMAN	027
71654	MC GEHEE	026	71764	STEPHENS	027
71655	MONTICELLO	027	71765	STRONG	028
71656	MONTICELLO	027	71766	THORNTON	027
71657	MONTICELLO	027	71768	URBANA	028
71658	MONTROSE	027	71770	WALDO	027
71659	MOSCOW	025	71772	WHELEN SPRINGS	027
71660	NEW EDINBURG	027	71801	HOPE	028
71661	PARKDALE	027	71802	HOPE	028
71662	PICKENS	026	71820	ALLEENE	028
71663	PORTLAND	027	71822	ASHDOWN	028
71665	RISON	025	71823	BEN LOMOND	027
71666	MC GEHEE	026	71825	BLEVINS	028
71667	STAR CITY	025	71826	BRADLEY	028
71670	TILLAR	026	71827	BUCKNER	028
71671	WARREN	027	71828	CALE	027
71674	WATSON	026	71831	COLUMBUS	027
71675	WILMAR	027	71832	DE QUEEN	027
71676	WILMOT	027	71833	DIERKS	027
71677	WINCHESTER	026	71834	DODDRIDGE	028
71678	YORKTOWN	026	71835	EMMET	027
71701	CAMDEN	027	71836	FOREMAN	028
71711	CAMDEN	027	71837	FOUKE	028
71720	BEARDEN	027	71838	FULTON	028
71721	BEIRNE	027	71839	GARLAND CITY	028
71722	BLUFF CITY	027	71840	GENOA	028
71724	CALION	028	71841	GILLHAM	029
71725	CARTHAGE	027	71842	HORATIO	028
71726	CHIDESTER	027	71845	LEWISVILLE	028

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
71846	LOCKESBURG	027	71962	OKOLONA	027
71847	MC CASKILL	027	71964	PEARCY	024
71851	MINERAL SPRINGS	027	71965	PENCIL BLUFF	029
71852	NASHVILLE	027	71968	ROYAL	024
71853	OGDEN	028	71969	SIMS	029
71854	TEXARKANA	028	71970	STORY	029
71855	OZAN	028	71971	UMPIRE	029
71857	PRESCOTT	028	71972	VANDERVOORT	029
71858	ROSSTON	027	71973	WICKES	029
71859	SARATOGA	027	71998	ARKADELPHIA	027
71860	STAMPS	028	71999	ARKADELPHIA	027
71861	TAYLOR	028	72001	ADONA	024
71862	WASHINGTON	027	72002	ALEXANDER	024
71864	WILLISVILLE	027	72003	ALMYRA	026
71865	WILTON	028	72004	ALTHEIMER	026
71866	WINTHROP	028	72005	AMAGON	032
71901	HOT SPRINGS NATL PARK	024	72006	AUGUSTA	026
71902	HOT SPRINGS NATL PARK	024	72007	AUSTIN	024
71903	HOT SPRINGS NATL PARK	024	72010	BALD KNOB	026
71909	HOT SPRINGS VILLAGE	029	72011	BAUXITE	024
71910	HOT SPRINGS VILLAGE	029	72012	BEEBE	026
71913	HOT SPRINGS NATL PARK	024	72013	BEE BRANCH	024
71914	HOT SPRINGS NATL PARK	024	72014	BEEDEVILLE	026
71920	ALPINE	029	72015	BENTON	024
71921	AMITY	029	72016	BIGELOW	024
71922	ANTOINE	027	72017	BISCOE	026
71923	ARKADELPHIA	027	72018	BENTON	024
71929	BISMARCK	029	72019	BENTON	024
71932	BOARD CAMP	029	72020	BRADFORD	026
71933	BONNERDALE	029	72021	BRINKLEY	026
71935	CADDO GAP	029	72022	BRYANT	024
71937	COVE	029	72023	CABOT	024
71940	DELIGHT	027	72024	CARLISLE	026
71941	DONALDSON	027	72025	CASA	029
71942	FRIENDSHIP	027	72026	CASSCOE	026
71943	GLENWOOD	029	72027	CENTER RIDGE	024
71944	GRANNIS	029	72028	CHOCTAW	024
71945	HATFIELD	029	72029	CLARENDON	026
71949	JESSIEVILLE	029	72030	CLEVELAND	024
71950	KIRBY	029	72031	CLINTON	024
71952	LANGLEY	029	72032	CONWAY	024
71953	MENA	029	72033	CONWAY	024
71956	MOUNTAIN PINE	029	72034	CONWAY	024
71957	MOUNT IDA	029	72035	CONWAY	024
71958	MURFREESBORO	027	72036	COTTON PLANT	026
71959	NEWHOPE	029	72037	COY	024
71960	NORMAN	029	72038	CROCKETTS BLUFF	026
71961	ODEN	029	72039	DAMASCUS	024

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72040	DES ARC	026	72105	JONES MILL	024
72041	DE VALLS BLUFF	026	72106	MAYFLOWER	024
72042	DE WITT	026	72107	MENIFEE	026
72043	DIAZ	032	72108	MONROE	026
72044	EDGEMONT	032	72110	MORRILTON	024
72045	EL PASO	026	72111	MOUNT VERNON	026
72046	ENGLAND	024	72112	NEWPORT	032
72047	ENOLA	026	72113	MAUMELLE	023
72048	ETHEL	026	72114	NORTH LITTLE ROCK	024
72051	FOX	029	72115	NORTH LITTLE ROCK	024
72052	GARNER	026	72116	NORTH LITTLE ROCK	023
72053	COLLEGE STATION	021	72117	NORTH LITTLE ROCK	024
72055	GILLETT	026	72118	NORTH LITTLE ROCK	023
72057	GRAPEVINE	024	72119	NORTH LITTLE ROCK	024
72058	GREENBRIER	026	72120	SHERWOOD	024
72059	GREGORY	026	72121	PANGBURN	026
72060	GRIFFITHVILLE	026	72122	PARON	024
72061	GUY	026	72123	PATTERSON	026
72063	HATTIEVILLE	024	72124	NORTH LITTLE ROCK	024
72064	HAZEN	026	72125	PERRY	024
72065	HENSLEY	024	72126	PERRYVILLE	024
72066	HICKORY PLAINS	026	72127	PLUMERVILLE	026
72067	HIGDEN	026	72128	POYEN	024
72068	HIGGINSON	026	72129	PRATTSVILLE	024
72069	HOLLY GROVE	026	72130	PRIM	032
72070	HOUSTON	024	72131	QUITMAN	026
72072	HUMNOKE	026	72132	REDFIELD	024
72073	HUMPHREY	026	72133	REYDELL	026
72074	HUNTER	026	72134	ROE	026
72075	JACKSONPORT	032	72135	ROLAND	024
72076	JACKSONVILLE	024	72136	ROMANCE	026
72078	JACKSONVILLE	024	72137	ROSE BUD	026
72079	JEFFERSON	024	72139	RUSSELL	026
72080	JERUSALEM	029	72140	SAINT CHARLES	026
72081	JUDSONIA	026	72141	SCOTLAND	029
72082	KENSETT	026	72142	SCOTT	024
72083	KEO	024	72143	SEARCY	026
72084	LEOLA	027	72145	SEARCY	026
72085	LETONA	026	72149	SEARCY	026
72086	LONOKE	024	72150	SHERIDAN	024
72087	LONSDALE	024	72152	SHERRILL	026
72088	FAIRFIELD BAY	032	72153	SHIRLEY	032
72089	BRYANT	024	72156	SOLGOHACHIA	024
72099	LITTLE ROCK AIRFORCE BASE	024	72157	SPRINGFIELD	024
72101	MC CRORY	026	72160	STUTTGART	026
72102	MC RAE	026	72164	SWEET HOME	021
72103	MABELVALE	024	72165	THIDA	026
72104	MALVERN	027	72166	TICHNOR	026

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72167	TRASKWOOD	024	72319	GOSNELL	033
72168	TUCKER	026	72320	BRICKEYS	032
72169	TUPELO	032	72321	BURDETTE	033
72170	ULM	026	72322	CALDWELL	026
72173	VILONIA	024	72324	CHERRY VALLEY	032
72175	WABBASEKA	026	72325	CLARKEDALE	032
72176	WARD	024	72326	COLT	026
72178	WEST POINT	026	72327	CRAWFORDSVILLE	032
72179	WILBURN	026	72328	CRUMROD	026
72180	WOODSON	024	72329	DRIVER	033
72181	WOOSTER	026	72330	DYESS	033
72182	WRIGHT	026	72331	EARLE	032
72183	WRIGHTSVILLE	021	72332	EDMONDSON	032
72190	NORTH LITTLE ROCK	023	72333	ELAINE	026
72198	NORTH LITTLE ROCK	024	72335	FOREST CITY	026
72199	NORTH LITTLE ROCK	023	72336	FOREST CITY	026
72201	LITTLE ROCK	022	72338	FRENCHMANS BAYOU	033
72202	LITTLE ROCK	022	72339	GILMORE	032
72203	LITTLE ROCK	022	72340	GOODWIN	026
72204	LITTLE ROCK	021	72341	HAYNES	032
72205	LITTLE ROCK	022	72342	HELENA	026
72206	LITTLE ROCK	021	72346	HETH	032
72207	LITTLE ROCK	023	72347	HICKORY RIDGE	032
72209	LITTLE ROCK	021	72348	HUGHES	032
72210	LITTLE ROCK	024	72350	JOINER	033
72211	LITTLE ROCK	023	72351	KEISER	033
72212	LITTLE ROCK	023	72352	LA GRANGE	026
72214	LITTLE ROCK	021	72353	LAMBROOK	026
72215	LITTLE ROCK	022	72354	LEPANTO	033
72216	LITTLE ROCK	021	72355	LEXA	026
72217	LITTLE ROCK	023	72358	LUXORA	033
72219	LITTLE ROCK	021	72359	MADISON	026
72221	LITTLE ROCK	023	72360	MARIANNA	032
72222	LITTLE ROCK	023	72364	MARION	032
72223	LITTLE ROCK	024	72365	MARKED TREE	033
72225	LITTLE ROCK	022	72366	MARVELL	026
72227	LITTLE ROCK	023	72367	MELLWOOD	026
72231	LITTLE ROCK	024	72368	MORO	026
72260	LITTLE ROCK	022	72369	ONEIDA	026
72295	LITTLE ROCK	022	72370	OSCEOLA	033
72301	WEST MEMPHIS	032	72372	PALESTINE	026
72303	WEST MEMPHIS	032	72373	PARKIN	032
72310	ARMOREL	033	72374	POPLAR GROVE	026
72311	AUBREY	026	72376	PROCTOR	032
72312	BARTON	026	72377	RIVERVALE	033
72313	BASSETT	033	72379	SNOW LAKE	026
72315	BLYTHEVILLE	033	72383	TURNER	026
72316	BLYTHEVILLE	033	72384	TURRELL	032

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72386	TYRONZA	032	72450	PARAGOULD	033
72387	VANNDALE	026	72451	PARAGOULD	033
72389	WABASH	026	72453	PEACH ORCHARD	033
72390	WEST HELENA	026	72454	PIGGOTT	033
72391	WEST RIDGE	033	72455	POCAHONTAS	033
72392	WHEATLEY	026	72456	POLLARD	033
72394	WIDENER	026	72457	PORTIA	033
72395	WILSON	033	72458	POWHATAN	033
72396	WYNNE	026	72459	RAVENDEN	033
72401	JONESBORO	033	72460	RAVENDEN SPRING	033
72402	JONESBORO	033	72461	RECTOR	033
72403	JONESBORO	033	72462	REYNO	033
72404	JONESBORO	033	72464	SAINT FRANCIS	033
72410	ALICIA	033	72465	SEDGWICK	033
72411	BAY	033	72466	SMITHVILLE	033
72412	BEECH GROVE	033	72467	STATE UNIVERSITY	033
72413	BIGGERS	033	72469	STRAWBERRY	032
72414	BLACK OAK	033	72470	SUCCESS	033
72415	BLACK ROCK	033	72471	SWIFTON	033
72416	BONO	033	72472	TRUMANN	033
72417	BROOKLAND	033	72473	TUCKERMAN	032
72419	CARAWY	033	72474	WALCOTT	033
72421	CASH	033	72475	WALDENBURG	032
72422	CORNING	033	72476	WALNUT RIDGE	033
72424	DATTO	033	72478	WARM SPRINGS	033
72425	DELAPLAINE	033	72479	WEINER	032
72426	DELL	033	72482	WILLIFORD	032
72427	EGYPT	033	72501	BATESVILLE	026
72428	ETOWAH	033	72503	BATESVILLE	026
72429	FISHER	032	72512	HORSESHOE BEND	032
72430	GREENWAY	033	72513	ASH FLAT	032
72431	GRUBBS	032	72515	BEXAR	032
72432	HARRISBURG	032	72517	BROCKWELL	032
72433	HOXIE	033	72519	CALICO ROCK	032
72434	IMBODEN	033	72520	CAMP	032
72435	KNOBEL	033	72521	CAVE CITY	026
72436	LAFE	033	72522	CHARLOTTE	032
72437	LAKE CITY	033	72523	CONCORD	026
72438	LEACHVILLE	033	72524	CORD	032
72439	LIGHT	033	72525	CHEROKEE VILLAGE	033
72440	LYNN	032	72526	CUSHMAN	026
72441	MC DOUGAL	033	72527	DESHA	026
72442	MANILA	033	72528	DOLPH	032
72443	MARMADUKE	033	72529	CHEROKEE VILLAGE	033
72444	MAYNARD	033	72530	DRASCO	032
72445	MINTURN	033	72531	ELIZABETH	032
72447	MONETTE	033	72532	EVENING SHADE	032
72449	O KEAN	033	72533	FIFTY SIX	029

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72534	FLORAL	026	72626	COTTER	029
72536	FRANKLIN	032	72628	DEER	029
72537	GAMALIEL	032	72629	DENNARD	029
72538	GEPP	032	72630	DIAMOND CITY	029
72539	GLENCOE	032	72631	EUREKA SPRINGS	029
72540	GUION	032	72632	EUREKA SPRINGS	029
72542	HARDY	033	72633	EVERTON	029
72543	HEBER SPRINGS	026	72634	FLIPPIN	029
72544	HENDERSON	029	72635	GASSVILLE	029
72545	HEBER SPRINGS	026	72636	GILBERT	029
72546	IDA	026	72638	GREEN FOREST	029
72550	LOCUST GROVE	026	72639	HARRIET	029
72553	MAGNESS	026	72640	HASTY	029
72554	MAMMOTH SPRING	032	72641	JASPER	029
72555	MARCELLA	032	72642	LAKEVIEW	029
72556	MELBOURNE	032	72644	LEAD HILL	029
72560	MOUNTAIN VIEW	032	72645	LESLIE	029
72561	MOUNT PLEASANT	032	72648	MARBLE FALLS	029
72562	NEWARK	032	72650	MARSHALL	029
72564	OIL TROUGH	026	72651	MIDWAY	029
72565	OXFORD	032	72653	MOUNTAIN HOME	029
72566	PINEVILLE	032	72654	MOUNTAIN HOME	029
72567	PLEASANT GROVE	032	72655	MOUNT JUDEA	029
72568	PLEASANT PLAINS	026	72657	TIMBO	029
72569	POUGHKEEPSIE	032	72658	NORFORK	029
72571	ROSIE	026	72659	NORFORK	029
72572	SAFFELL	032	72660	OAK GROVE	029
72573	SAGE	032	72661	OAKLAND	029
72575	SALADO	026	72662	OMAHA	029
72576	SALEM	032	72663	ONIA	029
72577	SIDNEY	032	72666	PARTHENON	029
72578	STURKIE	032	72668	PEEL	029
72579	SULPHUR ROCK	026	72669	PINDALL	029
72581	TUMBLING SHOALS	032	72670	PONCA	029
72583	VIOLA	032	72672	PYATT	029
72584	VIOLET HILL	032	72675	SAINT JOE	029
72585	WIDEMAN	032	72677	SUMMIT	029
72587	WISEMAN	032	72679	TILLY	029
72601	HARRISON	029	72680	TIMBO	029
72602	HARRISON	029	72682	VALLEY SPRINGS	029
72611	ALPENA	029	72683	VENDOR	029
72613	BEAVER	029	72685	WESTERN GROVE	029
72615	BERGMAN	029	72686	WITTS SPRINGS	029
72616	BERRYVILLE	029	72687	YELLVILLE	029
72617	BIG FLAT	029	72701	FAYETTEVILLE	031
72619	BULL SHOALS	029	72702	FAYETTEVILLE	031
72623	CLARKRIDGE	032	72703	FAYETTEVILLE	031
72624	COMPTON	029	72704	FAYETTEVILLE	031

