Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Revised

Change in Company's premium or rate level produced by rate revision effective 7-1-09 nb, 7-15-09 ren

(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	$1,974,573	+14.2%
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): we are filing to adopt revised rates applicable for contractor policies.

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

AMCO Insurance Company
Name of Company

Marie Safreed - State Filing Specialist
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2009.

(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	$90,930	+22.77%
14. Crop Hail		
15. Other 5.2 CMP - Commercial General Liability		
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 wish to adopt ISO advisory loss costs to compliment BancInsure's Commercial Property program.

We will be adopting GL-2008-BGL1 and maintain our current LCM of 1.20.

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

BancInsure, Inc.
Name of Company

Debbie Tebbe, Assistant-Vice President
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/09.

(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	$3,288,928	1.3%
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): Filing revisions to property, broadening endorsements, optional coverages and office program.

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

Citizens Insurance Company of America
Name of Company

Michele L. Holm - Pricing Consultant
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/09.

(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	$3,128,875	2.6%
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): Filing revisions to property, broadening endorsements, optional coverages and office program.

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

Citizens Insurance Company of Illinois
Name of Company

Michele L. Holm - Pricing Consultant
Official - Title

H29219D

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag 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	3,062,709	2.1%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Base rate revisions affect all business segments other than Church, Lessors' Risk, Restaurants. Earthquake base rate revisions affect only territories 11, 12, 13 and 14.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Base rate revisions for Businessowners property, liability and Earthquake; revised transition factors (caps to mitigate premium swings at renewal); increased Blue Ribbon Discount for eligible policyholders (excluding Contractors).

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Grange Mutual Casualty Company
Name of Company

L. Alicia Williams, ACAS, CPCU, Commercial Actuary
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag 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	6,482,847	-1.4%
14.	Crop Hail		
15.	Other Life 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): Adjusting Package Mods based upon experience

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

Grange Mutual Casualty Company
Name of Company

Richard McQuay - Pricing Analyst
Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/09.

(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	$3,768,447	3.9%
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): Filing revisions to property, broadening endorsements, optional coverages and office program.

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

Hanover Insurance Company
Name of Company

Michele L. Holm - Pricing Consultant
Official - Title

H29219D

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IDFPR (MPO)
DIVISION OF INSURANCE
SPRINGFIELD

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/2009 New, 09/01/2009 Renewal. Filing #5373.

(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	BOP $13,409,998	+7.35%
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Classes 10145, 10146, 16900, 16901, 16902, 16910, 16911, 16915, 16916, 16920, 16921, 16930, 16931, 16940, 16941 for certain rating relativities.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

1. Change BOP liability rating relativities for restaurants, taverns, package liquor stores, private clubs, and banquet halls. 2. Add BOP liability rating relativities for all classes of business for the number of years in business, experience of the owner, risk analysis grade, and area crime exposure. 3. Amended BOP liability loss costs.

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

Illinois Casualty Company
Name of Company

Anne Thomas, Program Manager
Official--Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/09.

(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	$552,256	6.9%
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): Filing revisions to property, broadening endorsements, optional coverages and office program.

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

Massachusetts Bay Insurance Company
Name of Company

Michele L. Holm - Pricing Consultant
Official - Title

H29219D

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/15/2009.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag 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	1,012,101	+1.26
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Yes. This filing only applies to Habitational classes.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): n/a

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

Nationwide Mutual Fire Insurance Company
Name of Company

James Word - Pricing Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7-1-2009 NB, 9-1-2009 RB

(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	$3,765,007	7.5%
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): _____

Revise tier factors as follows: Standard from 1.25 to 1.33, Preferred from 1.00 to 1.00, Super Preferred from 0.85 to 0.90, Ultra from 0.70 to 0.77

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

Peerless Indemnity Insurance Company
Name of Company

Tammy Blake, Sr. Regulatory Filing Analyst
Official – Title