



**NOTICE OF EFFECTIVE FILING**

**TO: ISO Distribution List**

**DATE: January 4, 2018**

**FROM: Angel Manus**

**PHONE: 770-671-2353**

**PROGRAM: ISO COMMERCIAL GENERAL LIABILITY**

**ISO CIRCULAR: N/A**

**ISO REFERENCE FILING NUMBER: N/A**

**CONTENTS: ISO Commercial General Liability Loss Cost Multiplier Revision**

**STATE: Ohio**

**EFFECTIVE DATE: March 1, 2018**

**MODIFICATIONS: None**

**COMMENTS: None**

**COMPANY(IES) EFFECTIVE:**

- AIU INSURANCE COMPANY
- AMERICAN HOME ASSURANCE COMPANY
- AIG ASSURANCE COMPANY
- AIG PROPERTY CASUALTY COMPANY
- COMMERCE AND INDUSTRY INSURANCE COMPANY
- GRANITE STATE INSURANCE COMPANY
- ILLINOIS NATIONAL INSURANCE CO.
- NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.
- NEW HAMPSHIRE INSURANCE COMPANY
- THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

**FILING NUMBER: ISO-OH-17-GL-01**

AIG Property Casualty  
State Filings Division  
12 Metrotech Center, 27<sup>th</sup> Floor  
Brooklyn, NY 11201

## Disposition for AGNY-131238065

<b>SERFF Tracking Number:</b>	AGNY-131238065	<b>State:</b>	Ohio
<b>First Filing Company:</b>	American Home Assurance Company ,...	<b>State Tracking Number:</b>	AGNY-131238065
<b>Company Tracking Number:</b>	ISO-OH-17-GL-01		
<b>TOI:</b>	17.0 Other Liability-Occ/Claims Made	<b>Sub-TOI:</b>	17.0001 Commercial General Liability
<b>Product Name:</b>	ISO Commercial General Liability Loss Cost Multiplier 019-000-602,102-000-602,107-000-602,229-000-010,165-000-602,130-000-602		
<b>Project Name:</b>	ISO Commercial General Liability Loss Cost Multiplier		

**Disposition Date:**

01/04/2018

**Effective Date (New):**

03/01/2018

**Effective Date (Renewal):**

03/01/2018

**Status: \***

FILED

**Comments:**

This filing, as submitted or as amended herein, is Approved under Chapter 3935, or Accepted under Chapter 3937, of the Ohio Revised Code.

EFFECTIVE DATES: Our records indicate you did/will implement this filing on the Effective Date(s) shown herein. If the effective dates are incorrect or you need to revise the effective date(s), submit a Post-Submission Update with the revised dates.

PUBLIC RECORD: Since filings become public record as of the effective date, changes of effective date(s) should be submitted PRIOR TO the effective date(s) originally requested.

**Company Rate Information**

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American Home Assurance Company	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %
<b>Change Period for Approved Rate:</b>							
AIU Insurance Company	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %
<b>Change Period for Approved Rate:</b>							
Commerce and Industry	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %

Insurance  
Company

**Change Period for Approved**

**Rate:**

Granite State Insurance Company	12.400 %	7.400 %	\$ 63376	212	\$ 857814	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

Illinois National Insurance Co.	12.400 %	7.400 %	\$ 21763	72	\$ 294574	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

National Union Fire Insurance Company of Pittsburgh, Pa.	12.400 %	7.400 %	\$ 12554	29	\$ 169927	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

New Hampshire Insurance Company	12.400 %	7.400 %	\$ 24573	71	\$ 332595	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

The Insurance Company of the State of Pennsylvania	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

AIG Assurance Company	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

AIG Property Casualty Company	12.400 %	7.400 %	\$ 0	0	\$ 0	8.100 %	4.500 %
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**Change Period for Approved**

**Rate:**

**Overall Rate Information for Multiple Company Filings**

<b>Overall Percentage Rate Indicated For This Filing:</b>	12.400 %
<b>Overall Percentage Rate Impact For This Filing:</b>	7.400 %
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	\$ 122,266
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	384