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72711	AVOCA	031	72802	RUSSELLVILLE	029
72712	BENTONVILLE	031	72811	RUSSELLVILLE	029
72714	BELLA VISTA	031	72812	RUSSELLVILLE	029
72715	BELLA VISTA	031	72820	ALIX	029
72716	BENTONVILLE	031	72821	ALTUS	029
72717	CANEHILL	031	72823	ATKINS	029
72718	CAVE SPRINGS	031	72824	BELLEVILLE	029
72719	CENTERTON	031	72826	BLUE MOUNTAIN	029
72721	COMBS	029	72827	BLUFFTON	029
72722	DECATUR	031	72828	BRIGGSVILLE	029
72727	ELKINS	031	72829	CENTERVILLE	029
72728	ELM SPRINGS	031	72830	CLARKSVILLE	029
72729	EVANSVILLE	029	72832	COAL HILL	029
72730	FARMINGTON	031	72833	DANVILLE	029
72732	GARFIELD	029	72834	DARDANELLE	029
72733	GATEWAY	029	72835	DELAWARE	029
72734	GENTRY	031	72837	DOVER	029
72735	GOSHEN	031	72838	GRAVELLY	029
72736	GRAVETTE	031	72839	HAGARVILLE	029
72737	GREENLAND	031	72840	HARTMAN	029
72738	HINDVILLE	029	72841	HARVEY	029
72739	HIWASSE	031	72842	HAVANA	029
72740	HUNTSVILLE	029	72843	HECTOR	029
72741	JOHNSON	031	72845	KNOXVILLE	029
72742	KINGSTON	029	72846	LAMAR	029
72744	LINCOLN	029	72847	LONDON	029
72745	LOWELL	031	72851	NEW BLAINE	029
72747	MAYSVILLE	031	72852	OARK	029
72749	MORROW	029	72853	OLA	029
72751	PEA RIDGE	031	72854	OZONE	029
72752	PETTIGREW	029	72855	PARIS	029
72753	ORAURUE GRIVE	031	72856	PELSOR	029
72756	ROGERS	031	72857	PLAINVIEW	029
72757	ROGERS	031	72858	POTTSVILLE	029
72758	ROGERS	031	72860	ROVER	029
72760	SAINT PAUL	029	72863	SCRANTON	029
72761	SILOAM SPRINGS	031	72865	SUBIACO	029
72762	SPRINGDALE	031	72901	FORT SMITH	030
72764	SPRINGDALE	031	72902	FORT SMITH	030
72765	SPRINGDALE	031	72903	FORT SMITH	030
72766	SPRINGDALE	031	72904	FORT SMITH	030
72768	SULPHUR SPRINGS	031	72905	FORT SMITH	029
72769	SUMMERS	031	72906	FORT SMITH	030
72770	TONTITOWN	031	72908	FORT SMITH	030
72773	WESLEY	029	72913	FORT SMITH	030
72774	WEST FORK	031	72914	FORT SMITH	030
72776	WITTER	029	72916	FORT SMITH	030
72801	RUSSELLVILLE	029	72917	FORT SMITH	030

## TERRITORY DEFINITIONS (Cont'd.)

ZIP CODE	USPS ZIP CODE NAME	TERR	ZIP CODE	USPS ZIP CODE NAME	TERR
72918	FORT SMITH	030	72941	LAVACA	030
72919	FORT SMITH	030	72943	MAGAZINE	029
72921	ALMA	030	72944	MANSFIELD	030
72923	BARLING	030	72945	MIDLAND	030
72926	BOLES	029	72946	MOUNTAINBURG	029
72927	BOONEVILLE	029	72947	MULBERRY	029
72928	BRANCH	029	72948	NATURAL DAM	029
72930	CECIL	029	72949	OZARK	029
72932	CEDARVILLE	029	72950	PARKS	029
72933	CHARLESTON	029	72951	RATCLIFF	029
72934	CHESTER	029	72952	RUDY	029
72935	DYER	030	72955	UNIONTOWN	029
72936	GREENWOOD	030	72956	VAN BUREN	030
72937	HACKETT	030	72957	VAN BUREN	030
72938	HARTFORD	030	72958	WALDRON	029
72940	HUNTINGTON	030	72959	WINSLOW	029

The following are on file with the Arkansas Insurance Department, but not displayed in the Agency Manual:

\*

**12 RULES FOR DETERMINING PHYSICAL DAMAGE BASE RATES FOR SYMBOLS NOT DISPLAYED ON RATE PAGES**

**A. Other Than Collision**

Symbol	Factor	Symbol	Factor
66	8.05	71	12.10
67	8.87	72	12.91
68	9.67	73	13.73
69	10.47	74	14.54
70	11.29	75	15.36

**1. 2011 and Later Model Year Vehicles – Symbol 98 Vehicles**

Develop the factor for Symbol 98 vehicles as follows:

- a. Increase the factor for Symbol 70 by +0.74 for each \$10,000 or fraction of \$10,000 above \$150,000 of Original Cost; and
- b. Apply this factor to the Symbol 11 rate on the rate pages for the applicable model year.

**B. Collision**

Symbol	Factor	Symbol	Factor
66	4.11	71	6.03
67	4.50	72	6.41
68	4.88	73	6.80
69	5.27	74	7.18
70	5.64	75	7.57

**1. 2011 and Later Model Year Vehicles – Symbol 98 Vehicles**

Develop the factor for Symbol 98 vehicles as follows:

- a. Increase the factor for Symbol 70 by +0.35 for each \$10,000 or fraction of \$10,000 above \$150,000 of Original Cost; and
- b. Apply this factor to the Symbol 11 rate on the rate pages for the applicable model year.

\*

**14. MISCELLANEOUS COVERAGES**

**A. Uninsured Motorists Coverage**

**1. Owners**

**c. Increased Limits**

**ANNUAL RATES – UMBI ONLY**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$1,000,000	\$144.00	\$115.00	\$80.00	\$64.00	\$57.00	\$45.50

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 300/300	\$119.00	\$95.50	\$66.50	\$53.00	\$47.00	\$37.50
500/500	131.50	105.00	73.00	58.50	51.50	41.50
500/1,000	132.00	105.50	73.50	58.50	52.00	41.50

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

**ANNUAL RATES – UMBI/UMPD**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$1,000,000	\$204.50	\$163.50	\$125.50	\$100.50	\$88.50	\$71.00

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 300/300	\$181.50	\$145.50	\$112.50	\$90.00	\$78.50	\$62.50
500/500	194.00	155.00	119.50	95.50	83.00	66.50
500/1,000	194.50	155.50	119.50	96.00	83.50	66.50

**B. Underinsured Motorists Coverage**

**3. Annual Rates**

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$1,000,000	\$287.50	\$230.00	\$303.50	\$243.00	\$237.00	\$189.50

Single Limit	Territory 21		Territories 22, 23, 24, 25		All Other Territories	
	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car	Single Car	Multi-Car Per Car
\$ 300/300	\$206.50	\$165.50	\$218.00	\$174.50	\$170.50	\$136.50
500/500	245.00	196.00	258.50	207.00	202.00	161.50
500/1,000	246.00	197.00	260.00	208.00	203.50	162.50

**L. Named Driver Exclusion**

**1. Applicability**

An automobile insurance policy may be endorsed to exclude all or specific coverage(s) when a motor vehicle is operated by a specifically excluded individual.

**2. Requirements**

- a. The named driver exclusion endorsement must be signed by the named insured.
- b. The named driver exclusion endorsement shall remain in effect:
  - (1) For the term of the policy; and
  - (2) For each renewal, reinstatement, substitute, modified, replacement or amended policy; unless discontinued by the insurer.
- c. If a named driver exclusion endorsement is attached to the policy:
  - (1) The premiums charged shall not reflect the claim experience, driving record or rating classification of the named excluded driver with respect to the excluded coverages.
  - (2) The named excluded driver shall not be listed as an operator of any auto covered under the policy.

**14. MISCELLANEOUS COVERAGES (Cont'd.)**

- d. If a loss payee is shown in the policy and physical damage coverage is excluded under the named driver exclusion endorsement, the loss payee may be sent a notice indicating that the policy contains a named driver exclusion.

**3. Endorsement**

Attach **PP1337 – Named Driver Exclusion Endorsement – Arkansas** to the policy.

**18. INCREASED LIMITS**

**A. Liability Increased Limits Tables**

**1. \$75,000 Single Limit Liability Increased Limits**

Single Limits	Factor
1,000,000	1.30

**2. \$25,000/50,000 Bodily Injury Increased Limits**

Split Limits	Factor
300/300	1.57
500/500	1.65
500/1,000	1.70

**3. \$25,000 Property Damage Liability Increased Limits**

P.D. Limit	Factor
\$250,000	1.17
500,000	1.22

**D. Medical Payments Increased Limits**

The following table contains the factors to be applied to the basic \$1,000 Medical Payments Coverage limit rate:

Limits	Factor
50,000	5.26
75,000	5.50
100,000	5.58

**19. MISCELLANEOUS TYPES**

**D. Snowmobiles and All-Terrain Vehicles**

(Class Code – 959000) (Including Passenger Hazard)

A snowmobile is a motor vehicle designed for use principally on snow or ice, using wheels or crawler-type treads or belts for locomotion across land, ice or snow.

This does not include a vehicle using airplane type propellers or fans.

An all-terrain vehicle is a four or six wheel motor vehicle equipped with balloon tires or crawler treads, designed for use on rugged terrain or rugged terrain and water.

**Attach Endorsement – PP0320 – Snowmobile Endorsement**

**LIABILITY, MEDICAL PAYMENTS AND UNINSURED MOTORISTS**

- 1. Liability** – Charge 50% of private passenger base rates.
- 2. Passenger Hazard Exclusion** – This Passenger Hazard Exclusion is NOT applicable in Arkansas.
- 3. Medical Payments** - \$500 limit only – Charge 200% of private passenger base rate.
- 4. Uninsured Motorists** – Charge the private passenger rate.

**19. MISCELLANEOUS TYPES (Cont'd.)**

**PHYSICAL DAMAGE**

Coverage	Deductible	Rate per \$100
Comprehensive	\$100	\$2.00
	200	1.60
Collision	200	1.76
	300	1.60

**E. Dune Buggies**

A dune buggy is a motor vehicle of the private passenger type designed or modified for use principally off public roads.

**Attach Endorsement – PP0323 – Miscellaneous Type Vehicle**

**1. Registered Dune Buggies**

Classify and rate as private passenger autos.

**2. Non-registered Dune Buggies**

Class Code – 943200 (Including Passenger Hazard)

**LIABILITY, MEDICAL PAYMENTS AND UNINSURED MOTORISTS**

- a. **Liability** – Charge 90% of private passenger base rates.
- b. **Passenger Hazard Exclusion** – The Passenger Hazard Exclusion is NOT applicable in Arkansas.
- c. **Medical Payments** – Charge private passenger rates.
- d. **Uninsured Motorists** – Charge private passenger rates.

**PHYSICAL DAMAGE**

Coverage	Deductible	Rate per \$100
Comprehensive	\$100	\$2.10
	200	1.70
Collision	200	6.30
	300	5.10

**F. Golf Carts**

(Class Code 943500)

A golf cart is a three or four wheel motor vehicle with limited speed capabilities designed to carry golfers and their equipment around a golf course.

**Attach Endorsement – PP0323 – Miscellaneous Type Vehicle**

**LIABILITY**

Charge 25% of Private Passenger base rate.

**PHYSICAL DAMAGE**

Coverage	Deductible	Rate per \$100
Comprehensive	\$100	\$0.70
	200	0.56
Collision	200	0.86
	300	0.76

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
 First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: EFT \$100  
 Company Tracking Number: AR-PA-2009-03  
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
 Product Name: Personal Auto  
 Project Name/Number: /

## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status</b>
			<b>Date:</b>
<b>Satisfied - Item:</b>	A-1 Private Passenger Auto Abstract	Filed	08/27/2009

**Comments:**  
**Attachment:**  
 rff\_PCA-1.pdf

		<b>Item Status:</b>	<b>Status</b>
			<b>Date:</b>
<b>Satisfied - Item:</b>	APCS-Auto Premium Comparison Survey	Filed	08/27/2009

**Comments:**  
**Attachments:**  
 PPA\_Survey\_FORM\_APCS\_EMCASCO.xls  
 PPA\_Survey\_FORM\_APCS\_EMCC.xls

		<b>Item Status:</b>	<b>Status</b>
			<b>Date:</b>
<b>Satisfied - Item:</b>	NAIC loss cost data entry document	Filed	08/27/2009

**Comments:**  
**Attachments:**  
 rff\_Rate Filing Abstract\_RF1-1 \_EMCASCO\_.pdf  
 rff\_Rate Filing Abstract\_RF1-1 \_EMCC\_.pdf

		<b>Item Status:</b>	<b>Status</b>
			<b>Date:</b>
<b>Bypassed - Item:</b>	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	08/27/2009

**Bypass Reason:** n/a  
**Comments:**

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: EFT \$100  
Company Tracking Number: AR-PA-2009-03  
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto  
Project Name/Number: /

	<b>Item Status:</b>	<b>Status</b>
<b>Satisfied - Item:</b> Exhibits	Filed	<b>Date:</b> 08/27/2009

**Comments:**

**Attachments:**

act\_CY Experience.pdf  
act\_exhibits.pdf  
act\_rel and base rate chgs.pdf  
act\_Summ of Chg.pdf

ARKANSAS INSURANCE DEPARTMENT

FORM A-1 PRIVATE PASSENGER AUTOMOBILE ABSTRACT

Instructions: All questions must be answered. If the answer is "none" or "Not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name Employers Mutual Casualty Company  
 NAIC # (including group #) 21415 (063)

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance?  Yes  No

If yes, list the areas: \_\_\_\_\_

2. Do you furnish a market for young drivers?  Yes  No

3. Do you require collateral business to support a youthful driver?  Yes  No

4. Do you insure drivers with an international or foreign driver's license?  Yes  No

5. Specify the percentage you allow in credit or discounts for the following:

a. Driver over 55	10 %
b. Good Student Discount	10 %
c. Multi-car Discount	5-25 %
d. Accident Free Discount*	10 %

Please Specify Qualification for Discount:

New discount with this filing - see enclosed accident free discount rule with this filing.

e. Anti-Theft Discount 5-15 %

f. Other (specify)	10 %
Drivers Training	10
Safety Equipment	5-30
Motor Vehicle acc prev course	10
Combination with HO (Revised)	20
College graduate scholastic aschivement	5
Ins Scoring from .55 to 1.00	
Customer Plus Discount (New)	15 %

6. Do you have an installment payment plan for automobile insurance?  Yes  No  
 If so, what is the fee for installment payments? 3.00

7. Does your company utilize a tiered rating plan?  Yes  No  
 If so, list the programs and percentage difference and current volume for each plan:

Program	Percentage Difference	Volume
_____	_____	_____

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

  
 \_\_\_\_\_  
 Signature  
 Jo L. Byers  
 \_\_\_\_\_  
 Printed Name

Filings Analyst

---

Title

800-247-2128 ext 2707

---

Telephone Number

jo.l.byers@emcins.com

---

Email Address

ARKANSAS INSURANCE DEPARTMENT

FORM A-1 PRIVATE PASSENGER AUTOMOBILE ABSTRACT

Instructions: All questions must be answered. If the answer is "none" or "Not applicable", so state. If all questions are not answered, the filing will not be accepted for review by the Department. Use a separate abstract for each company if filing for a group. Subsequent private passenger auto rate/rule submissions that do not alter the information contained herein need not include this form.

