



**NOTICE OF EFFECTIVE FILING**

**TO:** ISO Distribution List  
**DATE:** May 10, 2019  
**FROM:** Angel Manus  
**PHONE:** 770-671-2353

**PROGRAM:** COMMERCIAL PROPERTY

**ISO CIRCULAR:** N/A

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

**CONTENTS:** Commercial Property Loss Cost Multiplier Revisions

**INCLUDED**(if applicable)  Company Exception Page\_LCM  Company Exception Page\_ELR

**STATE:** New Jersey

**EFFECTIVE DATE:** October 1, 2019

**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-NJ-19-CP-01

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

## Disposition for AGNY-131894896

|                                 |   |                               |   |
|---------------------------------|---|-------------------------------|---|
| <b>SERFF Tracking Number:</b>   | AGNY-131894896  | <b>State:</b>                 | New Jersey  |
| <b>First Filing Company:</b>    | American Home Assurance Company ,...  | <b>State Tracking Number:</b> | 19-0630   |
| <b>Company Tracking Number:</b> | ISO-NJ-19-CP-01   |                               |   |
| <b>TOI:</b>                     | 01.0 Property   | <b>Sub-TOI:</b>               | 01.0001 Commercial Property (Fire and Allied Lines) |
| <b>Product Name:</b>            | Commercial Property Loss Cost Multiplier Revision 165-000-602;019-000-602;229-000-010;102-000-602;107-000-602;165-640-602;130-000-602 |                               |   |
| <b>Project Name:</b>            | Commercial Property Loss Cost Multiplier Revision   |                               |   |

**Disposition Date:**

05/08/2019

**Effective Date (New):**

10/01/2019

**Effective Date (Renewal):**

10/01/2019

**Status: \***

Processed

**Comments:**

**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         | 0.000 %                     | 0.000 %                | \$ 0                                     | 0   | \$ 0                              | 0.000 %                            | 0.000 %                            |
| <b>Change Period for Approved Rate:</b> |                             |                        |  |   |                                   |                                    |                                    |
| AIU Insurance Company                   | 0.000 %                     | 0.000 %                | \$ 0                                     | 0   | \$ 0                              | 0.000 %                            | 0.000 %                            |
| <b>Change Period for Approved Rate:</b> |                             |                        |  |   |                                   |                                    |                                    |
| Commerce and Industry Insurance Company | 0.000 %                     | 0.000 %                | \$ 0                                     | 0   | \$ 0                              | 0.000 %                            | 0.000 %                            |
| <b>Change Period for Approved Rate:</b> |                             |                        |  |   |                                   |                                    |                                    |
| Granite State Insurance Company         | 27.900 %                    | 9.000 %                | \$ 312680                                | 338   | \$ 3482381                        | 9.000 %                            | 9.000 %                            |
| <b>Change Period for Approved Rate:</b> |                             |                        |  |   |                                   |                                    |                                    |

Illinois National Insurance Co. 27.900 % 9.000 % \$ 1010 5 \$ 11249 9.000 % 9.000 %

**Change Period for Approved**

**Rate:**

National Union Fire Insurance Company of Pittsburgh, Pa. 27.900 % 9.000 % \$ 1470 4 \$ 16370 9.000 % 9.000 %

**Change Period for Approved**

**Rate:**

New Hampshire Insurance Company 27.900 % 9.000 % \$ 53053 138 \$ 590865 9.000 % 9.000 %

**Change Period for Approved**

**Rate:**

The Insurance Company of the State of Pennsylvania 0.000 % 0.000 % \$ 0 0 \$ 0 0.000 % 0.000 %

**Change Period for Approved**

**Rate:**

AIG Property Casualty Company 0.000 % 0.000 % \$ 0 0 \$ 0 0.000 % 0.000 %

**Change Period for Approved**

**Rate:**

**Overall Rate Information for Multiple Company Filings**

|   |            |
|---|------------|
| <b>Overall Percentage Rate Indicated For This Filing:</b>             | 27.900 %   |
| <b>Overall Percentage Rate Impact For This Filing:</b>                | 9.000 %    |
| <b>Effect of Rate Filing-Written Premium Change For This Program:</b> | \$ 368,213 |
| <b>Effect of Rate Filing - Number of Policyholders Affected:</b>      | 485        |

**Schedule Items**

| <b>Item Type</b>    | <b>Item Name</b>   | <b>Item Status</b> | <b>Public Access</b> |
|---------------------|--|--------------------|----------------------|
| Supporting Document | Cover Letter   |                    | Yes                  |
| Supporting Document | Explanatory Memorandum                                       |                    | Yes                  |
| Supporting Document | Side by Side Comparison                                      |                    | Yes                  |
| Supporting Document | Rating Exhibits  |                    | Yes                  |
| Supporting Document | Adoption Forms   |                    | Yes                  |
| Rate                | New Jersey Company Exception Page_LCM, [No rule/page number] |                    | Yes                  |
| Rate                |  |                    | Yes                  |

New Jersey Company Exception Page\_ELR, [No rule/page number]

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Welcome, Angel Manus.  
aigdbglegalstatefilingsny  
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Tracking Number:

|                      |                 |                  |          |               |                  |           |            |
|----------------------|-----------------|------------------|----------|---------------|------------------|-----------|------------|
| Filings              | Messages        | Billing          | Settings | Filing Rules  | Record Retention | Templates | Alerts (3) |
| <b>My Workfolder</b> | My Open Filings | My Draft Filings | Search   | Create Filing | EFT Report       |           |            |

This Filing has been marked as public access.
 This filing has post submission updates.

