



**NOTICE OF EFFECTIVE FILING**

**TO: ISO Distribution List**  
**DATE: August 17, 2020**  
**FROM: Milinda Tanner**  
**PHONE: 770-870-2420**

**PROGRAM: ISO COMMERCIAL AUTOMOBILE**

**ISO CIRCULAR: LI-CA-2020-114; LI-CA-2016-171**

**ISO REFERENCE FILING NUMBER: CA-2015-ROCP1; CA-2020-BRLB1**

**CONTENTS: Adoption of ISO's Commercial Auto Optional Class Plan**

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

**STATE: OKLAHOMA**

**EFFECTIVE DATE: April 1, 2021**

**MODIFICATIONS: None**

**COMMENTS: Revisions do not apply to Glatfelter Programs**

**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-OK-20-CA-02**

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

# Disposition for AGNY-132496121

## Filing at a Glance

<b>State:</b> Oklahoma	<b>SERFF Tracking Number:</b> AGNY-132496121
<b>TOI:</b> 20.0 Commercial Auto	<b>State Tracking Number:</b> AGNY-132496121
<b>Sub-TOI:</b> 20.0000 Commercial Auto Combinations	<b>Company Tracking Number:</b> ISO-OK-20-CA-02
<b>Filing Type:</b> Rate	<b>Product Name:</b> Adoption of ISO's Commercial Auto Optional Class Plan-1650-000-602, 019-000-602, 229-000-010, 102-000-602, 107-000-602, 130-000-602
<b>First Filing Company:</b> American Home Assurance Company ,...	<b>Project Name:</b> Adoption of ISO's Commercial Auto Optional Class Plan
	<b>Destruction Date:</b>

**Disposition Date:**

08/18/2020

**Effective Date (New):**

04/01/2021

**Effective Date (Renewal):**

04/01/2021

**Status:** \*

Filed

**Comments:**

FILED: Applicable to the Property and Casualty Loss Cost Rating Act, stamp filed documents pursuant to 36 O.S. Section 981 et al.

**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 %

**Change Period for Approved Rate:**

AIU Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved Rate:**

Commerce and Industry Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

Granite State Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

National Union Fire Insurance Company of Pittsburgh, Pa.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

New Hampshire Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

The Insurance Company of the State of Pennsylvania	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

AIG Assurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

AIG Property Casualty Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
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**Change Period for Approved  
Rate:**

Illinois National Insurance Co.	%	%	\$		\$	%	%
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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>	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	Checklist	No Action Taken	No
Supporting Document	Filing Factors Title 36 O.S. Section 985	No Action Taken	No
Supporting Document	Form A-2 Revised OK Rate Exhibit	No Action Taken	No
Supporting Document	Large Risk Exemption	No Action Taken	No
Supporting Document	Oklahoma Countrywide Five Year Experience And Expense Exhibit	No Action Taken	No
Supporting Document	"A" Rate Certification	No Action Taken	No
Supporting Document	Rule 365:15-7-3(b)(10)(D)	No Action Taken	No
Supporting Document	Rule 365:15-7-3(b)(10)(E)	No Action Taken	No
Supporting Document	Third Party Authorization	No Action Taken	No
Supporting Document	OK Auto Actuarial Memo	No Action Taken	No
Supporting Document	OKLCF-1	No Action Taken	No