Company Name EMCASCO Insurance Company  
 NAIC # (including group #) 21407 (063)

1. Are there any areas in the State of Arkansas in which your company will not write automobile insurance?  Yes  No  
 If yes, list the areas: \_\_\_\_\_

2. Do you furnish a market for young drivers?  Yes  No

3. Do you require collateral business to support a youthful driver?  Yes  No

4. Do you insure drivers with an international or foreign driver's license?  Yes  No

5. Specify the percentage you allow in credit or discounts for the following:

a. Driver over 55	<u>10</u> %
b. Good Student Discount	<u>10</u> %
c. Multi-car Discount	<u>5-25</u> %
d. Accident Free Discount*	<u>10</u> %

Please Specify Qualification for Discount:

New discount with this filing - see enclosed accident free discount rule with this filing.

e. Anti-Theft Discount	<u>5-15</u> %
f. Other (specify)	
Drivers Training	10 %
Safety Equipment	5-30
Motor Vehicle acc prev course	10
Combination with HO (Revised)	20
College graduate scholastic aschivement	5
Ins Scoring from .55 to 1.00	
<u>Customer Plus Discount (New)</u>	<u>15</u> %

6. Do you have an installment payment plan for automobile insurance?  Yes  No  
 If so, what is the fee for installment payments? 3.00

7. Does your company utilize a tiered rating plan?  Yes  No  
 If so, list the programs and percentage difference and current volume for each plan:

Program	Percentage Difference	Volume
_____	_____	_____

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

  
 \_\_\_\_\_  
 Signature  
 Jo L. Byers  
 \_\_\_\_\_  
 Printed Name

Filings Analyst

---

Title

800-247-2128 ext. 2707

---

Telephone Number

jo.l.byers@emcins.com

---

Email Address

## Private Passenger Auto Premium Comparison Survey Form

*FORM APCS - last modified August 2005*

**NAIC Number:** 21407  
**Company Name:** EMCASCO Insurance Company  
**Contact Person:** Jo L. Byers  
**Telephone No.:** 800-247-2128 ext. 2707  
**Email Address:** jo.l.byers@emcins.com  
**Effective Date:** 10/15/2009

**DISCOUNTS OFFERED:**  
 PASSIVE RESTRAINT/AIRBAG 20-30 %  
 AUTO/HOMEOWNERS 20 %  
 GOOD STUDENT 10 %  
 ANTI-THEFT DEVICE 5-15 %  
 Over 55 Defensive Driver Discount 10 %  
 \$250/\$500 Deductible Comp./Coll. N/A %

**Assumptions to Use:**

- 1 **Liability** -Minimum \$25,000 per person
- 2 **Bodily Injury** \$50,000 per accident  
\$25,000 per accident
- 3 **Property Damage** \$100 deductible per accident
- 4 **Comprehensive & Collision** \$250 deductible per accident
- 5 **The insured has elected to accept:**  
 Uninsured motorist property and bodily injury equal to liability coverage  
 Underinsured bodily injury equal to liability coverage
- 6 **Personal Injury Protection** of \$5,000 for medical, loss wages according to statute and \$5,000 accidental death
- 7 **If male and female rates are different, use the highest of the two**

**Submit to:** Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
**Telephone:** 501-371-2800  
 Email as an attachment to [insurance.pnc@arkansas.gov](mailto:insurance.pnc@arkansas.gov)  
 You may also attach to a SERFF filing or submit on a compact disk

Vehicle	Coverages	Gender	Age	Fayetteville				Trumann				Little Rock				Lake Village				Pine Bluff			
				Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66
				1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Minimum Liability			\$928	\$1,159	\$361	\$338	\$921	\$1,149	\$357	\$337	\$1,037	\$1,291	\$413	\$390	\$905	\$1,131	\$353	\$332
	Minimum Liability with Comprehensive and Collision			\$1,715	\$2,156	\$629	\$588	\$1,764	\$2,219	\$645	\$604	\$1,796	\$2,252	\$671	\$630	\$1,810	\$2,278	\$662	\$618	\$1,859	\$2,333	\$695	\$651
	100/300/50 Liability with Comprehensive and Collision			\$1,910	\$2,387	\$734	\$690	\$1,971	\$2,466	\$755	\$710	\$2,023	\$2,521	\$800	\$755	\$2,016	\$2,523	\$770	\$723	\$2,102	\$2,620	\$827	\$779
2003 Ford Explorer "XLT" 2WD, 4 door	Minimum Liability			\$928	\$1,030	\$361	\$338	\$921	\$1,022	\$357	\$337	\$1,037	\$1,147	\$413	\$390	\$905	\$1,006	\$353	\$332	\$932	\$1,029	\$378	\$357
	Minimum Liability with Comprehensive and Collision			\$2,149	\$2,708	\$798	\$726	\$2,229	\$2,808	\$825	\$752	\$2,212	\$2,781	\$833	\$762	\$2,309	\$2,912	\$856	\$778	\$2,366	\$2,975	\$891	\$812
	100/300/50 Liability with Comprehensive and Collision			\$2,345	\$2,939	\$903	\$829	\$2,436	\$3,056	\$935	\$858	\$2,440	\$3,050	\$962	\$887	\$2,516	\$3,157	\$965	\$882	\$2,608	\$3,263	\$1,023	\$940
2003 Honda Odyssey "EX"	Minimum Liability			\$928	\$1,159	\$361	\$338	\$921	\$1,149	\$357	\$337	\$1,037	\$1,291	\$413	\$390	\$905	\$1,131	\$353	\$332	\$932	\$1,157	\$378	\$357
	Minimum Liability with Comprehensive and Collision			\$2,068	\$2,606	\$751	\$700	\$2,142	\$2,698	\$774	\$724	\$2,137	\$2,686	\$788	\$738	\$2,218	\$2,795	\$801	\$748	\$2,272	\$2,856	\$835	\$782
	100/300/50 Liability with Comprehensive and Collision			\$2,264	\$2,837	\$855	\$803	\$2,349	\$2,946	\$884	\$830	\$2,364	\$2,955	\$917	\$863	\$2,424	\$3,040	\$910	\$852	\$2,514	\$3,143	\$968	\$910
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liability			\$928	\$1,159	\$361	\$338	\$921	\$1,149	\$357	\$337	\$1,037	\$1,291	\$413	\$390	\$905	\$1,131	\$353	\$332	\$932	\$1,157	\$378	\$357
	Minimum Liability with Comprehensive and Collision			\$2,485	\$3,134	\$893	\$833	\$2,587	\$3,263	\$927	\$865	\$2,534	\$3,189	\$924	\$864	\$2,696	\$3,401	\$964	\$899	\$2,761	\$3,476	\$1,002	\$937
	100/300/50 Liability with Comprehensive and Collision			\$2,680	\$3,365	\$997	\$935	\$2,794	\$3,510	\$1,037	\$971	\$2,761	\$3,458	\$1,053	\$989	\$2,902	\$3,646	\$1,073	\$1,004	\$3,003	\$3,763	\$1,134	\$1,065
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liability			\$928	\$1,159	\$361	\$338	\$921	\$1,149	\$357	\$337	\$1,037	\$1,291	\$413	\$390	\$905	\$1,131	\$353	\$332	\$932	\$1,157	\$378	\$357
	Minimum Liability with Comprehensive and Collision			\$2,616	\$3,300	\$938	\$874	\$2,731	\$3,445	\$976	\$911	\$2,655	\$3,343	\$966	\$903	\$2,852	\$3,600	\$1,018	\$950	\$2,912	\$3,668	\$1,054	\$985
	100/300/50 Liability with Comprehensive and Collision			\$2,812	\$3,532	\$1,042	\$977	\$2,938	\$3,693	\$1,085	\$1,017	\$2,883	\$3,612	\$1,094	\$1,028	\$3,058	\$3,845	\$1,127	\$1,054	\$3,155	\$3,955	\$1,186	\$1,112
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liability			\$928	\$1,159	\$361	\$338	\$921	\$1,149	\$357	\$337	\$1,037	\$1,291	\$413	\$390	\$905	\$1,131	\$353	\$332	\$932	\$1,157	\$378	\$357
	Minimum Liability with Comprehensive and Collision			\$1,884	\$2,372	\$708	\$642	\$1,947	\$2,451	\$731	\$662	\$1,956	\$2,456	\$747	\$681	\$2,005	\$2,525	\$753	\$680	\$2,054	\$2,580	\$787	\$713
	100/300/50 Liability with Comprehensive and Collision			\$2,079	\$2,603	\$813	\$744	\$2,154	\$2,698	\$841	\$769	\$2,183	\$2,725	\$876	\$806	\$2,211	\$2,770	\$862	\$785	\$2,296	\$2,867	\$919	\$841

## Private Passenger Auto Premium Comparison Survey Form

*FORM APCS - last modified August 2005*

**NAIC Number:** 21415  
**Company Name:** Employers Mutual Casualty Company  
**Contact Person:** Jo L. Byers  
**Telephone No.:** 800-247-2128 ext. 2707  
**Email Address:** jo.l.byers@emcins.com  
**Effective Date:** 10/15/2009

**DISCOUNTS OFFERED:**  
 PASSIVE RESTRAINT/AIRBAG 20-30 %  
 AUTO/HOMEOWNERS 20 %  
 GOOD STUDENT 10 %  
 ANTI-THEFT DEVICE 5-15 %  
 Over 55 Defensive Driver Discount 10 %  
 \$250/\$500 Deductible Comp./Coll. N/A %

**Assumptions to Use:**

- 1 **Liability** -Minimum \$25,000 per person
- 2 **Bodily Injury** \$50,000 per accident  
\$25,000 per accident
- 3 **Property Damage** \$100 deductible per accident
- 4 **Comprehensive & Collision** \$250 deductible per accident
- 5 **The insured has elected to accept:**  
 Uninsured motorist property and bodily injury equal to liability coverage  
 Underinsured bodily injury equal to liability coverage
- 6 **Personal Injury Protection** of \$5,000 for medical, loss wages according to statute and \$5,000 accidental death
- 7 **If male and female rates are different, use the highest of the two**

**Submit to:** Arkansas Insurance Department  
 1200 West Third Street  
 Little Rock, AR 72201-1904  
**Telephone:** 501-371-2800  
 Email as an attachment to [insurance.pnc@arkansas.gov](mailto:insurance.pnc@arkansas.gov)  
 You may also attach to a SERFF filing or submit on a compact disk

Vehicle	Coverages	Gender	Fayetteville				Trumann				Little Rock				Lake Village				Pine Bluff			
			Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66	Female 18	Male 18	Male or Female 40	Male or Female 66
			Age																			
1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Minimum Liability		\$1,189	\$1,490	\$449	\$421	\$1,179	\$1,479	\$446	\$419	\$1,324	\$1,656	\$512	\$482	\$1,159	\$1,454	\$439	\$412	\$1,187	\$1,482	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$2,211	\$2,786	\$798	\$745	\$2,274	\$2,869	\$821	\$767	\$2,309	\$2,905	\$849	\$794	\$2,335	\$2,944	\$841	\$786	\$2,390	\$3,009	\$876	\$819
	100/300/50 Liability with Comprehensive and Collision		\$2,448	\$3,072	\$918	\$861	\$2,527	\$3,174	\$946	\$887	\$2,583	\$3,232	\$992	\$832	\$2,582	\$3,242	\$964	\$904	\$2,681	\$3,356	\$1,025	\$963
2003 Ford Explorer "XLT" 2WD, 4 door	Minimum Liability		\$1,189	\$1,325	\$449	\$421	\$1,179	\$1,314	\$446	\$419	\$1,324	\$1,472	\$512	\$482	\$1,159	\$1,292	\$439	\$412	\$1,187	\$1,318	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$2,776	\$3,503	\$1,016	\$924	\$2,880	\$3,636	\$1,056	\$959	\$2,852	\$3,594	\$1,059	\$966	\$2,984	\$3,767	\$1,093	\$991	\$3,051	\$3,846	\$1,133	\$1,029
	100/300/50 Liability with Comprehensive and Collision		\$3,012	\$3,788	\$1,136	\$1,040	\$3,133	\$3,941	\$1,181	\$1,078	\$3,126	\$3,920	\$1,202	\$1,104	\$3,232	\$4,065	\$1,216	\$1,109	\$3,342	\$4,193	\$1,283	\$1,173
2003 Honda Odyssey "EX"	Minimum Liability		\$1,189	\$1,490	\$449	\$421	\$1,179	\$1,479	\$446	\$419	\$1,324	\$1,656	\$512	\$482	\$1,159	\$1,454	\$439	\$412	\$1,187	\$1,482	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$2,669	\$3,367	\$955	\$890	\$2,769	\$3,496	\$990	\$924	\$2,751	\$3,467	\$1,000	\$934	\$2,862	\$3,614	\$1,022	\$952	\$2,929	\$3,691	\$1,060	\$991
	100/300/50 Liability with Comprehensive and Collision		\$2,905	\$3,652	\$1,075	\$1,006	\$3,022	\$3,801	\$1,115	\$1,044	\$3,025	\$3,794	\$1,143	\$1,073	\$3,110	\$3,911	\$1,145	\$1,070	\$3,219	\$4,038	\$1,210	\$1,135
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liability		\$1,189	\$1,490	\$449	\$421	\$1,179	\$1,479	\$446	\$419	\$1,324	\$1,656	\$512	\$482	\$1,159	\$1,454	\$439	\$412	\$1,187	\$1,482	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$3,209	\$4,053	\$1,139	\$1,062	\$3,349	\$4,231	\$1,188	\$1,108	\$3,268	\$4,122	\$1,176	\$1,099	\$3,486	\$4,404	\$1,234	\$1,150	\$3,562	\$4,494	\$1,276	\$1,191
	100/300/50 Liability with Comprehensive and Collision		\$3,445	\$4,338	\$1,259	\$1,178	\$3,602	\$4,536	\$1,313	\$1,228	\$3,542	\$4,449	\$1,319	\$1,238	\$3,733	\$4,702	\$1,357	\$1,268	\$3,853	\$4,841	\$1,426	\$1,335
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liability		\$1,189	\$1,490	\$449	\$421	\$1,179	\$1,479	\$446	\$419	\$1,324	\$1,656	\$512	\$482	\$1,159	\$1,454	\$439	\$412	\$1,187	\$1,482	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$3,383	\$4,273	\$1,199	\$1,117	\$3,535	\$4,467	\$1,251	\$1,166	\$3,427	\$4,324	\$1,230	\$1,148	\$3,689	\$4,662	\$1,303	\$1,214	\$3,759	\$4,744	\$1,343	\$1,254
	100/300/50 Liability with Comprehensive and Collision		\$3,620	\$4,559	\$1,319	\$1,233	\$3,788	\$4,772	\$1,376	\$1,286	\$3,701	\$4,650	\$1,373	\$1,287	\$3,937	\$4,960	\$1,427	\$1,332	\$4,050	\$5,091	\$1,492	\$1,398
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liability		\$1,189	\$1,490	\$449	\$421	\$1,179	\$1,479	\$446	\$419	\$1,324	\$1,656	\$512	\$482	\$1,159	\$1,454	\$439	\$412	\$1,187	\$1,482	\$465	\$438
	Minimum Liability with Comprehensive and Collision		\$2,431	\$3,065	\$901	\$815	\$2,511	\$3,168	\$932	\$842	\$2,518	\$3,170	\$946	\$860	\$2,591	\$3,270	\$960	\$866	\$2,642	\$3,328	\$995	\$900
	100/300/50 Liability with Comprehensive and Collision		\$2,668	\$3,351	\$1,021	\$932	\$2,764	\$4,473	\$1,057	\$961	\$2,792	\$3,497	\$1,089	\$999	\$2,839	\$3,568	\$1,084	\$984	\$2,933	\$3,676	\$1,145	\$1,044

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

<b>1.</b>	This filing transmittal is part of Company Tracking #	AR-PA-2009-03
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<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	
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Company Name		Company NAIC Number	
<b>3.</b>	<b>A.</b> EMCASCO Insurance Company	<b>B.</b>	062-21407

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Business (i.e., Sub-type of Insurance)	
<b>4.</b>	<b>A.</b>	<b>B.</b>	

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	FOR LOSS COSTS ONLY			
				(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
PPA Liability	-4.9%	0.3 %					
PPA Medical	0.4%	5.0%					
PPA Comprehensive	1.2%	0.0%					
PPA Collision	3.1%	3.5%					
PPA Uninsured Motorists	N/A	-6.6%					
PPA Underinsured Motorists	N/A	-13.3%					
<b>TOTAL OVERALL EFFECT</b>	-1.2%	-0.2%					

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
2004	611	-0.7%	3/1/2004	894	641	71.7%	58.0%
2005	464	-9.0%	9/1/2005	692	280	40.5%	60.2%
2006	409	-2.5%	11/1/2006	507	122	24.2%	55.7%
2007	407	-2.2%	3/15/2008	465	176	37.9%	53.3%
2008	450	-4.7%	12/15/2008	467	301	64.5%	57.0%

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	23.8%
B. General Expense	6.0%
C. Taxes, Licenses & Fees	2.6% (Liab) 3.1% (PD)
D. Underwriting Profit & Contingencies	2.3% (Liab) 4.5% (PD)
E. Other (explain)	0.0%
F. TOTAL	34.7% (Liab) 37.4% (PD)

8. N/A Apply Loss Cost Factors to Future filings? (Y or N)
9. -18.7 Estimated Maximum Rate Increase for any Insured (%) Territory (if applicable):
10. +18.4 Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable):
- \_\_\_\_\_

\_\_\_\_\_

We do not have the ability to re-rate each policy, but if we had an insured who received all the max inc (or max dec) for all changes, this is the chg they would receive.

