



## NOTICE OF EFFECTIVE FILING

**TO:** Melissa Jacobson

**FROM:** Angela Caraballo

**DATE:** May 15, 2023

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☒ **FORM**    ☒ **RULE**    ☐ **RATE**

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**BUSINESS UNIT:** PROGRAMS DIVISION

**TOI:** 20.0 Commercial Auto

**SUB-TOI:** 20.0001 Business Auto

**PROGRAM NAME:** Attaches to ISO's Business Auto Coverage Form - CA 00 01 11 20

**FILING NUMBER:** AIG-23-CA-05

**STATE:** OREGON

**EFFECTIVE DATE:** September 1, 2023

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**CONTENTS INCLUDE:** Business Auto Broad Form Endorsement - 102093 (4/23)

Rule Page - Business Auto Broad Form CA-MU-RU (4/23)

**MODIFICATIONS:** None

**COMMENTS:** None

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**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.
  - ☐ NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.
  - ☒ NEW HAMPSHIRE INSURANCE COMPANY
  - ☐ THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA
-



Tracking Number:

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 This Filing has been marked as public access.

**Product Name:** Business Auto Broad Form Endorsement  
Revision / 151 640 288

**TOI:** 20.0 Commercial Auto

**Sub-TOI:** 20.0001 Business Auto

**Filing Type:** Form/Rule

**Effective Date Requested (New):** 09/01/2023

**Effective Date Requested (Renewal):** 09/01/2023

**SERFF Tr Num:** AGNY-133627803

**State Tr Num:** AGNY-133627803

**Co Tr Num:** AIG-23-CA-05



**Date Submitted:** 04/11/2023

**Authors:** Angela Caraballo

**SERFF Status:** Closed-Approved

**State Status:** Review completed

**Co Status:**
**Disposition Date:** 05/09/2023



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		Approved 05/09/2023	BUSINESS AUTO BROAD FORM ENDORSEMENT	102093 (04-23)		END	Replaced	Previous Filing #	<a href="#">AGNY-132326052</a>		 <a href="#">102093 (04-23) Business Auto Broad Form Endorsement.pdf</a>	Date Submitted: 04/11/2023 By: Angela Caraballo
								Replaced Form #	<a href="#">102093</a>			
								Replaced Edition Date	(12/19)			

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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aigdbglegalstatefilingsny

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 This Filing has been marked as public access.

<b>Product Name:</b> Business Auto Broad Form Endorsement Revision / 151 640 288	<b>SERFF Tr Num:</b> AGNY-133627803	<b>SERFF Status:</b> Closed-Approved
<b>TOI:</b> 20.0 Commercial Auto	<b>State Tr Num:</b> AGNY-133627803	<b>State Status:</b> Review completed
<b>Sub-TOI:</b> 20.0001 Business Auto	<b>Co Tr Num:</b> AIG-23-CA-05	<b>Co Status:</b>
<b>Filing Type:</b> Form/Rule	<b>Date Submitted:</b> 04/11/2023	<b>Disposition Date:</b> 05/09/2023
<b>Effective Date Requested (New):</b> 09/01/2023	<b>Authors:</b> Angela Caraballo	
<b>Effective Date Requested (Renewal):</b> 09/01/2023		

General Information	Form Schedule	Rate/Rule Schedule	Supporting Documentation	State Specific	Companies and Contact	Filing Fees	Filing Correspondence
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 The rate schedule has been marked public access.

<b>Add Rate Data?</b> Yes	
<b>Filing Method:</b>	File and Use
<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>	
<b>SERFF Tracking Number of Last Filing:</b>	<a href="#">AGNY-132326052</a>

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		Reviewed-No Action 05/09/2023	Rule Page - Business Auto Broad Form	CA-MU-RU (4-23)	Replacement	<a href="#">AGNY-132326052</a>	 <a href="#">CA-MU-RU (04-23) Business Auto Broad Form Endorsement Rule Page.pdf</a>	Date Submitted: 04/11/2023 By: Angela Caraballo

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

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## Disposition for AGNY-133627803

## Filing at a Glance

<b>State:</b> Oregon	<b>SERFF Tracking Number:</b> AGNY-133627803
<b>TOI:</b> 20.0 Commercial Auto	<b>State Tracking Number:</b> AGNY-133627803
<b>Sub-TOI:</b> 20.0001 Business Auto	<b>Company Tracking Number:</b> AIG-23-CA-05
<b>Filing Type:</b> Form/Rule	<b>Product Name:</b> Business Auto Broad Form Endorsement Revision / 151 640 288
<b>First Filing Company:</b> Granite State Insurance Company ,...	<b>Project Name:</b> Business Auto Broad Form Endorsement - Revision
	<b>Destruction Date:</b>

**Disposition Date:**

05/09/2023

**Effective Date (New):**

09/01/2023

**Effective Date (Renewal):**

09/01/2023

**Status:** \*

Approved

**Comments:**

Department of Consumer and Business Services  
Division of Financial Regulation - Product Regulation - Rates and Forms

Invitation to Comment on Quality of Service from the Division of Financial Regulation

We strive to provide excellent customer service at all times and invite you to provide written comment regarding your filing experience.

Instructions for submitting a filing are on our website at <http://www.oregon.gov/DCBS/insurance/insurers/rates-forms/Pages/rates-forms.aspx> or contained within SERFF under the Filing Rules tab. Filings that contain errors may be returned without having been accepted for review. Filing errors that are considered include; form numbers that do not match, forms attached under the wrong tab, or missing required documents. If we allow the company to correct a filing error it must be corrected within 24 hours or the filing will be rejected for no response.

If we contact you about compliance-related issues or corrections that need to be made to your filing, we must receive your complete response within 10 calendar days.

Any disapproval for reasons other than filing errors must be supported by our product standards. If you believe we have failed to meet our performance objectives or you believe we have provided outstanding performance, please let us know. We value your comments and will use this information to improve our service.

You may request that your comments be kept confidential; however, be aware that confidential feedback limits our ability to follow up, as your concerns cannot be shared with staff. If you are not requesting confidentially, please include the SERFF or state tracking number with your comments.

Please explain if the Division met its objective. Was your experience positive?

Comments:

Thank you,  
Tashia Sizemore  
Division of Financial Regulation  
Insurance Product Regulation and Compliance - Life and Health  
E-mail: tashia.sizemore@dcbs.oregon.gov  
Telephone: 503-947-7270  
Fax: 503-378-4351

Cassie Soucy  
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Telephone: 503-983-3895  
Fax: 503-378-4351

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

<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>
Form	102093 (04-23), [No date], Endorsement/Amendment/Conditions, BUSINESS AUTO BROAD FORM ENDORSEMENT	Approved	Yes
Rate	Rule Page - Business Auto Broad Form, CA-MU-RU (4-23)	Reviewed-No Action	Yes
Supporting Document	Cover Letter or Explanatory Memorandum	Reviewed-No Action	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	Highlighted/Redline form version if a replaced, amended or similar forms	Reviewed-No Action	Yes
Supporting Document	3607 Histogram	Not Applicable to filing	Yes
Supporting Document	Form Listing	Reviewed-No Action	Yes
Supporting Document	Redline - Rule	Reviewed-No Action	Yes

Sincerely,  
Cliff Nolen