**Schedule Items**

<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
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Supporting Document	Filing Requirements Summary - P&C	Filed	No
<i>Supporting Document</i>	<i>Filing Requirements Summary - P&amp;C</i>	<i>Superseded/Withdrawn</i>	<i>No</i>
Supporting Document	Supporting Documents	Filed	No
<i>Supporting Document</i>	<i>Supporting Documents</i>	<i>Superseded/Withdrawn</i>	<i>No</i>
Rate	Ohio CompanyException Page_LCM, [No rule/page number]	Filed	No
Rate	Ohio CompanyException Page_ELR, [No rule/page number]	Filed	No



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This filing has post submission updates.

**Ohio**

[View General Instructions](#) [View Filing Log](#)

**Product Name:** ISO Commercial General Liability Loss Cost Multiplier 019-000-602,102-000-602,107-000-602,229-000-010,165-000-602,130-000-602

**SERFF Tr Num:** AGNY-131238065 **SERFF Status:** Closed-FILED

**TOI:** 17.0 Other Liability-Occ/Claims Made

**State Tr Num:** AGNY-131238065 **State Status:** FILED

**Sub-TOI:** 17.0001 Commercial General Liability

**Co Tr Num:** ISO-OH-17-GL-01 **Co Status:**

**Filing Type:** Rate

**Date Submitted:** 10/30/2017 **Disposition Date:** 01/04/2018

**Effective Date Requested (New):** 03/01/2018

**Authors:** Angel Manus

**Effective Date Requested (Renewal):** 03/01/2018

General Information	Form Schedule	Rate/Rule Schedule	Supporting Documentation	State Specific	Companies and Contact	Filing Fees	Filing Correspondence
<b>Add Rate Data?</b> Yes							
<b>Filing Method:</b>							Prior Approval
<b>Rate Change Type:</b>							Increase
<b>Overall Percentage of Last Rate Revision:</b>							7.300 %
<b>Effective Date of Last Rate Revision:</b>							05/01/2017
<b>Filing Method of Last Filing:</b>							Prior Approval
<b>SERFF Tracking Number of Last Filing:</b>							

**Company Rate Information**

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American Home Assurance Company	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %
AIU Insurance Company	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %
Commerce and Industry Insurance Company	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %
Granite State Insurance Company	12.400 %	7.400 %	\$63,376.00	212	\$857,814.00	8.100 %	4.500 %
Illinois National Insurance Co.	12.400 %	7.400 %	\$21,763.00	72	\$294,574.00	8.100 %	4.500 %
National Union Fire Insurance Company of Pittsburgh, Pa.	12.400 %	7.400 %	\$12,554.00	29	\$169,927.00	8.100 %	4.500 %
New Hampshire Insurance Company	12.400 %	7.400 %	\$24,573.00	71	\$332,595.00	8.100 %	4.500 %
The Insurance Company of the State of Pennsylvania	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %
AIG Assurance Company	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %
AIG Property Casualty Company	12.400 %	7.400 %	\$0.00	0	\$0.00	8.100 %	4.500 %

**Overall Rate Information for Multiple Company Filings**

<b>Overall Percentage Rate Indicated For This Filing:</b>	<b>12.400 %</b>
<b>Overall Percentage Rate Impact For This Filing:</b>	<b>7.400 %</b>
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	<b>\$ 122,266</b>
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	<b>384</b>

Item No.	Schedule Item Status	Exhibit Name: *	Rule# or Page #:	Rate Action: *	Previous State Filing Number:	Attach Document:	Submitted:
1	Filed 01/04/2018	Ohio CompanyException Page_LCM		New		<a href="#">Ohio Company Exception Page_LCM.pdf</a>	Date Submitted: 10/30/2017 By: Angel Manus
2	Filed 01/04/2018	Ohio CompanyException Page_ELR		New		<a href="#">Ohio Company Exception Page_LCM.pdf</a>	Date Submitted: 10/30/2017 By: Angel Manus

**Icon Legend:** - Draft Schedule Item - Open Objection

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