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

<b>1.</b>	This filing transmittal is part of Company Tracking #	AR-PA-2009-03
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<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	
-----------	--	--

Company Name		Company NAIC Number	
<b>3.</b>	<b>A.</b> Employers Mutual Casualty Company	<b>B.</b>	062-21415

Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Business (i.e., Sub-type of Insurance)	
<b>4.</b>	<b>A.</b>	<b>B.</b>	

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	FOR LOSS COSTS ONLY			
				(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
PPA Liability	-4.9%	0.6 %					
PPA Medical	0.4%	5.3%					
PPA Comprehensive	1.2%	0.0%					
PPA Collision	3.1%	3.5%					
PPA Uninsured Motorists	N/A	-6.5%					
PPA Underinsured Motorists	N/A	-13.3%					
<b>TOTAL OVERALL EFFECT</b>	-1.2%	0.3%					

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
2004	82	0.2%	3/1/2004	131	87	66.6%	66.6%
2005	57	-8.0%	9/1/2005	96	0	0.3%	53.4%
2006	40	-0.8%	11/1/2006	56	17	30.1%	53.6%
2007	32	-4.4%	3/15/2008	48	9	18.6%	46.3%
2008	31	-5.1%	12/15/2008	40	16	39.9%	48.7%

7.	
Expense Constants	Selected Provisions
A. Total Production Expense	23.8%
B. General Expense	6.0%
C. Taxes, Licenses & Fees	2.6% (Liab) 3.1% (PD)
D. Underwriting Profit & Contingencies	2.3% (Liab) 4.5% (PD)
E. Other (explain)	0.0%
F. TOTAL	34.7% (Liab) 37.4% (PD)

8. N/A Apply Loss Cost Factors to Future filings? (Y or N)  
9. -18.7 Estimated Maximum Rate Increase for any Insured (%) Territory (if applicable):  
10. +18.4 Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable):
- 

We do not have the ability to re-rate each policy, but if we had an insured who received all the max inc (or max dec) for all changes, this is the chg they would receive.

**ARKANSAS  
PERSONAL AUTO**

**EMC INSURANCE COMPANIES**

**CALENDAR YEAR ACTUAL EXPERIENCE**

**EMPLOYERS MUTUAL CASUALTY COMPANY**

YEAR	WRITTEN PREMIUM	EARNED PREMIUM	INCURRED LOSSES	I/E LOSS RATIO
2005	85,665	95,711	315	0.3%
2006	52,502	56,432	17,007	30.1%
2007	45,414	48,075	8,926	18.6%
2008	38,942	39,855	15,896	39.9%
2009 *	15,130	9,653	8,434	87.4%
<b>TOTAL</b>	<b>237,653</b>	<b>249,726</b>	<b>50,578</b>	<b>20.3%</b>

**EMCASCO INSURANCE COMPANY**

YEAR	WRITTEN PREMIUM	EARNED PREMIUM	INCURRED LOSSES	I/E LOSS RATIO
2005	632,650	691,806	280,141	40.5%
2006	487,639	506,845	122,452	24.2%
2007	465,678	464,700	175,910	37.9%
2008	476,682	467,314	301,495	64.5%
2009 *	146,030	129,632	82,269	63.5%
<b>TOTAL</b>	<b>2,208,679</b>	<b>2,260,297</b>	<b>962,267</b>	<b>42.6%</b>

**ALL COMPANIES COMBINED**

YEAR	WRITTEN PREMIUM	EARNED PREMIUM	INCURRED LOSSES	I/E LOSS RATIO
2005	718,315	787,517	280,456	35.6%
2006	540,141	563,277	139,459	24.8%
2007	511,092	512,775	184,836	36.0%
2008	515,624	507,169	317,391	62.6%
2009 *	161,160	139,285	90,703	65.1%
<b>TOTAL</b>	<b>2,446,332</b>	<b>2,510,023</b>	<b>1,012,845</b>	<b>40.4%</b>

\* 3 months

**EMC INSURANCE COMPANIES**  
**2008**  
**INVESTMENT INCOME ANALYSIS**

<b>Cash &amp; Invested Assets</b>	(1) <b>Mean Invested Assets</b>	(2) <b>Investment Income</b>	(3) <b>Investment Yield</b>	(4) <b>Effective Tax Rate</b>	(5) <b>Net Yield After Taxes</b>
<b>Bonds</b>					
<i>Taxable</i>	\$1,239,459,656	\$71,697,032	5.8%	35.0%	3.8%
<i>Tax-exempt</i>	570,511,023	29,302,873	5.1%	4.7%	4.9%
<i>Bonds Total</i>	1,809,970,679	100,999,905	5.6%		
<b>Stocks</b>					
<i>Preferred</i>	44,893,315	4,025,151	9.0%	14.2%	7.7%
<i>Common</i>	500,332,766	8,737,095	1.7%	14.2%	1.5%
<i>Stocks Total</i>	545,226,081	12,762,246	2.3%		
<b>Short-Term Investments</b>	170,331,006	6,639,425	3.9%	35.0%	2.5%
<b>Other Invested Assets</b>	72,484,334	11,571,591	16.0%	35.0%	10.4%
<b>Investment Expenses</b>		(15,658,689)		35.0%	
<b>Totals</b>	\$2,598,012,099	\$116,314,478	4.5%	25.1%	3.4%
<b>Realized Capital Gain or Loss</b>			0.3%	35.0%	0.2%

Notes to above:

**Assets**

- (1) - Taxable Bonds = Amortized value of bonds from Governments,  
Public Utilities & Industrial and Miscellaneous and Credit Tenant Loans  
(Schedule D, Column 1, Lines 4, 20, & 24)
- (2) - Non-taxable Bonds = Total Bonds (Schedule D, Column 1, Line 26) - Taxable Bonds
- (3) - Preferred and Common Stocks = Fair Value  
(Schedule D, Column 2, Line 55)
- (4) - Short-term Investments - Page 2, Line 5

$Y_o = 3.6\%$   
 $Y_n = 4.06\%$   
 $Y_a = 3.7\%$

**Investment Income**

- (1) - Taxable Bonds - Page 12, Column 2, Lines 1 & 1.2
- (2) - Non-taxable Bonds - Page 12, Column 2, Lines 1.1 & 1.3
- (3) - Preferred Stocks - Page 12,, Column 2, Lines 2.1 & 2.11
- (4) - Common Stocks - Page 12, Column 2, Lines 2.2 & 2.21
- (5) - Short-term Investments - Page 12, Column 2, Line 6
- (6) - Investment Expense - Page 12, Line 16

**Realized Capital Gain or Loss**

- (1) - 10-Yr average of realized capital gain to mean invested assets, where realized capital gain is from Exhibit of Capital Gains (Losses) (Page 12), Columns 3 and unrealized capital gain is from Column 4

**ARKANSAS**  
**PERSONAL AUTO - Liability**  
**EMC INSURANCE COMPANIES**

ESTIMATED INVESTMENT EARNINGS ON UNEARNED PREMIUM AND LOSS RESERVES

<b>A. <u>UNEARNED PREMIUM RESERVE</u></b>	
1. Direct Earned Premium for Calendar Year Ended December 31, 2007	\$333,240
2. Countrywide Ratio of Mean Unearned Premium Reserve to Earned Premium	24.8%
3. Estimated Mean Unearned Premium Reserve for Arkansas (line A.1 × line A.2)	\$82,644
4. Percentage Total of Prepaid Expense	
a. Commission & Brokerage	0.0%
b. Taxes, Licenses & Fees	0.2%
c. 50% of Other Acquisition Cost	3.5%
d. 50% of General Expense	3.0%
e. 50% of Reinsurance Costs	0.0%
f. Total	6.7%
5. Federal Income Tax Payable on Unearned Reserve	7.0%
6. Dollar Total of Prepaid Expense & Federal Income Tax on Unearned Reserve [(line 3 × (line 4f + line 5))]	\$11,322
7. Subject to Investment (line 3 - line 6)	\$71,322
<b>B. <u>DELAYED REMISSION OF PREMIUMS</u></b>	
1. Mean Agents' Balances (Annual Statement, page 2, line 9)	\$282,884,824
2. Countrywide Earned Premium (Annual Statement, page 4, line 1)	\$1,146,229,241
3. Delayed Remission of Premium for Arkansas [(line B.1 + line B.2) × A.1]	\$82,310
<b>C. <u>EXPECTED LOSS &amp; LOSS ADJUSTMENT RESERVE</u></b>	
1. Direct Earned Premium (line A.1) × (Expected Loss & Loss Adjustment Ratio)	\$333,240 0.878
2. Expected Incurred Loss & Loss Adjustment × (Countrywide Reserve to Incurred Ratio, Adjusted for Federal Income Tax Payable on Loss & LAE Reserves)	\$292,585 1.732
3. Adjusted Expected Loss & Loss Adjustment Reserve for Arkansas	\$506,757
<b>D. <u>NET SUBJECT TO INVESTMENT</u></b> (line A.7 - line B.3 + line C.3)	<b>\$495,769</b>
<b>E. <u>AVERAGE RATE OF RETURN ON INVESTED ASSETS (AFTER TAX)</u></b>	<b>3.8%</b>
<b>F. <u>INVESTMENT EARNINGS ON NET SUBJECT TO INVESTMENT</u></b>	<b>\$18,839</b>
<b>G. <u>RATIO OF INVESTMENT EARNINGS TO EARNED PREMIUM</u></b> (line F ÷ line A.1)	<b>5.7%</b>

**ARKANSAS**  
**PERSONAL AUTO - Physical Damage**  
**EMC INSURANCE COMPANIES**

ESTIMATED INVESTMENT EARNINGS ON UNEARNED PREMIUM AND LOSS RESERVES

<b>A. <u>UNEARNED PREMIUM RESERVE</u></b>	
1. Direct Earned Premium for Calendar Year Ended December 31, 2007	\$227,625
2. Countrywide Ratio of Mean Unearned Premium Reserve to Earned Premium	24.8%
3. Estimated Mean Unearned Premium Reserve for Arkansas (line A.1 x line A.2)	\$56,451
4. Percentage Total of Prepaid Expense	
a. Commission & Brokerage	0.0%
b. Taxes, Licenses & Fees	0.2%
c. 50% of Other Acquisition Cost	3.5%
d. 50% of General Expense	3.0%
e. 50% of Reinsurance Costs	0.0%
f. Total	6.7%
5. Federal Income Tax Payable on Unearned Reserve	7.0%
6. Dollar Total of Prepaid Expense & Federal Income Tax on Unearned Reserve [(line 3 x (line 4f + line 5))]	\$7,734
7. Subject to Investment (line 3 - line 6)	\$48,717
<b>B. <u>DELAYED REMISSION OF PREMIUMS</u></b>	
1. Mean Agents' Balances (Annual Statement, page 2, line 9)	\$282,884,824
2. Countrywide Earned Premium (Annual Statement, page 4, line 1)	\$1,146,229,241
3. Delayed Remission of Premium for Arkansas ((line B.1 + line B.2) x A.1)	\$56,223
<b>C. <u>EXPECTED LOSS &amp; LOSS ADJUSTMENT RESERVE</u></b>	
1. Direct Earned Premium (line A.1) x (Expected Loss & Loss Adjustment Ratio)	\$227,625 0.829
2. Expected Incurred Loss & Loss Adjustment x (Countrywide Reserve to Incurred Ratio, Adjusted for Federal Income Tax Payable on Loss & LAE Reserves)	\$188,701 0.137
3. Adjusted Expected Loss & Loss Adjustment Reserve for Arkansas	\$25,852
<b>D. <u>NET SUBJECT TO INVESTMENT</u></b> (line A.7 - line B.3 + line C.3)	\$18,346
<b>E. <u>AVERAGE RATE OF RETURN ON INVESTED ASSETS (AFTER TAX)</u></b>	3.8%
<b>F. <u>INVESTMENT EARNINGS ON NET SUBJECT TO INVESTMENT</u></b>	\$697
<b>G. <u>RATIO OF INVESTMENT EARNINGS TO EARNED PREMIUM</u></b> (line F + line A.1)	0.3%

**ARKANSAS  
PERSONAL AUTO**

**EMC INSURANCE COMPANIES**

**DEVELOPMENT OF PERMISSIBLE LOSS & LOSS ADJUSTMENT EXPENSE RATIO**

**Liability Profit Loading**

We believe a 12.5% return on equity after federal income taxes is reasonable. We have assigned statutory surplus to line of business on the basis of premium plus loss and loss adjustment expense reserves. The resulting premium to statutory surplus ratios by line of business are then adjusted to achieve an overall all-lines premium to statutory surplus ratio of approximately 2 to 1. With this methodology, the selected premium to statutory surplus ratio for this line is 2.00, which translates into a 1.739 premium to equity (GAAP) ratio. The 5.7% investment income on premium is a 9.9% return on equity after federal taxes. Based on an average after tax investment yield we earn an additional 3.8% return on equity. The difference of -0.012 (0.125-0.099-0.038) is the necessary after tax return on equity required from underwriting. The federal tax rate on underwriting profit is 35%, resulting in an underwriting profit loading of -0.010 [(-0.012/1.739)/0.65]. Shown below is the development of the permissible loss and loss adjustment expense ratio.

**Physical Damage Profit Loading**

The selected premium to statutory surplus ratio for physical damage is 3.50, which translates into a 3.043 GAAP ratio. Using the same approach described above and a 0.3% investment income on premium, the required underwriting profit loading for physical damage is 0.039.

<u>ITEM</u>	<u>Liability Selected Provision</u>	<u>Physical Damage Selected Provision</u>
Commision & Brokerage	0.0%	0.0%
Other Acquisition	7.0% *	7.0% *
General Expense	6.0% *	6.0% *
Premium Taxes	0.0%	0.0%
Reinsurance Costs	0.0%	0.0%
Misc. Taxes, Licenses & Fees	0.2% *	0.2% *
Dividends	0.0%	0.0%
Profit & Contingencies	<u>-1.0%</u>	<u>3.9%</u>
TOTAL	12.2%	17.1%
	100.0%	100.0%
	- <u>12.2%</u>	- <u>17.1%</u>
Permissible Loss & Loss Adjustment Expense Ratio	87.8%	82.9%

\* Based on study of I.E.E. for 2005-2007

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**RATE LEVEL INDICATIONS**

<b>Year</b>	<b>Coverage</b>	<b>(1) Earned Premium</b>	<b>(2) Current Level Earned Premium</b>	<b>(3) Projected Cur. Level Earned Premium</b>	<b>(4) Incurred Losses @3/31/2009</b>	<b>(5) Adjusted Incurred Losses</b>	<b>(6) Developed Incurred Losses</b>	<b>(7) Incurred Losses &amp; Loss Adj. Expense</b>	<b>(8) Projected Losses &amp; Loss Adj. Expense</b>	<b>(9) Projected Loss Ratio</b>	<b>(10) Permissible Loss Ratio</b>	<b>(11) Rate Level Indication</b>	<b>(12) Credibility- Weighted Indication</b>
2005	BI/PD Liability	292,822	289,942	289,942	150,791	150,791	148,003	182,043	182,043	0.628	0.653	-3.8%	
	Medical	24,798	29,577	29,577	18,042	18,042	17,447	21,460	21,460	0.726	0.653	11.2%	
	Liab Subtotal	317,620	319,519	319,519	168,833	168,833	165,450	203,503	203,503	0.637	0.653	-2.5%	
	Comprehensive	141,592	87,912	92,396	48,084	47,098		61,227	67,901	0.735	0.626	17.4%	
	Collision	262,456	156,332	181,032	86,732	86,732		112,752	125,042	0.691	0.626	10.4%	
	Phys D Subtotal	404,048	244,244	273,428	134,816	133,830		173,979	192,943	0.706	0.626	12.8%	
	Total	721,668	563,763	592,947	303,649	302,663		377,482	396,446	0.669		4.6%	
2006	BI/PD Liability	231,491	221,166	221,166	46,493	46,493	45,963	56,534	56,534	0.256	0.653	-60.8%	
	Medical	19,286	21,454	21,454	4,804	4,804	4,449	5,472	5,472	0.255	0.653	-60.9%	
	Liab Subtotal	250,777	242,620	242,620	51,297	51,297	50,412	62,006	62,006	0.256	0.653	-60.8%	
	Comprehensive	92,577	69,070	71,833	30,174	32,045		41,659	45,283	0.630	0.626	0.6%	
	Collision	167,522	125,262	140,794	49,673	49,673		64,575	70,193	0.499	0.626	-20.3%	
	Phys D Subtotal	260,099	194,332	212,627	79,847	81,718		106,234	115,476	0.543	0.626	-13.3%	
	Total	510,876	436,952	455,247	131,144	133,015		168,240	177,482	0.390		-38.6%	
2007	BI/PD Liability	235,403	203,258	203,258	95,678	95,678	93,634	115,169	115,169	0.567	0.653	-13.2%	
	Medical	19,656	19,162	19,162	11,350	11,350	9,727	11,964	11,964	0.624	0.653	-4.4%	
	Liab Subtotal	255,059	222,420	222,420	107,028	107,028	103,361	127,133	127,133	0.572	0.653	-12.4%	
	Comprehensive	71,448	63,035	64,926	29,055	30,856		40,113	42,760	0.659	0.626	5.3%	
	Collision	134,191	121,991	133,092	55,336	55,336		71,937	76,685	0.576	0.626	-8.0%	
	Phys D Subtotal	205,639	185,026	198,018	84,391	86,192		112,050	119,445	0.603	0.626	-3.7%	
	Total	460,698	407,446	420,438	191,419	193,220		239,183	246,578	0.586		-8.3%	

