



NOTICE OF EFFECTIVE FILING

TO: ISO

DATE: January 25, 2023

FROM: Milinda Tanner

COMPANY FILING NUMBER: ISO-GA-22-CR-01 **STATE:** Georgia **EFFECTIVE DATE:** May 1, 2023

TOI: 26.0 Burglary & Theft / **SUB-TOI:** 26.0001 Commercial Burglary & Theft

TOI: 23.0 Fidelity / **SUB-TOI:** 23.0000 Fidelity

☐ **FORM** ☐ **RULE** ☒ **RATE**

INCLUDED (if applicable) ☒ **Company Exception Page_LCM** ☒ **Company Exception Page_ELR**

PROGRAM: Commercial Burglary & Theft / Fidelity

CONTENTS INCLUDE: Loss Cost Multipliers and Expected Loss Ratios

MODIFICATIONS: NONE

COMMENTS: NONE

COMPANY(IES) FILED:

- ☒ AIG ASSURANCE COMPANY
 - ☒ AIG PROPERTY CASUALTY COMPANY
 - ☒ AIU INSURANCE COMPANY
 - ☒ AMERICAN HOME ASSURANCE COMPANY
 - ☒ COMMERCE AND INDUSTRY INSURANCE COMPANY
 - ☒ GRANITE STATE INSURANCE COMPANY
 - ☒ ILLINOIS NATIONAL INSURANCE CO. (FILED FOR CRIME ONLY / NOT LICENSED FOR FIDELITY)
 - ☒ NEW HAMPSHIRE INSURANCE COMPANY
 - ☒ THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
-

Disposition for AGNY-133504755

| Filing at a Glance | |
|--|---|
| State: Georgia | SERFF Tracking Number: AGNY-133504755 |
| TOI: 26.0 Burglary and Theft | State Tracking Number: |
| Sub-TOI: 26.0001 Commercial Burglary and Theft | Company Tracking Number: ISO-GA-22-CR-01 |
| Filing Type: Rate/Rule other than PPA | Product Name: Commercial Crime and Fidelity Loss Cost Multiplier-165-000-602, 019-000-602, 229-000- 010, 102-000-602, 107-000-602, 130-000-602 |
| First Filing Company: American Home Assurance Company ,... | Project Name: Commercial Crime and Fidelity Loss Cost Multiplier |
| | Destruction Date: |

Disposition Date:
01/25/2023

Effective Date (New):
05/01/2023

Effective Date (Renewal):
05/01/2023

Status: *
Acknowledged

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 % |
| Change Period for Approved Rate: | | | | | | | |
| 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 | -15.100 % | -27.300 % | \$ -461 | 1 | \$ 1686 | -27.300 % | -27.300 % |
|---------------------------------------|-----------|-----------|---------|---|---------|-----------|-----------|

**Change Period for Approved
Rate:**

| | | | | | | | |
|---------------------------------------|-----------|-----------|---------|---|--------|-----------|-----------|
| Illinois National Insurance Co. | -15.100 % | -27.300 % | \$ -198 | 1 | \$ 726 | -27.300 % | -27.300 % |
|---------------------------------------|-----------|-----------|---------|---|--------|-----------|-----------|

**Change Period for Approved
Rate:**

| | | | | | | | |
|--|-----------|-----------|---------|---|--------|-----------|-----------|
| New Hampshire Insurance Company | -15.100 % | -27.300 % | \$ -180 | 1 | \$ 659 | -27.300 % | -27.300 % |
|--|-----------|-----------|---------|---|--------|-----------|-----------|

