



## NOTICE OF EFFECTIVE FILING

**TO:** PROGRAMS DIVISION 66  
Kathleen Ott  
**DATE:** January 5, 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 Performance<sup>SM</sup> 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:** ALASKA

**EFFECTIVE DATE:** August 1, 2018

**MODIFICATIONS:** MUST USE  
Property Program Performance Endorsement - Alaska - 121955 (1/18)

**COMMENTS:** None

**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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**Alaska**
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**Product Name:** Commercial Property / 151-640-288**SERFF Tr Num:** AGNY-131259457**SERFF Status:** Closed-Approved**TOI:** 01.0 Property**State Tr Num:** AGNY-131259457**State Status:****Sub-TOI:** 01.0001 Commercial Property (Fire and Allied Lines)**Co Tr Num:** AIG-17-CP-11**Co Status:****Filing Type:** Form**Date Submitted:** 11/21/2017**Disposition Date:** 01/04/2018**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		
Form Count: 1											
Item No.	Schedule Item Status	Form Name *	Form Number	Edition Date	Form Type *	Action *	Action Specific Data	Readability Score	Attachments	Submitted	
1		Property Program Performance Endorsement - Alaska	121955	(1/18)	END	New		0	 <a href="#">121955 (1-18) AK Property Program Performance Endorsement.pdf</a>	Date Submitted: 01/04/2018 By: Angela Caraballo	
Previous Version											
		Property Program Performance Endorsement	121895	(10/17)	END	New		0	 <a href="#">121895 (10-17) Property Program Performance Endorsement.docx.pdf</a>	Date Submitted: 11/21/2017 By: Angela Caraballo	
Form Type Legend:											
<ul style="list-style-type: none"><li>• <b>ADV</b> = Advertising</li><li>• <b>BND</b> = Bond</li><li>• <b>CER</b> = Certificate</li><li>• <b>DSC</b> = Disclosure/Notice</li><li>• <b>END</b> = Endorsement/Amendment/Conditions</li><li>• <b>PCF</b> = Policy/Coverage Form</li></ul>						<ul style="list-style-type: none"><li>• <b>ABE</b> = Application/Binder/Enrollment</li><li>• <b>CNR</b> = Canc/NonRen Notice</li><li>• <b>DEC</b> = Declarations/Schedule</li><li>• <b>ERS</b> = Election/Rejection/Supplemental Applications</li><li>• <b>OTH</b> = Other</li></ul>					
<div>Icon Legend:  - Draft Schedule Item  - Open Objection</div>											

## Disposition for AGNY-131259457

<b>SERFF Tracking Number:</b>	AGNY-131259457	<b>State:</b>	Alaska
<b>First Filing Company:</b>	Granite State Insurance Company ,...	<b>State Tracking Number:</b>	AGNY-131259457
<b>Company Tracking Number:</b>	AIG-17-CP-11		
<b>TOI:</b>	01.0 Property	<b>Sub-TOI:</b>	01.0001 Commercial Property (Fire and Allied Lines)
<b>Product Name:</b>	Commercial Property / 151-640-288		
<b>Project Name:</b>	Property Program Performance Endorsement		

**Disposition Date:**

01/04/2018

**Effective Date (New):**

08/01/2018

**Effective Date (Renewal):**

08/01/2018

**Status:** \*

Approved

**Comments:**

If you would like to change the effective date, please submit a revised effective date via e-mail to insurance@alaska.gov. The subject line should include the tracking number and the name of the Primary Reviewer assigned to review the filing. A request to change the effective date must be received by the division prior to the effective date noted above.

**Schedule Items**

Item Type	Item Name	Item Status	Public Access
Supporting Document	P&C Checklist		No
Supporting Document	Certification Form		No
Supporting Document	Explanatory Info - Forms		No
Supporting Document	Marked Copy		No
Supporting Document	Third Party Authorization		No
Supporting Document	Forms Listing		No
Supporting Document	Side by Side Comparison		No
Form	121955, (1/18), Endorsement/Amendment/Conditions, Property Program Performance Endorsement - Alaska		No
Form	121895, (10/17), Endorsement/Amendment/Conditions, Property Program Performance Endorsement		No

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**Alaska**
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**Product Name:** Commercial Property / 151-640-288**SERFF Tr Num:** AGNY-131259458**SERFF Status:** Closed-Authorized**TOI:** 01.0 Property**State Tr Num:** AGNY-131259458**State Status:****Sub-TOI:** 01.0001 Commercial Property (Fire and Allied Lines)**Co Tr Num:** AIG-17-CP-11**Co Status:****Filing Type:** Rule**Date Submitted:** 11/21/2017**Disposition Date:** 12/14/2017**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	
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 % Change (where required):	Minimum % Change (where required):
Granite State Insurance Company	0.000 %	0.000 %	\$0.00		0	\$0.00	0.000 %	0.000 %
Illinois National Insurance Co.	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 %

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	
Item No.	Schedule Item Status	Exhibit Name: *	Rule# or Page #:	Rate Action: *	Previous State Filing Number:	Attach Document:	Submitted:
1		Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page - Property Program Performance Endorsement	DIV-CP-CW-RU (10/17)	New		 <a href="#">DIV-CP-CW-RU (10-17) Exception Page - Property Plus.pdf</a>	Date Submitted: 11/21/2017 By: Angela Caraballo
Icon Legend:  - Draft Schedule Item  - Open Objection							

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## Disposition for AGNY-131259458

<b>SERFF Tracking Number:</b>	AGNY-131259458	<b>State:</b>	Alaska
<b>First Filing Company:</b>	Granite State Insurance Company ,...	<b>State Tracking Number:</b>	AGNY-131259458
<b>Company Tracking Number:</b>	AIG-17-CP-11		
<b>TOI:</b>	01.0 Property	<b>Sub-TOI:</b>	01.0001 Commercial Property (Fire and Allied Lines)
<b>Product Name:</b>	Commercial Property / 151-640-288		
<b>Project Name:</b>	Property Program Performance Endorsement		

**Disposition Date:**

12/14/2017

**Effective Date (New):**

08/01/2018

**Effective Date (Renewal):**

08/01/2018

**Status:** \*

Authorized

**Comments:**

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## 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>
Granite State	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %

Insurance  
Company

**Change Period for**

**Approved Rate:**

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

**Change Period for**

**Approved Rate:**

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

**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	P&C Checklist		No
Supporting Document	Loss Cost Multiplier		No
Supporting Document	Explanatory Info - Rates		No
Supporting Document	Marked Copy and Clean Manual Pages		No
Supporting Document	Third Party Authorization		No
Supporting Document	Coverage Comparison		No
	Rating Support		No

Supporting  
Document

Rate	Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page - Property Program Performance Endorsement, DIV-CP-CW-RU (10/17)	No
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