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

RATE LEVEL INDICATIONS

Year	(1) Coverage	(2) Current Level	(3) Projected Cur. Level	(4) Incurred Losses @3/31/2009	(5) Adjusted Incurred Losses	(6) Developed Incurred Losses	(7) Incurred Losses & Loss Adj. Expense	(8) Projected Losses & Loss Adj. Expense	(9) Projected Loss Ratio	(10) Permissible Loss Ratio	(11) Rate Level Indication	(12) Credibility-Weighted Indication
2008	BI/PD Liability	222,109	198,991	73,286	73,286	71,231	87,614	87,614	0.440	0.653	-32.6%	
	Medical	18,839	18,628	25,551	25,551	17,937	22,063	22,063	1.184	0.653	81.3%	
	Liab Subtotal	240,948	217,619	98,837	98,837	89,168	109,677	109,677	0.504	0.653	-22.8%	
	Comprehensive	70,245	66,359	93,487	23,792		30,930	32,322	0.487	0.626	-22.2%	
	Collision	140,235	138,999	130,521	130,521		169,677	177,312	1.276	0.626	103.8%	
	Phys D Subtotal	210,480	205,358	224,008	154,313		200,607	209,634	1.021	0.626	63.1%	
	Total	451,428	422,977	322,845	253,150		310,284	319,311	0.755		18.9%	
2005-2008	BI/PD Liability	981,825	913,357	366,248	366,248	358,831	441,360	441,360	0.483	0.653	-26.0%	-4.9%
	Medical	82,579	88,821	59,747	59,747	49,560	60,959	60,959	0.686	0.653	5.1%	0.4%
	Liab Subtotal	1,064,404	1,002,178	425,995	425,995	408,391	502,319	502,319	0.501	0.653	-23.3%	-4.4%
	Comprehensive	375,862	295,514	200,800	133,791		173,929	188,266	0.637	0.626	1.8%	1.2%
	Collision	704,404	534,716	322,262	322,262		418,941	449,232	0.756	0.626	20.8%	3.1%
	Phys D Subtotal	1,080,266	889,431	523,062	456,053		592,870	637,498	0.717	0.626	14.5%	2.5%
	Total	2,144,670	1,891,609	949,057	882,048		1,095,189	1,139,817	0.603		-5.5%	-1.2%

**ARKANSAS  
PERSONAL AUTO**

**EMC INSURANCE COMPANIES**

**CREDIBILITY-WEIGHTED INDICATIONS**

Effective date of last rate change: 12/15/2008  
 Proposed effective date of this filing: 12/15/2009  
 Trend period: 9/15/2009 to 9/15/2010 = 1.000 years; Selected = 1.000 yr.

	<u>LIAB</u>	<u>Medical</u>	<u>COMP</u>	<u>COLL</u>
Paid claims for 2005 - 2008:	107	24	183	105
Formula Credibility: SQ RT(Paid Claims÷3000)	0.189	0.089	0.247	0.187
Permissible loss & LAE ratio:	0.653	0.653	0.626	0.626
Annual Trend:	0.0%	0.0%	1.0%	-1.0%
Trended permissible loss & LAE ratio: eg. Liability: $[0.653 \times (1.000)^{1.000}]$	0.653	0.653	0.632	0.620
Projected Loss Ratio	0.483	0.686	0.637	0.756
Credibility-weighted indication: eg. Liability: $[0.483(0.189) + 0.653(1-0.189)] \div 0.653 - 1$	-4.9%	0.4%	1.2%	3.1%
Liability Subtotal:	-4.4%			
Physical Damage Subtotal:			2.5%	
<b>Combined Coverage Total:</b>	<b>-1.2%</b>			

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**RATE LEVEL INDICATIONS EXPLANATORY NOTES**

**COLUMN (1): Direct Earned Premium for Arkansas.**

**COLUMN (2): Current Level Earned Premium for Arkansas.**

**COLUMN (3): Projected Current Level Earned Premium**

The physical damage premiums were further adjusted to include annual average rate trends for comprehensive and collision. These selected trends recognize the effect of model year symbol rating as our distribution shifts to newer model year cars and higher symbols. The trend projects premium from the midpoint of the year to the average date of writing (6 months past the anticipated effective date.)

Average Date of Writing: 6/15/2010  
Anticipated Effective Date: 12/15/2009

<u>Coverage</u>	<u>Selected Annual Trend</u>	<u>Trend Factor</u>			
		<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
Comprehensive	1.0%	1.051	1.040	1.030	1.020
Collision	3.0%	1.158	1.124	1.091	1.060
Years Projected		4.956	3.956	2.956	1.956

Trend Factor =  $[1 + (\text{Trend} \div 100)]^n$ , where n = number of years projected

**COLUMN (4): Incurred Losses**

**COLUMN (5): Adjusted Incurred Losses**

Incurred Losses adjusted for Large Losses and Excess Wind & Water (comprehensive only).

Adjustment for Large Losses:

<u>Year</u>	<u>Coverage</u>	<u>Adjustment</u>
none		

Selected Excess Wind & Water losses and factor:

<u>Year</u>	<u>Excess Wind Losses</u>	<u>Loading</u>
2005	\$3,736	1.062
2006	0	1.062
2007	0	1.062
2008	71,084	1.062

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**RATE LEVEL INDICATIONS EXPLANATORY NOTES**

**COLUMN (6):    Developed Incurred Losses**

Arkansas accident year data evaluated as of 3/31/2009 was used to develop rate level indications for liability. Loss development factors based on countrywide data were used to project Arkansas losses.

<u>Coverage</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
BI Liability	0.967	0.951	0.944	1.006
PD Liability	0.999	0.998	0.992	0.968
Medical	0.967	0.926	0.857	0.702

**COLUMN (7):    Incurred Losses & Loss Adjustment Expense**

The factors used to adjust the incurred losses to include all loss adjustment expense were developed using 2005-2007 companywide data. For liability, the BI and PD factors were applied separately before adding the data together.

<u>Coverage</u>	<u>Factor</u>
BI Liability	1.230
PD Liability	1.230
Medical	1.230
Comprehensive	1.300
Collision	1.300

**COLUMN (8):    Projected Losses & Loss Adjustment Expense**

The loss projection factors project losses from the midpoint of the year to the average date of loss (9 months past the anticipated effective date.)

Average Date of Loss:            9/15/2010  
Anticipated Effective Date:    12/15/2009

<u>Coverage</u>	<u>Annual Trend</u>	<u>Trend Factor</u>			
		<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
BI Liability	0.0%	1.000	1.000	1.000	1.000
PD Liability	0.0%	1.000	1.000	1.000	1.000
Medical	0.0%	1.000	1.000	1.000	1.000
Comprehensive	2.0%	1.109	1.087	1.066	1.045
Collision	2.0%	1.109	1.087	1.066	1.045
Years Projected		5.206	4.206	3.206	2.206

Trend Factor =  $[1 + (\text{Trend} \div 100)]^n$ , where n = number of years projected

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**RATE LEVEL INDICATIONS EXPLANATORY NOTES**

**COLUMN (9): Projected Loss Ratio**

Projected Loss Ratio = Column (8) ÷ Column (3)

**COLUMN (10): Permissible Loss Ratio**

Percentage of premium necessary for payment of all losses and loss adjustment expenses based on analysis of all other expense provisions.

**COLUMN (11): Rate Level Indication**

Rate Level Indication = {[Column (9) ÷ Column (10)] - 1.00} x 100%

**COLUMN (12): Credibility-Weighted Indication**

**COUNTRYWIDE**  
**PERSONAL AUTO - Bodily Injury Liability**  
**EMC INSURANCE COMPANIES**

**INCURRED LOSS DEVELOPMENT**

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	ACCIDENT YEAR															
	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008		
5	15,201,512	19,366,192	18,948,994	21,043,467	22,784,126	19,494,009	15,911,599	16,912,280	12,885,623	14,430,232	13,868,213	10,811,880	9,288,090	9,819,976		
9	19,576,890	21,782,428	21,689,498	23,263,013	25,089,981	21,679,053	18,469,867	19,716,262	16,627,034	15,480,035	14,199,730	11,434,273	9,894,991			
13	21,538,890	22,552,780	21,687,793	23,513,418	25,544,820	22,198,792	19,126,538	20,552,072	15,953,723	15,802,116	13,564,640	11,420,361				
17	21,283,082	22,789,782	22,439,999	23,511,423	26,363,309	21,911,229	19,173,620	20,208,797	15,307,748	15,424,608	13,427,671					
21	21,265,687	22,269,403	22,669,007	23,754,954	26,376,150	22,231,735	18,802,125	19,576,464	14,976,807	14,905,135						
25	21,164,073	22,312,048	22,512,865	23,736,369	26,192,129	22,308,098	18,615,321	19,593,289	14,754,589							
29	21,061,608	22,143,754	22,424,442	23,954,585	26,252,800	22,279,598	18,538,727	19,548,751								
33	21,069,167	22,152,487	22,349,530	23,753,604	26,224,801	22,159,971	18,532,038									
37	21,065,302	22,152,487	22,423,980	23,601,139	26,212,564	22,159,971										
41	21,065,302	22,152,487	22,423,980	23,582,466	26,212,864											
45	21,059,353	22,152,487	22,423,980	23,582,466												

**COUNTRYWIDE**  
**PERSONAL AUTO - Bodily Injury Liability**  
**EMC INSURANCE COMPANIES**

**INCURRED LOSS DEVELOPMENT**  
**AGE TO AGE FACTORS**

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	ACCIDENT YEAR												
	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
5 to 9	1.288	1.125	1.145	1.105	1.101	1.112	1.161	1.166	1.290	1.073	1.024	1.058	1.065
9 to 13	1.100	1.035	1.000	1.011	1.018	1.024	1.036	1.042	0.960	1.021	0.955	0.999	
13 to 17	0.988	1.011	1.035	1.000	1.032	0.987	1.002	0.983	0.960	0.976	0.990		
17 to 21	0.999	0.977	1.010	1.010	1.000	1.015	0.981	0.969	0.978	0.966			
21 to 25	0.995	1.002	0.993	0.999	0.993	1.003	0.990	1.001	0.985				
25 to 29	0.995	0.992	0.996	1.009	1.002	0.999	0.996	0.998					
29 to 33	1.000	1.000	0.997	0.992	0.999	0.995	1.000						
33 to 37	1.000	1.000	1.003	0.994	1.000	1.000							
37 to 41	1.000	1.000	1.000	0.999	1.000								
41 to Ult	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

**COUNTRYWIDE**  
**PERSONAL AUTO - Bodily Injury Liability**  
**EMC INSURANCE COMPANIES**

INCURRED FACTOR TO ULTIMATE

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	Average		Factor to		Average		Factor to		Average		Factor to	
	<u>Average</u>	<u>Ultimate</u>	<u>Last 3 Years</u>	<u>Ultimate</u>	<u>Last 5 Years</u>	<u>Ultimate</u>	<u>Max,Min</u>	<u>Ultimate</u>	<u>Last 5 Years Less</u>	<u>Max,Min</u>	<u>Ultimate</u>	<u>Ultimate</u>
5 to 9	1.132	1.126	1.049	0.970	1.102	1.048	1.065	1.065	1.065	1.006	1.065	1.006
9 to 13	1.017	0.995	0.992	0.925	0.995	0.951	0.993	0.993	0.993	0.944	0.993	0.944
13 to 17	0.997	0.978	0.975	0.933	0.982	0.955	0.983	0.983	0.983	0.951	0.983	0.951
17 to 21	0.991	0.982	0.971	0.956	0.982	0.973	0.976	0.976	0.976	0.967	0.976	0.967
21 to 25	0.996	0.991	0.992	0.985	0.995	0.991	0.995	0.995	0.995	0.991	0.995	0.991
25 to 29	0.998	0.995	0.997	0.993	1.001	0.996	1.000	1.000	1.000	0.996	1.000	0.996
29 to 33	0.997	0.997	0.998	0.995	0.996	0.995	0.997	0.997	0.997	0.997	0.997	0.997
33 to 37	0.999	0.999	0.998	0.997	0.999	0.999	1.000	1.000	1.000	1.000	1.000	1.000
37 to 41	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
41 to Ult	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

\* Selected method is the average of the last five years less the maximum and minimum.

**COUNTRYWIDE**  
**PERSONAL AUTO - Property Damage Liability**  
**EMC INSURANCE COMPANIES**

INCURRED LOSS DEVELOPMENT

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	ACCIDENT YEAR													
	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008
5	12,412,768	13,938,685	15,943,882	18,811,276	19,179,064	18,376,590	16,522,649	16,041,370	13,385,659	10,839,789	9,285,234	8,396,780	9,070,510	8,796,665
9	12,341,016	13,600,178	15,588,063	18,353,957	18,519,079	17,801,505	16,065,722	15,821,936	13,246,304	10,652,334	8,992,184	8,191,111	8,706,201	
13	12,528,558	13,574,280	15,557,026	18,241,391	18,400,134	17,733,190	16,038,213	15,797,920	13,088,327	10,623,940	8,937,758	8,112,563		
17	11,983,211	13,441,485	15,483,464	18,212,777	18,315,086	17,667,132	16,025,389	15,802,635	13,079,761	10,583,878	8,915,102			
21	11,982,054	13,434,345	15,498,027	18,214,792	18,284,437	17,607,563	16,022,576	15,778,250	13,081,167	10,587,880				
25	11,968,745	13,429,463	15,488,194	18,214,097	18,263,259	17,604,322	16,019,975	15,804,749	13,081,167					
29	11,969,517	13,531,674	15,487,549	18,214,097	18,265,760	17,605,383	16,018,609	15,802,249						
33	11,968,216	13,431,674	15,487,549	18,204,096	18,265,760	17,606,388	16,023,782							
37	11,968,216	13,431,674	15,486,097	18,204,096	18,264,760	17,606,388								
41	11,968,216	13,431,674	15,486,097	18,203,782	18,264,760									
45	11,967,216	13,431,674	15,486,067	18,203,666										

# COUNTRYWIDE

## PERSONAL AUTO - Property Damage Liability

### EMC INSURANCE COMPANIES

#### INCURRED LOSS DEVELOPMENT AGE TO AGE FACTORS

VALUATION DATE:  
Mar-31-2009

Quarter of Development	ACCIDENT YEAR												
	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
5 to 9	0.994	0.976	0.978	0.976	0.966	0.969	0.972	0.986	0.990	0.983	0.968	0.976	0.960
9 to 13	1.015	0.998	0.998	0.994	0.994	0.996	0.998	0.998	0.988	0.997	0.994	0.990	
13 to 17	0.956	0.990	0.995	0.998	0.995	0.996	0.999	1.000	0.999	0.996	0.997		
17 to 21	1.000	0.999	1.001	1.000	0.998	0.997	1.000	0.998	1.000	1.000			
21 to 25	0.999	1.000	0.999	1.000	0.999	1.000	1.000	1.002	1.000				
25 to 29	1.000	1.008	1.000	1.000	1.000	1.000	1.000	1.000					
29 to 33	1.000	0.993	1.000	0.999	1.000	1.000	1.000						
33 to 37	1.000	1.000	1.000	1.000	1.000	1.000							
37 to 41	1.000	1.000	1.000	1.000	1.000								
41 to Ult	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

**COUNTRYWIDE**  
**PERSONAL AUTO - Property Damage Liability**  
**EMC INSURANCE COMPANIES**

INCURRED FACTOR TO ULTIMATE

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	Average	Factor to	Average	Factor to	Average	Factor to	Factor to	Factor to
	Last 3 Years	Ultimate	Last 5 Years	Ultimate	Last 5 Years Less Max.Min	Ultimate	Ultimate	Ultimate
5 to 9	0.976	0.966	0.975	0.967	0.976	0.968	0.976	0.968
9 to 13	0.997	0.989	0.994	0.991	0.994	0.992	0.994	0.992
13 to 17	0.993	0.992	0.999	0.998	0.999	0.998	0.999	0.998
17 to 21	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999
21 to 25	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
25 to 29	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000
29 to 33	0.999	0.999	1.000	1.000	1.000	1.000	1.000	1.000
33 to 37	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
37 to 41	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
41 to Ult	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

\* Selected method is the average of the last five years less the maximum and minimum.