**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

| | |
|---|-----------|
| Overall Percentage Rate Indicated For This Filing: | -15.100 % |
| Overall Percentage Rate Impact For This Filing: | -27.300 % |
| Effect of Rate Filing-Written Premium Change For This Program: | \$ -839 |
| Effect of Rate Filing - Number of Policyholders Affected: | 3 |

| Schedule Items | | | |
|---------------------|---|-------------|---------------|
| Item Type | Item Name | Item Status | Public Access |
| Rate | Georgia Company Exception Page_LCM_Crime, 1 | | Yes |
| Rate | Georgia Company Exception Page_ELR_Crime, 1 | | Yes |
| Supporting Document | A. Filing Compliance Certification | | Yes |
| Supporting Document | Filing Fee Transmittal Form | | Yes |
| Supporting Document | C. Third Party Filing Authorization Certification | | Yes |
| Supporting Document | E. Rate Indication Summary/Histogram Exhibit | | Yes |
| Supporting Document | F0R. Explanatory Memorandum - Rate/Rule | | Yes |
| Supporting Document | G. Overall Rate Level Effect | | Yes |
| Supporting Document | H0E. Data and Calculations-Except PPA, Homeowners, and Workers Comp | | Yes |
| Supporting Document | J0E. Loss Cost Multiplier Form-except personal automobile, homeowners' and workers' comp | | Yes |
| Supporting Document | I. Data and Calculations-New Programs, Introduction of Rates or Rating Variables, New Coverages, etc. | | Yes |
| Supporting Document | M0R. Rule Comparison | | Yes |
| Supporting Document | K.1. Proprietary and Confidential Information | | Yes |

Sincerely,
Dylan Reece



aigdbglegalstatefi

Tracking Number:

| | | | | | | | |
|---------------|-----------------|------------------|----------|---------------|---------------------|-----------|------------|
| Filings | Messages | Billing | Settings | Filing Rules | Reports | Templates | Alerts (9) |
| My Workfolder | My Open Filings | My Draft Filings | Search | Create Filing | Create Paper Filing | | |

| | | | | | |
|-------------|--------|---------------------|-----------------|--------------------|--------------|
| Add Authors | Update | Compare Attachments | Create Reminder | Move to Workfolder | PDF Pipeline |
|-------------|--------|---------------------|-----------------|--------------------|--------------|

[View Associated Filings](#) [View General Instructions](#)

This Filing has been marked as public access.

Product Name: Commercial Crime and Fidelity Loss Cost
Multiplier-165-000-602, 019-000-602, 229-000- 010, 102-000-602, 107-000-602, 130-000-602

TOI: 26.0 Burglary and Theft

Sub-TOI: 26.0001 Commercial Burglary and Theft

Filing Type: Rate/Rule other than PPA

Effective Date Requested (New): 05/01/2023

Effective Date Requested (Renewal): 05/01/2023

SERFF Tr Num: AGNY-133504755

State Tr Num:

Co Tr Num: ISO-GA-22-CR-01

Date Submitted: 12/27/2022

Authors: Angel Manus, Milinda Tanner

SERFF Status: Closed-Acknowledged

State Status: Acknowledged

Co Status:

Disposition Date: 01/25/2023

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

The rate schedule has been marked public access.

Add Rate Data? Rate Data is Required

| | |
|--|----------------|
| Filing Method: | Prior Approval |
| Rate Change Type: | Decrease |
| Overall Percentage of Last Rate Revision: | -25.000 % |
| Effective Date of Last Rate Revision: | 06/01/2014 |
| Filing Method of Last Filing: | Prior Approval |
| SERFF Tracking Number of Last Filing: | |

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 (where r |
|--|-----------------------------|------------------------|--|---|-----------------------------------|------------------------------------|------------------|
| 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 | -15.100 % | -27.300 % | (\$461.00) | 1 | \$1,686.00 | -27.300 % | -27.300 % |
| Illinois National Insurance Co. | -15.100 % | -27.300 % | (\$198.00) | 1 | \$726.00 | -27.300 % | -27.300 % |
| New Hampshire Insurance Company | -15.100 % | -27.300 % | (\$180.00) | 1 | \$659.00 | -27.300 % | -27.300 % |
| The Insurance Company of the State of Pennsylvania | 0.000 % | 0.000 % | \$0.00 | 0 | \$0.00 | 0.000 % | 0.000 % |
| AIG Assurance Company | 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

