



NOTICE OF EFFECTIVE FILING

TO: PROGRAMS DIVISION 66
Kathleen Ott
DATE: February 12, 2018
FROM: Angela Caraballo
PHONE: 718 250-1732

PROGRAM: COMMERCIAL PROPERTY
Form attaches to the following ISO's Coverage Forms:
Building and Personal Property Coverage Form – CP 00 10
Business Income (And Extra Expense) Coverage Form – CP 00 30
Causes of Loss – Special Form – CP 10 30

CONTENTS: Property Program PerformanceSM Endorsement – 121895 (10/17)

Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page –
Property Program Performance Endorsement - DIV-CP-CW-RU (10/17)

STATE: COLORADO

EFFECTIVE DATE: August 1, 2018

MODIFICATIONS: None

COMMENTS: The related endorsement is exempt from filing pursuant to CCR 702 Reg. 1-1-6 § 3 and 3 CCR 702 Reg. 5-1-13 § 4.

COMPANY(IES) EFFECTIVE:

- GRANITE STATE INSURANCE COMPANY
- ILLINOIS NATIONAL INSURANCE CO.
- NEW HAMPSHIRE INSURANCE COMPANY

FILING NUMBER: AIG-17-CP-11



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Tracking Number:

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Colorado

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Product Name: Commercial Property / 151-640-288

SERFF Tr Num: AGNY-131259501

SERFF Status: Closed-Filed

TOI: 01.0 Property

State Tr Num: 315354

State Status: Filed

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

Co Tr Num: AIG-17-CP-11

Co Status:

Filing Type: Rule

Date Submitted: 11/14/2017

Disposition Date: 02/12/2018

Effective Date Requested (New): 08/01/2018

Authors: Angela Caraballo

Effective Date Requested (Renewal): 08/01/2018

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? Yes							
Filing Method:							File and Use
Rate Change Type:							Neutral
Overall Percentage of Last Rate Revision:							%
Effective Date of Last Rate Revision:							
Filing Method of Last Filing:							N/A - New Endorsement
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 % (where requ
Granite State Insurance Company	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %
Illinois National Insurance Co.	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %
New Hampshire Insurance Company	0.000 %	0.000 %	\$0.00	0	\$0.00	0.000 %

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing:

Overall Percentage Rate Impact For This Filing:

Effect of Rate Filing-Written Premium Change For This Program:

Effect of Rate Filing - Number of Policyholders Affected:

Item No.	Schedule Item Status	Exhibit Name: *	Rule# or Page #:	Rate Action: *	Previous State Filing Number:	Attach Docum
1		Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page - Property Program Performance Endorsement	DIV-CP-CW-RU (10/17)	New		 DIV-CP-17) Exce Property

Icon Legend:  - Draft Schedule Item  - Open Objection

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Disposition for AGNY-131259501

SERFF Tracking Number:	AGNY-131259501	State:	Colorado
First Filing Company:	Granite State Insurance Company ,...	State Tracking Number:	315354
Company Tracking Number:	AIG-17-CP-11		
TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
Product Name:	Commercial Property / 151-640-288		
Project Name:	Property Program Performance Endorsement		

Disposition Date:

02/12/2018

Effective Date (New):

Effective Date (Renewal):

Status: *

Filed

Comments:

The Colorado Division of Insurance has closed this submission as FILED.

Please note Rule filings with rate/premium impact including factors and surcharges that impact premium as well as initial filings need to be submitted as Rate/Rule if they are not loss cost filing. Rate filings which include rate, rate/rule and loss cost filings need the Form A(s) completed for items 1-18 including expenses and supporting documentation.

Additionally when referencing filing(s) as support/justification for the charges, please provide the Colorado SERFF tracking number(s) and the State Tracking number not just a Company tracking number.

Please reference Amended Regulation 5-1-10 for Rate and Rule Filing Submission Requirements.

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):
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:							

New Hampshire Insurance 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:	0.000 %
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
Supporting Document	Colorado Rate/Rule Form A		Yes
Supporting Document	Explanatory Memo		Yes
Supporting Document	Coverage Comparison		Yes
Rate	Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page - Property Program Performance Endorsement, DIV-CP-CW-RU (10/17)		Yes