**COUNTRYWIDE**  
**PERSONAL AUTO - Medical Payments**  
**EMC INSURANCE COMPANIES**  
**INCURRED LOSS DEVELOPMENT**  
**AGE TO AGE FACTORS**

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	ACCIDENT YEAR												
	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
5 to 9	0.909	0.874	0.854	0.833	0.836	0.810	0.742	0.782	0.813	0.842	0.860	0.782	0.802
9 to 13	0.903	0.902	0.931	0.918	0.912	0.914	0.929	0.900	0.919	0.945	0.913	0.959	
13 to 17	0.953	0.935	0.941	0.958	0.938	0.943	0.943	0.964	0.959	0.951	0.967		
17 to 21	0.955	0.965	0.984	0.983	0.988	0.978	0.977	0.975	0.988	0.972			
21 to 25	0.989	1.003	0.998	0.999	0.986	0.992	0.993	0.998	0.998				
25 to 29	0.999	0.989	0.990	0.984	0.997	0.995	0.998	0.999					
29 to 33	0.999	0.993	1.000	0.997	0.995	1.000	0.999						
33 to 37	0.998	1.000	1.000	1.000	1.000	0.998							
37 to 41	1.000	0.998	1.000	1.000	1.000								
41 to Ult	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

**COUNTRYWIDE**  
**PERSONAL AUTO - Medical Payments**  
**EMC INSURANCE COMPANIES**

INCURRED FACTOR TO ULTIMATE

VALUATION DATE:  
**Mar-31-2009**

Quarter of Development	Average		Factor to		Average		Factor to		Average		Factor to	
	5 to 9	9 to 13	13 to 17	17 to 21	21 to 25	25 to 29	29 to 33	33 to 37	37 to 41	41 to Ult	Max,Min	Ultimate
	0.826	0.920	0.950	0.976	0.995	0.994	0.998	0.999	1.000	1.000	0.819	0.702
	0.842	0.914	0.962	0.986	0.991	0.991	0.997	0.999	1.000	1.000	0.925	0.857
	0.914	0.962	0.986	0.991	0.991	0.995	0.997	0.999	1.000	1.000	0.958	0.926
	0.995	0.994	0.998	0.996	0.996	0.998	0.999	1.000	1.000	1.000	0.976	0.967
	0.994	0.998	0.999	0.999	0.999	0.999	1.000	1.000	1.000	1.000	0.994	0.990
	0.998	0.999	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.997	0.996
	0.999	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.999	0.999
	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000

\* Selected method is the average of the last five years less the maximum and minimum.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES  
MODEL YEAR / SYMBOL RELATIVITIES**

Symbol	CURRENT COMPREHENSIVE*														
	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1990	1989
														1997	& prior
1	0.40	0.38	0.36	0.34	0.32	0.31	0.30	0.28	0.27	0.26	0.24	0.23	0.22	0.21	0.11
2	0.51	0.49	0.47	0.45	0.42	0.40	0.38	0.36	0.34	0.32	0.30	0.30	0.28	0.27	0.11
3	0.62	0.59	0.56	0.53	0.50	0.49	0.46	0.43	0.42	0.39	0.37	0.35	0.33	0.32	0.11
4	0.70	0.67	0.64	0.61	0.57	0.55	0.51	0.50	0.48	0.45	0.42	0.40	0.38	0.36	0.11
5	0.79	0.75	0.71	0.68	0.65	0.62	0.58	0.55	0.53	0.50	0.48	0.45	0.43	0.41	0.13
6	0.88	0.84	0.80	0.76	0.72	0.69	0.65	0.62	0.59	0.56	0.52	0.50	0.48	0.46	0.21
7	0.96	0.92	0.88	0.83	0.79	0.75	0.71	0.68	0.65	0.61	0.58	0.55	0.52	0.50	0.27
8	1.05	1.00	0.95	0.90	0.86	0.82	0.77	0.73	0.70	0.67	0.63	0.60	0.57	0.54	0.34
10	1.14	1.09	1.04	0.99	0.93	0.90	0.84	0.80	0.77	0.72	0.69	0.66	0.62	0.59	0.44
11	1.26	1.20	1.14	1.09	1.03	0.98	0.92	0.88	0.85	0.80	0.75	0.72	0.69	0.65	0.52
12	1.37	1.31	1.25	1.18	1.12	1.08	1.01	0.96	0.92	0.88	0.82	0.79	0.75	0.71	0.62
13	1.50	1.43	1.36	1.30	1.23	1.17	1.10	1.05	1.01	0.95	0.90	0.86	0.82	0.78	0.74
14	1.64	1.56	1.49	1.41	1.33	1.28	1.20	1.14	1.10	1.04	0.98	0.93	0.90	0.85	0.89
15	1.80	1.72	1.64	1.55	1.48	1.41	1.32	1.26	1.21	1.14	1.09	1.03	0.98	0.93	1.06
16	1.96	1.87	1.78	1.70	1.60	1.53	1.44	1.37	1.31	1.25	1.17	1.12	1.07	1.02	1.23
17	2.11	2.02	1.92	1.83	1.73	1.66	1.56	1.49	1.42	1.34	1.27	1.21	1.15	1.10	1.43
18	2.27	2.16	2.06	1.95	1.85	1.77	1.67	1.58	1.52	1.44	1.36	1.30	1.24	1.17	1.66
19	2.45	2.34	2.23	2.11	2.01	1.91	1.81	1.71	1.65	1.56	1.47	1.40	1.33	1.27	1.92
20	2.66	2.54	2.42	2.30	2.18	2.08	1.96	1.87	1.79	1.70	1.60	1.52	1.45	1.38	2.25
21	2.90	2.77	2.64	2.50	2.37	2.27	2.13	2.03	1.95	1.85	1.74	1.67	1.58	1.50	2.81
22	3.21	3.06	2.91	2.77	2.62	2.50	2.36	2.25	2.15	2.04	1.92	1.84	1.75	1.66	
23	3.53	3.37	3.21	3.05	2.89	2.76	2.60	2.47	2.37	2.25	2.11	2.02	1.92	1.83	
24	4.01	3.83	3.65	3.47	3.29	3.13	2.95	2.81	2.70	2.55	2.41	2.30	2.19	2.08	
25	4.70	4.49	4.28	4.07	3.85	3.68	3.47	3.30	3.16	2.99	2.82	2.70	2.56	2.44	
26	5.42	5.17	4.92	4.68	4.43	4.24	3.99	3.79	3.65	3.45	3.25	3.10	2.95	2.81	
27	6.19	5.91	5.63	5.34	5.07	4.84	4.56	4.33	4.16	3.94	3.71	3.54	3.38	3.21	

\* Converted from Model Year 2008/ Symbol 8.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES  
MODEL YEAR / SYMBOL RELATIVITIES**

Symbol	REVISED COMPREHENSIVE														
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1990 1998	1989 & prior
1	0.34	0.40	0.38	0.36	0.34	0.33	0.31	0.29	0.28	0.27	0.25	0.24	0.23	0.22	0.12
2	0.42	0.51	0.49	0.47	0.44	0.42	0.40	0.38	0.36	0.34	0.32	0.31	0.29	0.28	0.12
3	0.52	0.62	0.59	0.56	0.53	0.51	0.48	0.45	0.44	0.41	0.39	0.37	0.35	0.34	0.12
4	0.64	0.70	0.67	0.64	0.60	0.58	0.54	0.52	0.50	0.47	0.44	0.42	0.40	0.38	0.12
5	0.73	0.79	0.75	0.71	0.68	0.65	0.61	0.58	0.56	0.53	0.50	0.47	0.45	0.43	0.14
6	0.80	0.88	0.84	0.80	0.76	0.72	0.68	0.65	0.62	0.59	0.55	0.53	0.50	0.48	0.22
7	0.89	0.97	0.92	0.87	0.83	0.79	0.75	0.71	0.68	0.64	0.61	0.58	0.55	0.52	0.28
8	0.96	1.05	1.00	0.95	0.90	0.86	0.81	0.77	0.74	0.70	0.66	0.63	0.60	0.57	0.36
10	1.03	1.14	1.09	1.04	0.98	0.94	0.88	0.84	0.81	0.76	0.72	0.69	0.65	0.62	0.46
11	1.10	1.26	1.20	1.14	1.08	1.03	0.97	0.92	0.89	0.84	0.79	0.76	0.72	0.68	0.55
12	1.17	1.38	1.31	1.24	1.18	1.13	1.06	1.01	0.97	0.92	0.86	0.83	0.79	0.75	0.65
13	1.22	1.50	1.43	1.36	1.29	1.23	1.16	1.10	1.06	1.00	0.94	0.90	0.86	0.82	0.78
14	1.28	1.64	1.56	1.48	1.40	1.34	1.26	1.20	1.15	1.09	1.03	0.98	0.94	0.89	0.93
15	1.34	1.81	1.72	1.63	1.55	1.48	1.39	1.32	1.27	1.20	1.14	1.08	1.03	0.98	1.11
16	1.40	1.96	1.87	1.78	1.68	1.61	1.51	1.44	1.38	1.31	1.23	1.18	1.12	1.07	1.29
17	1.46	2.12	2.02	1.92	1.82	1.74	1.64	1.56	1.49	1.41	1.33	1.27	1.21	1.15	1.50
18	1.53	2.27	2.16	2.05	1.94	1.86	1.75	1.66	1.60	1.51	1.43	1.36	1.30	1.23	1.74
19	1.58	2.46	2.34	2.22	2.11	2.01	1.90	1.80	1.73	1.64	1.54	1.47	1.40	1.33	2.02
20	1.64	2.67	2.54	2.41	2.29	2.18	2.06	1.96	1.88	1.78	1.68	1.60	1.52	1.45	2.36
21	1.69	2.91	2.77	2.63	2.49	2.38	2.24	2.13	2.05	1.94	1.83	1.75	1.66	1.58	2.95
22	1.75	3.21	3.06	2.91	2.75	2.63	2.48	2.36	2.26	2.14	2.02	1.93	1.84	1.74	
23	1.80	3.54	3.37	3.20	3.03	2.90	2.73	2.59	2.49	2.36	2.22	2.12	2.02	1.92	
24	1.86	4.02	3.83	3.64	3.45	3.29	3.10	2.95	2.83	2.68	2.53	2.41	2.30	2.18	
25	1.91	4.71	4.49	4.27	4.04	3.86	3.64	3.46	3.32	3.14	2.96	2.83	2.69	2.56	
26	1.96	5.43	5.17	4.91	4.65	4.45	4.19	3.98	3.83	3.62	3.41	3.26	3.10	2.95	
27	2.01	6.21	5.91	5.61	5.32	5.08	4.79	4.55	4.37	4.14	3.90	3.72	3.55	3.37	
28	2.07														
29	2.11														
30	2.17														
31	2.22														
32	2.27														
33	2.31														
34	2.37														
35	2.41														
36	2.48														
37	2.55														
38	2.63														
39	2.70														
40	2.77														
41	2.84														
42	2.92														
43	2.98														
44	3.06														
45	3.12														
46	3.20														
47	3.29														
48	3.38														
49	3.47														
50	3.54														
51	3.63														
52	3.72														
53	3.80														
54	3.93														
55	4.09														
56	4.27														
57	4.44														
58	4.72														
59	5.08														
60	5.46														
61	5.84														
62	6.24														
63	6.64														
64	7.05														
65	7.45														
66	8.05														
67	8.87														
68	9.67														
69	10.47														
70	11.29														
71	12.10														
72	12.91														
73	13.73														
74	14.54														
75	15.36														

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES  
MODEL YEAR / SYMBOL RELATIVITIES**

Symbol	CURRENT COLLISION*														
	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1990 1997	1989 & prior
1	0.65	0.62	0.59	0.55	0.52	0.49	0.45	0.41	0.39	0.36	0.34	0.32	0.30	0.29	0.19
2	0.73	0.70	0.67	0.63	0.59	0.55	0.50	0.47	0.44	0.41	0.39	0.37	0.34	0.32	0.19
3	0.81	0.77	0.73	0.69	0.65	0.61	0.56	0.51	0.49	0.46	0.43	0.40	0.37	0.35	0.19
4	0.86	0.82	0.78	0.73	0.69	0.65	0.59	0.54	0.51	0.49	0.46	0.43	0.40	0.37	0.19
5	0.90	0.86	0.82	0.77	0.72	0.68	0.62	0.57	0.54	0.50	0.48	0.45	0.42	0.39	0.24
6	0.94	0.90	0.86	0.81	0.75	0.71	0.65	0.60	0.56	0.53	0.50	0.48	0.44	0.41	0.29
7	1.00	0.95	0.90	0.85	0.80	0.75	0.69	0.64	0.60	0.56	0.52	0.50	0.46	0.44	0.32
8	1.05	1.00	0.95	0.90	0.84	0.79	0.72	0.67	0.63	0.59	0.55	0.52	0.49	0.46	0.36
10	1.10	1.05	1.00	0.94	0.88	0.83	0.76	0.70	0.66	0.62	0.58	0.55	0.51	0.48	0.40
11	1.15	1.10	1.05	0.98	0.92	0.87	0.80	0.73	0.70	0.65	0.61	0.58	0.53	0.50	0.45
12	1.21	1.15	1.10	1.03	0.96	0.90	0.83	0.77	0.72	0.68	0.64	0.60	0.56	0.52	0.49
13	1.27	1.21	1.15	1.09	1.01	0.95	0.88	0.81	0.76	0.71	0.67	0.64	0.59	0.55	0.54
14	1.34	1.28	1.22	1.14	1.08	1.01	0.92	0.86	0.80	0.75	0.70	0.67	0.62	0.58	0.60
15	1.44	1.37	1.30	1.23	1.15	1.09	0.99	0.91	0.86	0.81	0.75	0.71	0.67	0.63	0.68
16	1.50	1.44	1.37	1.29	1.21	1.14	1.04	0.96	0.90	0.85	0.80	0.75	0.70	0.66	0.75
17	1.59	1.52	1.45	1.36	1.28	1.20	1.10	1.01	0.95	0.90	0.84	0.80	0.74	0.70	0.82
18	1.68	1.60	1.52	1.43	1.34	1.27	1.16	1.07	1.01	0.94	0.89	0.84	0.78	0.73	0.89
19	1.76	1.68	1.60	1.50	1.41	1.32	1.22	1.12	1.06	0.99	0.92	0.88	0.82	0.77	0.96
20	1.85	1.76	1.68	1.57	1.48	1.39	1.28	1.17	1.10	1.04	0.97	0.92	0.86	0.80	1.06
21	1.92	1.84	1.75	1.65	1.54	1.46	1.33	1.23	1.15	1.09	1.02	0.96	0.90	0.84	1.24
22	2.03	1.94	1.85	1.73	1.63	1.53	1.40	1.30	1.22	1.14	1.08	1.02	0.94	0.89	
23	2.15	2.05	1.95	1.84	1.71	1.62	1.49	1.37	1.29	1.21	1.13	1.08	1.00	0.93	
24	2.31	2.21	2.10	1.98	1.85	1.74	1.60	1.48	1.39	1.30	1.22	1.16	1.08	1.01	
25	2.58	2.46	2.34	2.20	2.06	1.94	1.78	1.64	1.54	1.46	1.36	1.29	1.19	1.12	
26	2.84	2.71	2.58	2.43	2.27	2.14	1.96	1.81	1.70	1.60	1.50	1.42	1.31	1.24	
27	3.21	3.06	2.91	2.74	2.56	2.42	2.22	2.04	1.92	1.81	1.69	1.60	1.49	1.40	

\* Converted from Model Year 2008/ Symbol 8.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES  
MODEL YEAR / SYMBOL RELATIVITIES**