| | |
|---|------------------|
| Overall Percentage Rate Indicated For This Filing: | -15.100 % |
| Overall Percentage Rate Impact For This Filing: | -27.300 % |
| Effect of Rate Filing-Written Premium Change For This Program: | \$ -839 |
| Effect of Rate Filing - Number of Policyholders Affected: | 3 |

| Item No. | Schedule Item Status | Exhibit Name: * | Rule# or Page #: | Rate Action: * | Previous State Filing Number: | Attach Document: | Submitted: |
|----------|----------------------|--|------------------|----------------|-------------------------------|--|----------------------------------|
| 1 | | Georgia Company Exception Page_LCM_Crime | 1 | New | | Indiana Company Exception Page_LCM_Crime.pdf | Date Subm 12/27/202: By: Milinda |
| 2 | | Georgia Company Exception Page_ELR_Crime | 1 | New | | Indiana Company Exception Page_ELR_Crime.pdf | Date Subm 12/27/202: By: Milinda |

Icon Legend: - Draft Schedule Item - Open Objection

Add Authors

Update

Compare Attachments

Create Reminder

Move to Workfolder

PDF Pipeline

Disposition for AGNY-133504781

| Filing at a Glance | |
|--|---|
| State: Georgia | SERFF Tracking Number: AGNY-133504781 |
| TOI: 23.0 Fidelity | State Tracking Number: |
| Sub-TOI: 23.0000 Fidelity | Company Tracking Number: ISO-GA-22-CR-01 |
| Filing Type: Rate/Rule other than PPA | Product Name: Commercial Crime and Fidelity Loss Cost Multiplier-165-000-602, 019-000-602, 229- 000- 010, 102-000-602, 107-000-602, 130- 000-602 |
| First Filing Company: American Home Assurance Company ,... | Project Name: Commercial Crime and Fidelity Loss Cost Multiplier |
| | Destruction Date: |

Disposition Date:
01/17/2023

Effective Date (New):
05/01/2023

Effective Date (Renewal):
05/01/2023

Status: *
Acknowledged

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 % |

Change Period for Approved Rate:

| | | | | | | | |
|-----------------------|---------|---------|------|---|------|---------|---------|
| 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:**

| | | | | | | | |
|--|---------|---------|------|---|------|---------|---------|
| 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

| | |
|---|---------|
| Overall Percentage Rate Indicated For This Filing: | 6.200 % |
|---|---------|

| | |
|--|---------|
| Overall Percentage Rate Impact For This Filing: | 0.000 % |
|--|---------|

| | |
|---|------|
| Effect of Rate Filing-Written Premium Change For This Program: | \$ 0 |
|---|------|

| | |
|--|---|
| Effect of Rate Filing - Number of Policyholders Affected: | 0 |
|--|---|

| Schedule Items | | | |
|---------------------|---|----------------|---------------|
| Item Type | Item Name | Item Status | Public Access |
| Rate | Georgia Company Exception Page_LCM_Fidelity, 1 | Reviewed | Yes |
| Rate | Georgia Company Exception Page_ELR_Fidelity, 1 | Reviewed | Yes |
| Supporting Document | A. Filing Compliance Certification | Reviewed | Yes |
| Supporting Document | Filing Fee Transmittal Form | Reviewed | Yes |
| Supporting Document | C. Third Party Filing Authorization Certification | Not Applicable | Yes |
| Supporting Document | E. Rate Indication Summary/Histogram Exhibit | Reviewed | Yes |
| Supporting Document | F0R. Explanatory Memorandum - Rate/Rule | Reviewed | Yes |
| Supporting Document | G. Overall Rate Level Effect | Reviewed | Yes |
| Supporting Document | H0E. Data and Calculations-Except PPA, Homeowners, and Workers Comp | Reviewed | Yes |
| Supporting Document | J0E. Loss Cost Multiplier Form-except personal automobile, homeowners' and workers' comp | Reviewed | Yes |
| Supporting Document | I. Data and Calculations-New Programs, Introduction of Rates or Rating Variables, New Coverages, etc. | Not Applicable | Yes |
| Supporting Document | M0R. Rule Comparison | Not Applicable | Yes |
| Supporting Document | K.1. Proprietary and Confidential Information | Not Applicable | Yes |