**New Jersey**

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

**Product Name:** Commercial Property Loss Cost Multiplier Revision 165-000-602;019-000-602;229-000-010;102-000-602;107-000-602;165-640-602;130-000-602

**TOI:** 01.0 Property

**Sub-TOI:** 01.0001 Commercial Property (Fire and Allied Lines)

**Filing Type:** Rate

**Effective Date Requested (New):** 10/01/2019

**Effective Date Requested (Renewal):** 10/01/2019

**SERFF Tr Num:** AGNY-131894896

**SERFF Status:** Closed-Processed

**State Tr Num:** 19-0630

**State Status:** Processed

**Co Tr Num:** ISO-NJ-19-CP-01

**Co Status:**

**Date Submitted:** 04/09/2019

**Disposition Date:** 05/08/2019

**Authors:** Angel Manus

|                     |               |                    |                          |                       |             |                       |
|---------------------|---------------|--------------------|--------------------------|-----------------------|-------------|-----------------------|
| General Information | Form Schedule | Rate/Rule Schedule | Supporting Documentation | Companies and Contact | Filing Fees | Filing Correspondence |
|---------------------|---------------|--------------------|--------------------------|-----------------------|-------------|-----------------------|

The rate schedule has been marked public access.

**Add Rate Data?** Yes

|  |                |
|--|----------------|
| <b>Filing Method:</b>                            | Prior Approval |
| <b>Rate Change Type:</b>                         | Increase       |
| <b>Overall Percentage of Last Rate Revision:</b> | 9.000 %        |
| <b>Effective Date of Last Rate Revision:</b>     | 10/29/2018     |
| <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                          | 0.000 %                     | 0.000 %                | \$0.00                                   | 0   | \$0.00                            | 0.000 %                            | 0.000 %                            |
| AIU Insurance Company                                    | 0.000 %                     | 0.000 %                | \$0.00                                   | 0   | \$0.00                            | 0.000 %                            | 0.000 %                            |
| Commerce and Industry Insurance Company                  | 0.000 %                     | 0.000 %                | \$0.00                                   | 0   | \$0.00                            | 0.000 %                            | 0.000 %                            |
| Granite State Insurance Company                          | 27.900 %                    | 9.000 %                | \$312,680.00                             | 338   | \$3,482,381.00                    | 9.000 %                            | 9.000 %                            |
| Illinois National Insurance Co.                          | 27.900 %                    | 9.000 %                | \$1,010.00                               | 5   | \$11,249.00                       | 9.000 %                            | 9.000 %                            |
| National Union Fire Insurance Company of Pittsburgh, Pa. | 27.900 %                    | 9.000 %                | \$1,470.00                               | 4   | \$16,370.00                       | 9.000 %                            | 9.000 %                            |
| New Hampshire Insurance Company                          | 27.900 %                    | 9.000 %                | \$53,053.00                              | 138   | \$590,865.00                      | 9.000 %                            | 9.000 %                            |
| The Insurance Company of the State of Pennsylvania       | 0.000 %                     | 0.000 %                | \$0.00                                   | 0   | \$0.00                            | 0.000 %                            | 0.000 %                            |
| AIG Property Casualty Company                            | 0.000 %                     | 0.000 %                | \$0.00                                   | 0   | \$0.00                            | 0.000 %                            | 0.000 %                            |

**Overall Rate Information for Multiple Company Filings**

|   |                   |
|---|-------------------|
| <b>Overall Percentage Rate Indicated For This Filing:</b>             | <b>27.900 %</b>   |
| <b>Overall Percentage Rate Impact For This Filing:</b>                | <b>9.000 %</b>    |
| <b>Effect of Rate Filing-Written Premium Change For This Program:</b> | <b>\$ 368,213</b> |
| <b>Effect of Rate Filing - Number of Policyholders Affected:</b>      | <b>485</b>        |

| Item No. | Schedule Item Status | Exhibit Name: *                       | Rule# or Page #: | Rate Action: * | Previous State Filing Number: | Attach Document:  | Submitted:                                    |
|----------|----------------------|---------------------------------------|------------------|----------------|-------------------------------|---|---|
| 1        |                      | New Jersey Company Exception Page_LCM |                  | New            |                               | <a href="#">New Jersey Company Exception Page_LCM.pdf</a> | Date Submitted: 04/09/2019<br>By: Angel Manus |
| 2        |                      | New Jersey Company Exception Page_ELR |                  | New            |                               | <a href="#">New Jersey Company Exception Page_ELR.pdf</a> | Date Submitted: 04/09/2019<br>By: Angel Manus |

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

|                             |                        |                                 |                                    |                              |                              |
|-----------------------------|------------------------|---------------------------------|------------------------------------|------------------------------|------------------------------|
| <a href="#">Add Authors</a> | <a href="#">Update</a> | <a href="#">Create Reminder</a> | <a href="#">Move to Workfolder</a> | <a href="#">PDF Pipeline</a> | <a href="#">Clone Filing</a> |
|-----------------------------|------------------------|---------------------------------|------------------------------------|------------------------------|------------------------------|

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