



## NOTICE OF EFFECTIVE FILING

**TO:** PROGRAMS DIVISION 66  
Kathleen Ott  
**DATE:** November 27, 2017  
**FROM:** Angela Caraballo  
**PHONE:** 718 250-1732

**PROGRAM:** COMMERCIAL PROPERTY  
Form attaches to the following ISRB'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 - Idaho - DIV-CP-ID-RU (10/17)

**STATE:** IDAHO

**EFFECTIVE DATE:** August 1, 2018

**MODIFICATIONS:** None

**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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Tracking Number:

Filings	Messages	Billing	Settings	Filing Rules	Templates	Alerts
My Workfolder	My Open Filings	My Draft Filings	Search	Create Filing	EFT Report	

This Filing has been marked as public access.

**Idaho**

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**Product Name:** Commercial Property / 151-640-288

**SERFF Tr Num:** AGNY-131259510

**SERFF Status:** Closed-FILED

**TOI:** 01.0 Property

**State Tr Num:**

**State Status:** FILED

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

**Co Tr Num:** AIG-17-CP-11

**Co Status:**

**Filing Type:** Form/Rule

**Date Submitted:** 11/17/2017

**Disposition Date:** 11/22/2017

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

**Authors:** Angela Carballo

**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			
<b>Form Count:</b> 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	121895	(10/17)	END	New		0	<a href="#">121895 (10-17) Property Program Performance Endorsement.docx.pdf</a>	Date Submitted: 11/17/2017 By: Angela Carballo

**Form Type Legend:**

- **ADV** = Advertising
- **BND** = Bond
- **CER** = Certificate
- **DSC** = Disclosure/Notice
- **END** = Endorsement/Amendment/Conditions
- **PCF** = Policy/Coverage Form
- **ABE** = Application/Binder/Enrollment
- **CNR** = Canc/NonRen Notice
- **DEC** = Declarations/Schedule
- **ERS** = Election/Rejection/Supplemental Applications
- **OTH** = Other

**Icon Legend:** - Draft Schedule Item - Open Objection



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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.							
<b>Add Rate Data?</b> Yes							
<b>Filing Method:</b>						Prior Approval	
<b>Rate Change Type:</b>						Neutral	
<b>Overall Percentage of Last Rate Revision:</b>						%	
<b>Effective Date of Last Rate Revision:</b>							
<b>Filing Method of Last Filing:</b>						N/A - New Endorsement	
<b>Company Rate Information</b>							
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 - Idaho	DIV-CP-ID-RU (10/17)	New		 <a href="#">DIV-CP-ID-RU (10-17) ID Exception Page - Property Plus.pdf</a>	Date Submitted: 11/17/2017 By: Angela Caraballo

Icon Legend:  - Draft Schedule Item  - Open Objection

<b>Add Authors</b>	<b>Update</b>	<b>Create Reminder</b>	<b>Move to Workfolder</b>	<b>PDF Pipeline</b>	<b>Clone Filing</b>
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## Disposition for AGNY-131259510

<b>SERFF Tracking Number:</b>	AGNY-131259510	<b>State:</b>	Idaho
<b>First Filing Company:</b>	Granite State Insurance Company ,...	<b>State Tracking Number:</b>	
<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:**

11/22/2017

**Effective Date (New):**

**Effective Date (Renewal):**

**Status:** \*

FILED

**Comments:**

Acceptance of this filing does not constitute a finding that the file is in conformance with Idaho law.

**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 %
<b>Change Period for Approved Rate:</b>							
Illinois National Insurance Co.	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							
New Hampshire Insurance Company	0.000 %	0.000 %	\$ 0	0	\$ 0	0.000 %	0.000 %
<b>Change Period for Approved Rate:</b>							

**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

Item Type	Item Name	Item Status	Public Access
Supporting Document	ID-FF Certification Form		Yes
Supporting Document	Property/Casualty Checklist		Yes
Supporting Document	Third Party Authorization		Yes
Supporting Document	Explanatory Memo		Yes
Supporting Document	Forms Listing		Yes
Supporting Document	Side by Side Comparison		Yes
Supporting Document	Coverage Comparison		Yes
Supporting Document	Idaho Policyholder Notice - Form No. 105509		Yes
Form	121895, (10/17), Endorsement/Amendment/Conditions, Property Program Performance Endorsement		Yes
Rate	Commercial Lines Manual Division Five - Fire and Allied Lines Exception Page - Property Program Performance Endorsement - Idaho, DIV-CP-ID-RU (10/17)		Yes