Sincerely,
Joe Murphy



aigdbglegalstatefi

Tracking Number:

| | | | | | | | |
|---------------|-----------------|------------------|----------|---------------|---------------------|-----------|------------|
| Filings | Messages | Billing | Settings | Filing Rules | Reports | Templates | Alerts (9) |
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| | | | | | |
|-------------|--------|---------------------|-----------------|--------------------|--------------|
| Add Authors | Update | Compare Attachments | Create Reminder | Move to Workfolder | PDF Pipeline |
|-------------|--------|---------------------|-----------------|--------------------|--------------|

[View Associated Filings](#) [View General Instructions](#)

This Filing has been marked as public access.

Product Name: Commercial Crime and Fidelity Loss Cost
Multiplier-165-000-602, 019-000-602, 229-000- 010, 102-000-602, 107-000-602, 130-000-602

TOI: 23.0 Fidelity

Sub-TOI: 23.0000 Fidelity

Filing Type: Rate/Rule other than PPA

Effective Date Requested (New): 05/01/2023

Effective Date Requested (Renewal): 05/01/2023

SERFF Tr Num: AGNY-133504781

State Tr Num:

Co Tr Num: ISO-GA-22-CR-01

Date Submitted: 12/27/2022

Authors: Angel Manus, Milinda Tanner

SERFF Status: Closed-Acknowledged

State Status: Acknowledged

Co Status:

Disposition Date: 01/17/2023

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

The rate schedule has been marked public access.

Add Rate Data? Rate Data is Required

Filing Method: Prior Approval

Rate Change Type: Neutral

Overall Percentage of Last Rate Revision: -10.000 %

Effective Date of Last Rate Revision: 06/01/2014

Filing Method of Last Filing: Prior Approval

SERFF Tracking Number of Last Filing:

| 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 (where r |
| 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 | 0.000 % | 0.000 % | \$0.00 | 0 | \$0.00 | 0.000 % | 0.000 % |
| New Hampshire Insurance Company | 0.000 % | 0.000 % | \$0.00 | 0 | \$0.00 | 0.000 % | 0.000 % |
| The Insurance Company of the State of Pennsylvania | 0.000 % | 0.000 % | \$0.00 | 0 | \$0.00 | 0.000 % | 0.000 % |
| AIG Assurance Company | 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 | |
|---|----------------|
| Overall Percentage Rate Indicated For This Filing: | 6.200 % |
| Overall Percentage Rate Impact For This Filing: | 0.000 % |
| Effect of Rate Filing-Written Premium Change For This Program: | \$ 0 |
| Effect of Rate Filing - Number of Policyholders Affected: | 0 |

| Item No. | Schedule Item Status | Exhibit Name: * | Rule# or Page #: | Rate Action: * | Previous State Filing Number: | Attach Document: | Submitted |
|----------|------------------------|---|------------------|----------------|-------------------------------|---|---------------------------------------|
| 1 | Reviewed 01/17/2023 | Georgia Company Exception Page_LCM_Fidelity | 1 | New | | Georgia Company Exception Page_LCM_Fidelity.pdf | Date Subr 12/27/202 By: Milinda |
| 2 | Reviewed 01/17/2023 | Georgia Company Exception Page_ELR_Fidelity | 1 | New | | Georgia Company Exception Page_ELR_Fidelity.pdf | Date Subr 12/27/202 By: Milinda |

Icon Legend: - Draft Schedule Item - Open Objection

| | | | | | | |
|-------------|--------|---------------------|-----------------|--------------------|--------------|--|
| Add Authors | Update | Compare Attachments | Create Reminder | Move to Workfolder | PDF Pipeline | |
|-------------|--------|---------------------|-----------------|--------------------|--------------|--|