Symbol	REVISED COLLISION														
	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1990 1998	1989 & prior
1	0.48	0.65	0.62	0.58	0.55	0.51	0.47	0.43	0.41	0.38	0.36	0.34	0.32	0.30	0.20
2	0.61	0.74	0.70	0.66	0.62	0.58	0.53	0.49	0.46	0.43	0.41	0.39	0.36	0.34	0.20
3	0.74	0.81	0.77	0.72	0.68	0.64	0.59	0.54	0.51	0.48	0.45	0.42	0.39	0.37	0.20
4	0.85	0.86	0.82	0.77	0.72	0.68	0.62	0.57	0.54	0.51	0.48	0.45	0.42	0.39	0.20
5	0.90	0.90	0.86	0.81	0.76	0.71	0.65	0.60	0.57	0.53	0.50	0.47	0.44	0.41	0.25
6	0.94	0.95	0.90	0.85	0.79	0.75	0.68	0.63	0.59	0.56	0.52	0.50	0.46	0.43	0.30
7	0.97	1.00	0.95	0.89	0.84	0.79	0.72	0.67	0.63	0.59	0.55	0.52	0.48	0.46	0.34
8	1.01	1.05	1.00	0.94	0.88	0.83	0.76	0.70	0.66	0.62	0.58	0.55	0.51	0.48	0.38
10	1.06	1.10	1.05	0.99	0.92	0.87	0.80	0.74	0.69	0.65	0.61	0.58	0.54	0.50	0.42
11	1.10	1.16	1.10	1.03	0.97	0.91	0.84	0.77	0.73	0.68	0.64	0.61	0.56	0.53	0.47
12	1.13	1.21	1.15	1.08	1.01	0.95	0.87	0.81	0.76	0.71	0.67	0.63	0.59	0.55	0.51
13	1.17	1.27	1.21	1.14	1.06	1.00	0.92	0.85	0.80	0.75	0.70	0.67	0.62	0.58	0.57
14	1.19	1.34	1.28	1.20	1.13	1.06	0.97	0.90	0.84	0.79	0.74	0.70	0.65	0.61	0.63
15	1.22	1.44	1.37	1.29	1.21	1.14	1.04	0.96	0.90	0.85	0.79	0.75	0.70	0.66	0.71
16	1.24	1.51	1.44	1.35	1.27	1.20	1.09	1.01	0.95	0.89	0.84	0.79	0.73	0.69	0.79
17	1.28	1.60	1.52	1.43	1.34	1.26	1.16	1.06	1.00	0.94	0.88	0.84	0.78	0.73	0.86
18	1.31	1.68	1.60	1.50	1.41	1.33	1.22	1.12	1.06	0.99	0.93	0.88	0.82	0.77	0.93
19	1.34	1.76	1.68	1.58	1.48	1.39	1.28	1.18	1.11	1.04	0.97	0.92	0.86	0.81	1.01
20	1.36	1.85	1.76	1.65	1.55	1.46	1.34	1.23	1.16	1.09	1.02	0.97	0.90	0.84	1.11
21	1.40	1.93	1.84	1.73	1.62	1.53	1.40	1.29	1.21	1.14	1.07	1.01	0.94	0.88	1.30
22	1.43	2.04	1.94	1.82	1.71	1.61	1.47	1.36	1.28	1.20	1.13	1.07	0.99	0.93	
23	1.46	2.15	2.05	1.93	1.80	1.70	1.56	1.44	1.35	1.27	1.19	1.13	1.05	0.98	
24	1.49	2.32	2.21	2.08	1.94	1.83	1.68	1.55	1.46	1.37	1.28	1.22	1.13	1.06	
25	1.52	2.58	2.46	2.31	2.16	2.04	1.87	1.72	1.62	1.53	1.43	1.35	1.25	1.18	
26	1.54	2.85	2.71	2.55	2.38	2.25	2.06	1.90	1.79	1.68	1.57	1.49	1.38	1.30	
27	1.56	3.21	3.06	2.88	2.69	2.54	2.33	2.14	2.02	1.90	1.77	1.68	1.56	1.47	
28	1.60														
29	1.62														
30	1.65														
31	1.67														
32	1.69														
33	1.73														
34	1.75														
35	1.77														
36	1.80														
37	1.84														
38	1.87														
39	1.89														
40	1.93														
41	1.95														
42	1.98														
43	2.00														
44	2.02														
45	2.05														
46	2.08														
47	2.11														
48	2.13														
49	2.17														
50	2.20														
51	2.23														
52	2.26														
53	2.29														
54	2.33														
55	2.39														
56	2.45														
57	2.52														
58	2.63														
59	2.76														
60	2.89														
61	3.06														
62	3.26														
63	3.44														
64	3.64														
65	3.83														
66	4.11														
67	4.50														
68	4.88														
69	5.27														
70	5.64														
71	6.03														
72	6.41														
73	6.80														
74	7.18														
75	7.57														

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**Revised Motor Homes Deductible Relativities**

**Rule 19. A. 3.**

*g. Deductibles*

<i>Comprehensive</i>		<i>Collision</i>	
<i>Deductible</i>	<i>Factor</i>	<i>Deductible</i>	<i>Factor</i>
\$50	1.57		
100	1.47	\$100	1.18
200	1.29	200	1.13
250	1.20	250	1.11
500	1.00	500	1.00
1,000	0.90	1,000	0.90
2,500	0.85	2,500	0.85
5,000	0.78	5,000	0.78

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**Terr. All Remaining  
ANNUAL UNINSURED MOTORISTS RATES**

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
75,000	\$60.00	\$48.00	\$63.00	\$50.50
100,000	64.00	51.00	66.50	53.00
200,000	73.00	58.00	74.00	59.50
300,000	78.00	62.00	78.50	63.00
500,000	83.00	67.00	83.50	66.50
1,000,000	89.00	71.00	88.50	71.00

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**Terr. All Remaining**

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50/25	\$49.00	\$39.00	\$52.50	\$42.00
50/100/25	56.00	45.00	59.00	47.00
100/300/25	65.00	52.00	67.00	53.50
300/300/25**	78.00	62.00	78.50	62.50
250/500/25	76.00	61.00	77.00	61.50
500/500/25**	83.00	66.00	83.00	66.50
500/1000/25**	83.00	66.00	83.50	66.50

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

Property Damage\*\*\*\*

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50	\$1.00	\$1.00	\$1.50	\$1.50
100	3.00	2.00	3.50	3.00

\*\* Not shown in manual

\*\*\* Subject to a \$200 deductible

\*\*\*\* To be added to appropriate split limit uninsured motorists B.I. and P.D. rate.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**Terr. All Remaining**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$29.00	\$23.00	<b>\$26.50</b>	<b>\$21.00</b>
75,000	34.00	27.00	<b>31.00</b>	<b>25.00</b>
100,000	38.00	30.00	<b>34.50</b>	<b>27.50</b>
200,000	47.00	37.00	<b>42.50</b>	<b>34.00</b>
300,000	51.00	41.00	<b>47.00</b>	<b>37.50</b>
500,000	57.00	45.00	<b>51.50</b>	<b>41.50</b>
1,000,000	62.00	50.00	<b>57.00</b>	<b>45.50</b>

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$65.00	\$52.00	<b>\$64.00</b>	<b>\$51.00</b>
75,000	85.00	68.00	<b>84.00</b>	<b>67.00</b>
100,000	103.00	82.00	<b>101.00</b>	<b>81.00</b>
200,000	147.00	117.00	<b>144.00</b>	<b>115.00</b>
300,000	174.00	139.00	<b>170.50</b>	<b>136.50</b>
500,000	206.00	165.00	<b>202.00</b>	<b>161.50</b>
1,000,000	243.00	194.00	<b>237.00</b>	<b>189.50</b>

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**Terr. All Remaining**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$23.00	\$18.00	\$21.00	\$17.00
50/100	30.00	24.00	27.50	22.00
100/300	39.00	31.00	35.50	28.50
300/300**	51.00	41.00	47.00	37.50
250/500	50.00	40.00	45.50	36.50
500/500**	57.00	45.00	51.50	41.50
500/1000**	57.00	46.00	52.00	41.50

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$39.00	\$31.00	\$38.50	\$31.00
50/100	66.00	53.00	65.00	52.00
100/300	105.00	84.00	103.50	83.00
300/300**	174.00	139.00	170.50	136.50
250/500	164.00	131.00	160.50	128.50
500/500**	206.00	165.00	202.00	161.50
500/1000**	208.00	166.00	203.50	162.50

\*\* Not shown in manual

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 22-25  
ANNUAL UNINSURED MOTORISTS RATES**

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE CAR</u>	<u>MULTI CAR</u>	<u>SINGLE CAR</u>	<u>MULTI CAR</u>
75,000	\$80.00	\$64.00	\$89.50	\$71.50
100,000	86.00	69.00	94.50	75.50
200,000	98.00	79.00	105.50	84.50
300,000	105.00	84.00	111.50	89.50
500,000	113.00	90.00	118.50	95.00
1,000,000	121.00	96.00	125.50	100.50

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 22-25**

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50/25	\$65.00	\$52.00	\$76.00	\$60.50
50/100/25	75.00	60.00	85.50	68.50
100/300/25	88.00	70.00	96.50	77.50
300/300/25**	105.00	84.00	112.50	90.00
250/500/25	103.00	82.00	110.50	88.50
500/500/25**	113.00	90.00	119.50	95.50
500/1000/25**	113.00	91.00	119.50	96.00

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

Property Damage\*\*\*\*

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50	\$1.00	\$1.00	\$1.50	\$1.50
100	3.00	2.00	3.50	3.00

\*\* Not shown in manual

\*\*\* Subject to a \$200 deductible

\*\*\*\* To be added to appropriate split limit uninsured motorists B.I. and P.D. rate.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 22-25**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$41.00	\$33.00	\$37.50	\$30.00
75,000	49.00	39.00	44.00	35.00
100,000	54.00	43.00	49.00	39.00
200,000	67.00	53.00	60.00	48.00
300,000	74.00	59.00	66.50	53.00
500,000	81.00	65.00	73.00	58.50
1,000,000	89.00	71.00	80.00	64.00

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$91.00	\$67.00	\$82.00	\$65.50
75,000	110.00	88.00	107.50	86.00
100,000	132.00	106.00	129.50	103.50
200,000	189.00	151.00	184.00	147.50
300,000	224.00	179.00	218.00	174.50
500,000	266.00	213.00	258.50	207.00
1,000,000	313.00	250.00	303.50	243.00

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 22-25**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$33.00	\$26.00	\$29.50	\$23.50
50/100	43.00	35.00	39.00	31.50
100/300	56.00	45.00	50.50	40.50
300/300**	74.00	59.00	66.50	53.00
250/500	71.00	57.00	64.00	51.50
500/500**	81.00	65.00	73.00	58.50
500/1000**	82.00	65.00	73.50	58.50

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$50.00	\$40.00	\$49.00	\$39.50
50/100	85.00	68.00	83.50	66.50
100/300	136.00	108.00	132.50	106.00
300/300**	224.00	179.00	218.00	174.50
250/500	211.00	169.00	205.50	164.50
500/500**	266.00	213.00	258.50	207.00
500/1000**	268.00	214.00	260.00	208.00

\*\* Not shown in manual

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 21  
ANNUAL UNINSURED MOTORISTS RATES**

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE CAR</u>	<u>MULTI CAR</u>	<u>SINGLE CAR</u>	<u>MULTI CAR</u>
75,000	\$109.00	\$88.00	\$138.50	\$111.00
100,000	118.00	94.00	148.00	118.50
200,000	137.00	109.00	168.00	134.50
300,000	147.00	118.00	179.50	143.50
500,000	158.00	127.00	191.50	153.00
1,000,000	170.00	136.00	204.50	163.50

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 21**

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

BI & PD Combined

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50/25	\$87.00	\$70.00	\$116.00	\$92.50
50/100/25	103.00	82.00	133.00	106.50
100/300/25	121.00	97.00	153.00	122.50
300/300/25**	148.00	118.00	181.50	145.50
250/500/25	144.00	115.00	178.00	142.50
500/500/25**	159.00	118.00	194.00	155.00
500/1000/25**	159.00	128.00	194.50	155.50

**ANNUAL UNINSURED MOTORISTS RATES\*\*\***

Property Damage\*\*\*\*

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50	\$1.00	\$1.00	\$1.50	\$1.50
100	3.00	2.00	3.50	3.00

\*\* Not shown in manual

\*\*\* Subject to a \$200 deductible

\*\*\*\* To be added to appropriate split limit uninsured motorists B.I. and P.D. rate.

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 21**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$49.00	\$39.00	\$53.00	\$42.50
50/100	65.00	52.00	70.00	56.00
100/300	83.00	67.00	90.50	72.50
300/300**	110.00	88.00	119.00	95.50
250/500	106.00	85.00	115.50	92.50
500/500**	121.00	97.00	131.50	105.00
500/1000**	133.00	97.00	132.00	105.50

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
25/50	\$49.00	\$39.00	\$46.50	\$37.50
50/100	83.00	66.00	79.00	63.00
100/300	132.00	106.00	125.50	100.50
300/300**	218.00	175.00	206.50	165.50
250/500	206.00	164.00	194.50	155.50
500/500**	259.00	207.00	245.00	196.00
500/1000**	261.00	209.00	246.00	197.00

\*\* Not shown in manual

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**TERRITORY 21**

**ANNUAL UNINSURED MOTORISTS RATES**

BI Only

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$62.00	\$49.00	<b>\$67.00</b>	<b>\$53.50</b>
75,000	72.00	58.00	<b>78.50</b>	<b>63.00</b>
100,000	81.00	65.00	<b>87.50</b>	<b>70.00</b>
200,000	99.00	80.00	<b>108.00</b>	<b>86.50</b>
300,000	110.00	88.00	<b>119.00</b>	<b>95.50</b>
500,000	121.00	97.00	<b>131.50</b>	<b>105.00</b>
1,000,000	133.00	106.00	<b>144.00</b>	<b>115.00</b>

**ANNUAL UNDERINSURED MOTORISTS RATES**

<u>LIMIT</u>	<u>CURRENT</u>		<u>REVISED</u>	
	<u>SINGLE</u>	<u>MULTI</u>	<u>SINGLE</u>	<u>MULTI</u>
	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>	<u>CAR</u>
50,000	\$81.00	\$65.00	<b>\$77.50</b>	<b>\$62.00</b>
75,000	107.00	86.00	<b>101.50</b>	<b>81.50</b>
100,000	129.00	103.00	<b>122.50</b>	<b>98.00</b>
200,000	184.00	147.00	<b>174.50</b>	<b>139.50</b>
300,000	218.00	175.00	<b>206.50</b>	<b>165.50</b>
500,000	259.00	207.00	<b>245.00</b>	<b>196.00</b>
1,000,000	305.00	244.00	<b>287.50</b>	<b>230.00</b>

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**COMBINATION POLICY DISCOUNT EFFECT**

	(1)	(2)	(3)
	<b>2008</b>		
	<b>Written</b>	<b>Discount</b>	
	<b><u>Premium</u></b>	<b><u>Current</u></b>	<b><u>Revised</u></b>
With Comb. Discount	226,271	15%	20%
Without Comb. Discount	271,025	0%	0%
	497,296		

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**ACCIDENT FREE DISCOUNT EFFECT**

	(1)	(2)	(3)
	<b>Inforce WP as of <u>12/31/2008</u></b>	<b><u>Discount</u></b>	
		<b><u>Current</u></b>	<b><u>Revised</u></b>
Accident Free	243,983	0%	10%
With Accidents	<u>23,272</u>	0%	0%
	<u>267,255</u>		

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY  
CURRENT & REVISED BASE RATES**

<u>Territory</u>	<u>Liability</u> \$75,000		<u>Medical</u> \$1,000		<u>Comprehensive</u> 500 ded (09,8)		<u>Collision</u> 500 ded (09,8)	
	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>
21	644	729	16	19	170	192	483	573
22	472	534	16	19	162	183	491	583
23	464	525	16	19	153	172	462	548
24	430	486	16	19	162	183	477	566
25	416	471	16	19	193	218	554	658
26	418	473	16	19	176	198	506	601
27	410	464	16	19	204	230	523	621
28	418	473	16	19	193	218	540	641
29	418	473	16	19	189	213	523	621
30	428	484	16	19	126	142	449	533
31	418	473	16	19	172	194	462	548
32	414	468	16	19	181	204	506	601
33	418	473	16	19	185	209	494	586

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY**

**SPLIT LIMIT BASE RATES**

<u>TERR</u>	<u>BODILY INJURY</u> 25/50 BASE RATE		<u>PROPERTY DAMAGE</u> 25 BASE RATE	
	<u>CUR</u>	<u>REV</u>	<u>CUR</u>	<u>REV</u>
21	\$308	\$314	\$232	\$314
22	\$196	\$207	\$214	\$263
23	\$186	\$189	\$218	\$273
24	\$188	\$195	\$182	\$228
25	\$204	\$215	\$148	\$190
26	\$188	\$194	\$168	\$218
27	\$180	\$186	\$172	\$218
28	\$196	\$204	\$160	\$204
29	\$178	\$183	\$186	\$233
30	\$178	\$183	\$194	\$243
31	\$168	\$171	\$196	\$245
32	\$186	\$191	\$170	\$216
33	\$184	\$190	\$176	\$222

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**  
**CURRENT & REVISED BASE RATES**

<u>Territory</u>	<u>Liability</u> \$75,000		<u>Medical</u> \$1,000		<u>Comprehensive</u> 500 ded (09,8)		<u>Collision</u> 500 ded (09,8)	
	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>	<u>Cur</u>	<u>Rev</u>
21	837	948	21	25	221	250	628	745
22	614	694	21	25	211	238	638	758
23	603	683	21	25	199	224	601	712
24	559	632	21	25	211	238	620	736
25	541	612	21	25	251	283	720	855
26	543	615	21	25	229	257	658	781
27	533	603	21	25	265	299	680	807
28	543	615	21	25	251	283	702	833
29	543	615	21	25	246	277	680	807
30	556	629	21	25	164	185	584	693
31	543	615	21	25	224	252	601	712
32	538	608	21	25	235	265	658	781
33	543	615	21	25	241	272	642	762

