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Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire (includes EC)	$1,354,061	-.19%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Rate adjustments per indications/competitive position; new optional coverages.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

American Modern Select
Name of Company

State Relations Analyst
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	464,937	-15.7%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Effective 7-1-11, Bituminous Casualty Corporation is adopting the following ISO revisions: CF-2009-RLA1, CF-2007-RLC07, CF-2007-RRU07, CF-2008-RTERU, CF-2000-RPTLC, CF-2009-OPTRU, CF-2009-RGB09, CF-2009-RLC09, CF-2009-RRU09 and RP-2009-RML09.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Bituminous Casualty Corporation
Name of Company

- Vice President-Underwriting
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	31,596	-15.7
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories)or certain classes?
If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Effective 7-1-11, Bituminous Fire and Marine Insurance Company is adopting the following ISO reference filings: CF-2009-RLA1, CF-2007-RLC07, CF-2007-RRU07, CF-2008-RTERU, CF-2000-RPTLC, CF-2009-OPTRU, CF-2009-RGB09, CF-2009-RLC09, CF-2009-RRU09 and RP-2009-RML09.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Bituminous Fire and Marine Insurance Company
Name of Company

- Vice President-Underwriting
Official - Title

H29219D

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANC
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/10

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	196,964	7.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	2,006,200	6.4%
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adjusting Loss Cost Multipliers for Dwelling Property.
Effects will be 6.4% for Dwelling Property (Fire) and 7.0% for Personal Liability.
for a total effect of +6.5% to our Dwelling Program.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Erie Insurance Exchange
Name of Company

Rob Roddy, Actuary

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/11 N & 7/1/11 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	228211	-1.9
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are revising company loss cost multiplier only.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

GuideOne America Insurance Company
Name of Company

Joseph Highbarger, FCAS, MAAA - AVP/Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/11 N & 7/1/11 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	2022076	7.4
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are revising company loss cost multiplier only.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

GuideOne Elite Insurance
Name of Company

Joseph Highbarger, FCAS, MAAA - AVP/Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/11 N & 7/1/11 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	3634514	1.3
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are revising company loss cost multiplier only.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

GuideOne Mutual Insurance
Name of Company

Joseph Highbarger, FCAS, MAAA - AVP/Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/11 N & 7/1/11 R

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	101609	3.9
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are revising company loss cost multiplier only.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

GuideOne Specialty Mutual Insurance
Name of Company

Joseph Highbarger, FCAS, MAAA - AVP/Actuary
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective July 1, 2010 for new business and August 1, 2010 for renewal business.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	$219,548	10.0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, this change applies to all territories.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Rate Change including changes to Coverage A and Coverage C base rates.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Kemper Independence Insurance Company
Name of Company

David Halstead, Senior Product Manager
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/21/2010.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Dwelling Fire (Line of Insurance)	86,354	+38.0%

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting ISO Loss Costs associated with their DP-2009-RLA1 submission. This impacts pages DP-LC-1 through DP-LC-20 of our filing.

We are also revising our Company Loss Cost Factor in-line with our indication/experience.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Sentry Insurance a Mutual Company
Name of Company

Mike Williams - Vice President - Chief Actuary
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 15, 2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	$142,310	-0.8
4. Burglary and Theft	$1,787	+16.3
5. Glass		
6. Fidelity	$6,116	+16.3
7. Surety		
8. Boiler and Machinery		
9. Fire	$64,426	16.3
10. Extended Coverage	$54,195	+16.3
11. Inland Marine	$542,585	+12.1
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to implement the commercial package modification factor changes made under ISO revision designation no. ML-2010-RLA1 effective **January 15, 2011**.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.
Name of Company

Robert Goddard, Senior Compliance Analyst
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	$96,214	-12.1
10. Extended Coverage	$52,931	+25.0
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to implement the commercial property loss cost and rule changes made under ISO revision designation numbers CF-2009-RLC09 and CF-2009-RRU09 effective **January 1, 2011.**

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.
Name of Company

Robert Goddard, Senior Compliance Analyst
Official - Title

H29219D