



**NOTICE OF EFFECTIVE FILING**

**TO: ISO Distribution List**  
**DATE: February 2, 2021**  
**FROM: Milinda Tanner**  
**PHONE: 770-870-2420**

**PROGRAM: ISO COMMERCIAL AUTOMOBILE**

**ISO CIRCULAR: LI-CA-2020-426**

**ISO REFERENCE FILING NUMBER: CA-2019-ROCP1**

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

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

**STATE: Oregon**

**EFFECTIVE DATE: June 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-OR-21-CA-01**

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

## Disposition for AGNY-132680792

### Filing at a Glance

<b>State:</b> Oregon	<b>SERFF Tracking Number:</b> AGNY-132680792
<b>TOI:</b> 20.0 Commercial Auto	<b>State Tracking Number:</b> ISO-D AGNY-132680792
<b>Sub-TOI:</b> 20.0000 Commercial Auto Combinations	<b>Company Tracking Number:</b> ISO-OR-21-CA-01
<b>Filing Type:</b> Rule	<b>Product Name:</b> ISO Delay Adopt of Commercial Auto Optional Class Plan Rule Revisions 165-000- 602,019-000-602, 229-000-010,102-000-602, 107-000-602, 165-640-602, 130-000-602
<b>First Filing Company:</b> American Home Assurance Company ,...	<b>Project Name:</b> ISO Delay Adopt of Commercial Auto Optional Class Plan Rule Revisions
	<b>Destruction Date:</b>

**Disposition Date:**

01/28/2021

**Effective Date (New):**

06/01/2021

**Effective Date (Renewal):**

06/01/2021

**Status:** \*

Filed as information

**Comments:**

ISO has commercial auto form and rule filing authority for all companies; they participate for loss costs. Delayed adoption of rule ref CA-2019-ROCP1.

**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 %

**Change Period for Approved Rate:**

Commerce and Industry Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
---	---------	---------	------	---	------	---------	---------

**Change Period for Approved Rate:**

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	Cover Letter or Explanatory Memorandum	Not Applicable to filing	Yes
Supporting Document	Third party filers letter of authorization	Not Applicable to filing	Yes
Supporting Document	3894 Certification of Compliance	Reviewed-No Action	Yes
Supporting Document	3609 Standards for Motor Vehicle Rates and Rules	Not Applicable to filing	Yes
Supporting Document	3615 Standards for Motor Vehicle	Not Applicable to filing	Yes
Supporting Document	3615A Standards for Motor Vehicle Applications, if only filing an application	Not Applicable to filing	Yes
Supporting Document	3607 Histogram	Not Applicable to filing	Yes