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SPLIT LIMIT BASE RATES**

<u>TERR</u>	<u>BODILY INJURY</u> 25/50 BASE RATE		<u>PROPERTY DAMAGE</u> 25 BASE RATE	
	<u>CUR</u>	<u>REV</u>	<u>CUR</u>	<u>REV</u>
21	\$400	\$408	\$302	\$408
22	\$255	\$269	\$278	\$342
23	\$242	\$246	\$283	\$355
24	\$244	\$254	\$237	\$296
25	\$265	\$280	\$192	\$247
26	\$244	\$252	\$218	\$283
27	\$234	\$242	\$224	\$283
28	\$255	\$265	\$208	\$265
29	\$231	\$238	\$242	\$303
30	\$231	\$238	\$252	\$316
31	\$218	\$222	\$255	\$319
32	\$242	\$248	\$221	\$281
33	\$239	\$247	\$229	\$289

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY  
SUMMARY OF CHANGES**

<b>Coverage</b>	<b>2008 Current Level Written Premium</b>	<b>Percent Change</b>	<b>Estimated Annual Dollar Effect</b>
CSL Liability	\$52,440	0.0%	(\$5)
BI Liability	\$61,137	-8.8%	(\$5,403)
PD Liability	\$51,892	11.4%	\$5,927
<i>Subtotal</i>	<u>\$165,469</u>	<u>0.3%</u>	<u>\$519</u>
Medical	\$10,639	5.0%	\$533
Uninsured Motorists	\$23,427	-6.6%	(\$1,546)
Underinsured Motorists	<u>\$29,034</u>	<u>-13.3%</u>	<u>(\$3,863)</u>
<b>Liability Total</b>	\$228,569	-1.9%	(\$4,357)
Comprehensive	\$51,712	0.0%	\$15
Collision	<u>\$111,934</u>	<u>3.5%</u>	<u>\$3,911</u>
<b>Physical Damage Total</b>	\$163,646	2.4%	\$3,926
Other Coverages	<u>\$3,355</u>	<u>-11.7%</u>	<u>(\$391)</u>
<b>All Coverages Total</b>	\$395,570	-0.2%	(\$822)

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
21	CSL Liability	\$478	0.1%	0
	BI Liability	\$344	-9.9%	(34)
	PD Liability	\$224	19.6%	44
	Medical	\$48	5.0%	2
	Comp	\$290	0.2%	1
	Collision	\$688	3.4%	23
	UM	\$163	-6.6%	(11)
	UIM	\$224	-13.3%	(30)
	Other	\$38	-11.6%	(4)
	All	<u>\$2,497</u>	<u>-0.4%</u>	<u>(9)</u>
22	CSL Liability	\$0	---	0
	BI Liability	\$242	-6.6%	(16)
	PD Liability	\$199	8.6%	17
	Medical	\$32	5.0%	2
	Comp	\$239	0.2%	0
	Collision	\$538	3.5%	19
	UM	\$73	-6.6%	(5)
	UIM	\$127	-13.3%	(17)
	Other	\$5	-11.6%	(1)
	All	<u>\$1,455</u>	<u>-0.1%</u>	<u>(1)</u>
23	CSL Liability	\$6,409	0.0%	0
	BI Liability	\$2,632	-10.2%	(268)
	PD Liability	\$2,613	10.7%	280
	Medical	\$781	5.0%	39
	Comp	\$3,196	-0.3%	(10)
	Collision	\$6,778	3.4%	230
	UM	\$1,966	-6.6%	(130)
	UIM	\$2,976	-13.3%	(396)
	Other	\$229	-11.6%	(27)
	All	<u>\$27,580</u>	<u>-1.0%</u>	<u>(282)</u>

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
24	CSL Liability	\$6,469	-0.1%	(6)
	BI Liability	\$5,646	-8.3%	(469)
	PD Liability	\$4,652	10.7%	498
	Medical	\$1,079	5.0%	54
	Comp	\$4,247	0.2%	8
	Collision	\$9,577	3.5%	335
	UM	\$2,765	-6.6%	(182)
	UIM	\$3,511	-13.3%	(467)
	Other	\$363	-11.6%	(42)
	All	\$38,309	-0.7%	(271)
25	CSL Liability	\$1,017	0.1%	1
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$313	0.2%	1
	Collision	\$760	3.6%	27
	UM	\$141	-6.6%	(9)
	UIM	\$0	---	0
	Other	\$0	---	0
	All	\$2,231	0.9%	20
26	CSL Liability	\$1,756	0.0%	0
	BI Liability	\$4,065	-8.8%	(358)
	PD Liability	\$3,173	14.7%	466
	Medical	\$614	5.0%	31
	Comp	\$3,283	-0.2%	(7)
	Collision	\$5,870	3.6%	211
	UM	\$1,265	-6.6%	(83)
	UIM	\$1,561	-13.3%	(208)
	Other	\$147	-11.6%	(17)
	All	\$21,734	0.2%	35

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
27	CSL Liability	\$4,570	0.0%	0
	BI Liability	\$4,826	-8.7%	(420)
	PD Liability	\$4,134	12.0%	496
	Medical	\$990	5.0%	50
	Comp	\$6,048	0.0%	0
	Collision	\$11,218	3.5%	393
	UM	\$1,946	-6.6%	(128)
	UIM	\$2,505	-13.3%	(333)
	Other	\$281	-11.6%	(33)
	All	\$36,518	0.1%	25
28	CSL Liability	\$9,292	0.0%	0
	BI Liability	\$12,649	-8.0%	(1,012)
	PD Liability	\$8,700	12.7%	1,105
	Medical	\$2,195	5.0%	110
	Comp	\$11,236	0.2%	22
	Collision	\$23,124	3.5%	809
	UM	\$4,260	-6.6%	(281)
	UIM	\$5,141	-13.3%	(684)
	Other	\$369	-11.6%	(43)
	All	\$76,966	0.0%	26
29	CSL Liability	\$8,510	0.0%	0
	BI Liability	\$17,794	-9.1%	(1,619)
	PD Liability	\$16,700	10.7%	1,787
	Medical	\$2,641	5.0%	132
	Comp	\$13,097	0.0%	0
	Collision	\$27,393	3.5%	959
	UM	\$5,964	-6.6%	(394)
	UIM	\$6,170	-13.3%	(821)
	Other	\$660	-11.6%	(77)
	All	\$98,929	0.0%	(33)

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
30	CSL Liability	\$10,782	0.0%	0
	BI Liability	\$8,817	-9.1%	(802)
	PD Liability	\$7,735	10.7%	828
	Medical	\$1,473	5.0%	74
	Comp	\$6,766	0.0%	0
	Collision	\$20,056	3.5%	702
	UM	\$3,271	-6.6%	(216)
	UIM	\$4,822	-13.3%	(641)
	Other	\$1,044	-11.6%	(121)
	All	\$64,766	-0.3%	(176)
31	CSL Liability	\$3,157	0.0%	0
	BI Liability	\$3,246	-10.0%	(325)
	PD Liability	\$3,078	10.5%	323
	Medical	\$644	5.0%	32
	Comp	\$2,614	0.0%	0
	Collision	\$5,234	3.4%	178
	UM	\$1,392	-6.6%	(92)
	UIM	\$1,758	-13.3%	(234)
	Other	\$196	-11.6%	(23)
	All	\$21,319	-0.7%	(141)
32	CSL Liability	\$0	---	0
	BI Liability	\$719	-9.2%	(66)
	PD Liability	\$559	12.3%	69
	Medical	\$121	5.0%	6
	Comp	\$271	0.0%	0
	Collision	\$506	3.6%	18
	UM	\$165	-6.6%	(11)
	UIM	\$164	-13.3%	(22)
	Other	\$0	---	0
	All	\$2,505	-0.2%	(6)

**ARKANSAS  
PERSONAL AUTO  
EMCASCO INSURANCE COMPANY  
SUMMARY OF CHANGES**

<b>Territory</b>	<b>Coverage</b>	<b>2008 Current Level Written Premium</b>	<b>Percent Change</b>	<b>Estimated Annual Dollar Effect</b>
33	CSL Liability	\$0	---	0
	BI Liability	\$157	-8.7%	(14)
	PD Liability	\$125	11.5%	14
	Medical	\$21	5.0%	1
	Comp	\$112	0.2%	0
	Collision	\$192	3.4%	7
	UM	\$56	-6.6%	(4)
	UIM	\$75	-13.3%	(10)
	Other	\$23	-11.6%	(3)
	All	\$761	-1.2%	(9)

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

<b>Coverage</b>	<b>2008 Current Level Written Premium</b>	<b>Percent Change</b>	<b>Estimated Annual Dollar Effect</b>
CSL Liability	\$2,134	0.1%	\$2
BI Liability	\$6,863	-8.7%	(\$594)
PD Liability	\$6,001	11.4%	\$687
<i>Subtotal</i>	<u>\$14,998</u>	<u>0.6%</u>	<u>\$95</u>
Medical	\$815	5.3%	\$43
Uninsured Motorists	\$1,454	-6.5%	(\$95)
Underinsured Motorists	<u>\$1,738</u>	<u>-13.3%</u>	<u>(\$232)</u>
<b>Liability Total</b>	\$19,005	-1.0%	(\$189)
Comprehensive	\$4,020	0.0%	\$0
Collision	<u>\$8,800</u>	<u>3.5%</u>	<u>\$308</u>
<b>Physical Damage Total</b>	\$12,820	2.4%	\$308
Other Coverages	<u>\$255</u>	<u>-11.8%</u>	<u>(\$30)</u>
<b>All Coverages Total</b>	\$32,080	<b>0.3%</b>	\$89

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
21	CSL Liability	(\$432)	0.1%	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	(\$24)	5.2%	(1)
	Comp	(\$30)	0.3%	0
	Collision	(\$63)	3.4%	(2)
	UM	(\$38)	-6.6%	3
	UIM	(\$44)	-13.3%	6
	Other	(\$2)	-11.6%	0
	All	(\$633)	-0.9%	6
22	CSL Liability	\$0	---	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$0	---	0
	Collision	\$0	---	0
	UM	\$0	---	0
	UIM	\$0	---	0
	Other	\$0	---	0
	All	\$0	---	0
23	CSL Liability	\$0	---	0
	BI Liability	\$405	-10.1%	(41)
	PD Liability	\$449	10.9%	49
	Medical	\$72	5.2%	4
	Comp	\$264	-0.2%	(1)
	Collision	\$605	3.3%	20
	UM	\$119	-6.6%	(8)
	UIM	\$117	-13.3%	(16)
	Other	\$14	-11.6%	(2)
	All	\$2,045	0.2%	5

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
24	CSL Liability	\$0	---	0
	BI Liability	\$545	-8.0%	(44)
	PD Liability	\$464	10.4%	48
	Medical	\$72	5.2%	4
	Comp	\$324	0.1%	0
	Collision	\$729	3.5%	26
	UM	\$142	-6.6%	(9)
	UIM	\$181	-13.3%	(24)
	Other	\$23	-11.6%	(3)
	All	\$2,480	-0.1%	(2)
25	CSL Liability	\$0	---	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$0	---	0
	Collision	\$0	---	0
	UM	\$0	---	0
	UIM	\$0	---	0
	Other	\$0	---	0
	All	\$0	---	0
26	CSL Liability	\$0	---	0
	BI Liability	\$316	-8.7%	(27)
	PD Liability	\$218	14.8%	32
	Medical	\$37	5.2%	2
	Comp	\$1	-0.5%	0
	Collision	\$2	3.5%	0
	UM	\$61	-6.6%	(4)
	UIM	\$44	-13.3%	(6)
	Other	\$0	---	0
	All	\$679	-0.4%	(3)

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
27	CSL Liability	\$562	0.0%	0
	BI Liability	\$840	-8.6%	(72)
	PD Liability	\$802	11.7%	94
	Medical	\$153	5.2%	8
	Comp	\$730	0.1%	1
	Collision	\$1,474	3.5%	52
	UM	\$167	-6.6%	(11)
	UIM	\$163	-13.3%	(22)
	Other	\$38	-11.6%	(4)
	All	\$4,929	0.9%	46
28	CSL Liability	\$268	0.1%	0
	BI Liability	\$1,760	-8.1%	(143)
	PD Liability	\$1,322	12.6%	167
	Medical	\$176	5.2%	9
	Comp	\$1,033	0.0%	0
	Collision	\$2,082	3.5%	73
	UM	\$299	-6.6%	(20)
	UIM	\$319	-13.3%	(42)
	Other	\$104	-11.6%	(12)
	All	\$7,363	0.4%	32
29	CSL Liability	\$1,522	0.1%	2
	BI Liability	\$1,166	-8.9%	(104)
	PD Liability	\$1,277	10.7%	137
	Medical	\$97	5.2%	5
	Comp	\$935	-0.1%	(1)
	Collision	\$1,725	3.5%	60
	UM	\$340	-6.6%	(22)
	UIM	\$532	-13.3%	(71)
	Other	\$0	---	0
	All	\$7,594	0.1%	6

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008		Estimated Annual Dollar Effect
		Current Level Written Premium	Percent Change	
30	CSL Liability	\$214	0.0%	0
	BI Liability	\$1,831	-8.9%	(163)
	PD Liability	\$1,469	10.9%	160
	Medical	\$232	5.2%	12
	Comp	\$763	0.1%	1
	Collision	\$2,246	3.5%	79
	UM	\$364	-6.6%	(24)
	UIM	\$426	-13.3%	(57)
	Other	\$78	-11.6%	(9)
	All	<u>\$7,623</u>	<u>0.0%</u>	<u>(1)</u>
31	CSL Liability	\$0	---	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$0	---	0
	Collision	\$0	---	0
	UM	\$0	---	0
	UIM	\$0	---	0
	Other	\$0	---	0
	All	<u>\$0</u>	<u>---</u>	<u>0</u>
32	CSL Liability	\$0	---	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$0	---	0
	Collision	\$0	---	0
	UM	\$0	---	0
	UIM	\$0	---	0
	Other	\$0	---	0
	All	<u>\$0</u>	<u>---</u>	<u>0</u>

**ARKANSAS  
PERSONAL AUTO  
EMPLOYERS MUTUAL CASUALTY COMPANY**

**SUMMARY OF CHANGES**

Territory	Coverage	2008 Current Level Written Premium	Percent Change	Estimated Annual Dollar Effect
33	CSL Liability	\$0	---	0
	BI Liability	\$0	---	0
	PD Liability	\$0	---	0
	Medical	\$0	---	0
	Comp	\$0	---	0
	Collision	\$0	---	0
	UM	\$0	---	0
	UIM	\$0	---	0
	Other	\$0	---	0
	All	\$0	---	0

**ARKANSAS  
PERSONAL AUTO  
EMC INSURANCE COMPANIES**

**SUMMARY OF CHANGES**

<b>Coverage</b>	<b>2008 Current Level Written Premium</b>	<b>Percent Change</b>	<b>Estimated Annual Dollar Effect</b>
CSL Liability	\$54,574	0.0%	(\$3)
BI Liability	\$68,000	-8.8%	(\$5,997)
PD Liability	\$57,893	11.4%	\$6,614
<i>Subtotal</i>	<u>\$180,467</u>	<u>0.3%</u>	<u>\$614</u>
Medical	\$11,454	5.0%	\$576
Uninsured Motorists	\$24,881	-6.6%	(\$1,641)
Underinsured Motorists	<u>\$30,772</u>	<u>-13.3%</u>	<u>(\$4,095)</u>
<b>Liability Total</b>	<b>\$247,574</b>	<b>-1.8%</b>	<b>(\$4,546)</b>
Comprehensive	\$55,732	0.0%	\$15
Collision	<u>\$120,734</u>	<u>3.5%</u>	<u>\$4,219</u>
<b>Physical Damage Total</b>	<b>\$176,466</b>	<b>2.4%</b>	<b>\$4,234</b>
Other Coverages	<u>\$3,610</u>	<u>-11.7%</u>	<u>(\$421)</u>
<b>All Coverages Total</b>	<b>\$427,650</b>	<b>-0.2%</b>	<b>(\$733)</b>

SERFF Tracking Number: EMCC-126257785 State: Arkansas  
 First Filing Company: EMCASCO Insurance Company, ... State Tracking Number: EFT \$100  
 Company Tracking Number: AR-PA-2009-03  
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
 Product Name: Personal Auto  
 Project Name/Number: /

## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/24/2009	Supporting Document	APCS-Auto Premium Comparison Survey	08/27/2009	PPA_Survey_FORM_APCS_ EMCASCO.xls (Superceded) PPA_Survey_FORM_APCS_ EMCC.xls (Superceded)
08/06/2009	Supporting Document	APCS-Auto Premium Comparison Survey	08/24/2009	Auto Prem Comp (EMCASCO Ins).xlsm (Superceded) Auto Prem Comp (EMCC Ins).xlsm (Superceded)