



**NOTICE OF EFFECTIVE FILING**

**TO:** ISO  
**DATE:** November 4, 2019  
**FROM:** Angel Manus  
**PHONE:** 770-671-2353

**PROGRAM:** ISO COMMERCIAL GENERAL LIABILITY

**ISO CIRCULAR:** LI-GL-2019-046

**ISO REFERENCE FILING NUMBER:** GL-2019-BGL1

**CONTENTS:** Delay Adoption of ISO's Commercial General Liability Loss Cost Revision

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

**STATE:** Rhode Island

**EFFECTIVE DATE:** January 27, 2020

**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-RI-19-GL-02

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

## Disposition for AGNY-132125852

<b>SERFF Tracking Number:</b>	AGNY-132125852	<b>State:</b>	Rhode Island
<b>First Filing Company:</b>	American Home Assurance Company ,...	<b>State Tracking Number:</b>	
<b>Company Tracking Number:</b>	ISO-RI-18-GL-02		
<b>TOI:</b>	17.0 Other Liability-Occ/Claims Made	<b>Sub-TOI:</b>	17.0001 Commercial General Liability
<b>Product Name:</b>	Delay Adoption ISO's Commercial General Liability Loss Costs 165000602;01900002;229000010;102000602;107000602;130000602		
<b>Project Name:</b>	Delay Adoption ISO's Commercial General Liability Loss Costs		

**Disposition Date:**

11/01/2019

**Effective Date (New):**

01/27/2020

**Effective Date (Renewal):**

01/27/2020

**Status:** \*

(02) Approved

**Comments:**

Company Rate Information							
<b>Company Name:</b>	<b>Overall % Indicated Change:</b>	<b>Overall % Rate Impact:</b>	<b>Written Premium Change for this Program:</b>	<b>Number of Policy Holders Affected for this Program:</b>	<b>Written Premium for this Program:</b>	<b>Maximum % Change (where required):</b>	<b>Minimum % Change (where required):</b>
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	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %

**Change Period for Approved****Rate:**

Illinois National Insurance Co.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
---------------------------------	---------	---------	------	---	------	---------	---------

**Change Period for Approved****Rate:**

National Union Fire Insurance Company of Pittsburgh, Pa.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
--	---------	---------	------	---	------	---------	---------

**Change Period for Approved****Rate:**

New Hampshire Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
---------------------------------	---------	---------	------	---	------	---------	---------

**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 Assurance Company	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>	0.000 %
<b>Overall Percentage Rate Impact For This Filing:</b>	0.000 %
<b>Effect of Rate Filing-Written Premium Change For This Program:</b>	\$ 0
<b>Effect of Rate Filing - Number of Policyholders Affected:</b>	0

**Schedule Items**

<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
Supporting Document	Actuarial Support- RI Rate Procedural Informational Summary Form required for all New (including startups) and revisions to existing rates		Yes