

**State:** Michigan **Filing Company:** Allied Property and Casualty Insurance Company  
**TOI/Sub-TOI:** 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)  
**Product Name:** MI Soft Nonrenewal Letter and Security Plus Endorsement  
**Project Name/Number:** /

### Filing at a Glance

Company: Allied Property and Casualty Insurance Company  
Product Name: MI Soft Nonrenewal Letter and Security Plus Endorsement  
State: Michigan  
TOI: 19.0 Personal Auto  
Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Filing Type: Form  
Date Submitted: 09/13/2012  
SERFF Tr Num: NWPP-128681430  
SERFF Status: Closed-APPROVED  
State Tr Num:  
State Status:  
Co Tr Num: 321APF12150  
  
Effective Date 11/17/2012  
Requested (New):  
Effective Date 12/17/2012  
Requested (Renewal):  
Author(s): Kafila Odesanya  
Reviewer(s): Melissa Hayes (primary)  
Disposition Date: 09/20/2012  
Disposition Status: APPROVED  
Effective Date (New): 11/17/2012  
Effective Date (Renewal): 12/17/2012

**State:** Michigan **Filing Company:** Allied Property and Casualty Insurance Company  
**TOI/Sub-TOI:** 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)  
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## General Information

Project Name: Status of Filing in Domicile: Not Filed  
 Project Number: Domicile Status Comments: This form is state specific to Michigan  
 Reference Organization: Reference Number:  
 Reference Title: Advisory Org. Circular:  
 Filing Status Changed: 09/20/2012  
 State Status Changed: Deemer Date:  
 Created By: Kafila Odesanya Submitted By: Kafila Odesanya  
 Corresponding Filing Tracking Number:

### Filing Description:

Personal Auto  
 Allied Property and Casualty Insurance Company, NAIC No.: 42579  
 Company Tracking No.: 321APF12150  
 SERFF Tracking No.: NWPP- 128681430

#### ACL1001MI (11-12) - Conversion Letter - Allied to AMCO

ACL1001MI is created as a soft nonrenewal letter to notify policyholders currently in the Allied Property and Casualty Insurance Company that at renewal, they will now be written in the AMCO Insurance Company.

#### A18542B (02-08) - Security Plus Travel Coverage endorsement

A18542B is introduced to offer coverage to customers which provide Emergency Travel Expenses, Clothing and Luggage Coverage, Towing and Labor Cost Coverage and Locksmith Services.

Your early and favorable consideration is appreciated. If you have any questions, feel free to contact me at (515) 508-4284 or by email at odesank@nationwide.com.

## Company and Contact

### Filing Contact Information

Kafila Odesanya, Compliance Analyst odesank@nationwide.com  
 1100 Locust Street, DM01-0201 515-508-4284 [Phone]  
 Des Moines, IA 50391-0201 515-508-4665 [FAX]

### Filing Company Information

Allied Property and Casualty Insurance Company	CoCode: 42579	State of Domicile: Iowa
701 Fifth Avenue	Group Code: 140	Company Type: Property and Casualty
Des Moines, IA 50391	Group Name:	State ID Number:
(515) 508-4382 ext. [Phone]	FEIN Number: 42-1201931	

## Filing Fees

Fee Required? No  
 Retaliatory? No

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Fee Explanation:

Per Company: No

Company	Amount	Date Processed	Transaction #
Allied Property and Casualty Insurance Company	\$0.00		

### State Specific

If this filing contains rules, rates, and/or forms for a home insurance or personal auto insurance program, is the filing only for a non-group-rated program regulated by Chapter 21 of the Michigan Insurance Code (Essential Insurance Act)?: Yes

If this filing contains rules, rates, and/or forms for a home insurance or personal auto insurance program, is the filing only for a group, franchise, or blanket rated program based on employment / membership in legitimate organizations governed by MCL 500.2105(2): No

Did you review the SERFF Submission Requirements Exhibits when assembling this filing?: Yes

Did you review the Michigan rate, rule, and form filing requirements contained in the NAIC Product Requirements Locator?: Yes

Pursuant to MCL 500.2109(1)(c), MCL 500.2403(1)(d), and MCL 500.2603(1)(d) the differential between rates for the same coverage must be reasonably justified by differences in losses, expenses, or both, or by differences in the uncertainty of loss, for the individuals or risks to which the rates apply. This requirement applies to rates for each limit of liability, deductible, age group tier, territory, protection class, symbol, discount, discount tiers, surcharge, surcharge tiers, and other classification where you charge a different rate for the same type of coverage. Has your actuary / rate development specialist confirmed that each classification rate is NOT unfairly discriminatory in relation to another rate for the same coverage and that the whole of your rating system complies with sound actuarial ratemaking standards?: Not Applicable

For the coverage(s) being added to your program and for the coverage(s) for which rates are being revised, you must provide (according to an actuarially sound rate development methodology) all the indicated and selected classification rate / rate factors for that coverage within your rating plan (each limit of liability option, each deductible option, each territory utilized in your program, each fire protection class, each discount / surcharge rating tier, etc.). For each selected rate / rate factor that does not equal the indicated rate / rate factor, you must explain the actuarially sound reason why you selected that rate / rate factor instead of the indicated rate. What is the number of the attachment / exhibit on which this information is contained in this filing?: Not Applicable

If this is a forms filing, did you provide a readability score of 45 or greater for each form that contains policy provisions, exclusions, and/or amendments?: Yes

**SERFF Tracking #:**

NWPP-128681430

**State Tracking #:****Company Tracking #:**

321APF12150

**State:**

Michigan

**Filing Company:**

Allied Property and Casualty Insurance Company

**TOI/Sub-TOI:**

19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

**Product Name:**

MI Soft Nonrenewal Letter and Security Plus Endorsement

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Melissa Hayes	09/20/2012	09/20/2012

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Allied Extra Coverages	Kafila Odesanya	09/14/2012	09/14/2012
Form	Auto Death Indemnity Coverage	Kafila Odesanya	09/14/2012	09/14/2012
Supporting Document	FILING MEMO	Kafila Odesanya	09/14/2012	09/14/2012

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## Disposition

Disposition Date: 09/20/2012

Effective Date (New): 11/17/2012

Effective Date (Renewal): 12/17/2012

Status: APPROVED

Comment:

TO: INSURER AUTHORIZED TO WRITE PROPERTY/CASUALTY INSURANCE IN MICHIGAN

RE: ACKNOWLEDGMENT OF RULE/RATE/POLICY FORM FILING SUBJECT TO MCLA 500. 2108, 2236, 2406, 2430, 2450, 2452, 2606, 2628, 2646, 2648

Dear Filer:

Your filing has been "accepted" pursuant to the statutes listed above. If we designated your filing as DEEMED APPROVED or FILED, we may not have reviewed your filing for conformance with the requirements of the Michigan Insurance Code and other statutory and administrative regulations. Failure by the Commissioner to disapprove your "prior approval" forms, rates, and rules within 15 days (rates and rules) and within 30 days (forms) after we receive them constitutes approval. The Commissioner's failure to act does not negate your obligation to comply with all applicable regulations.

NOTE: If you have filed new classification rating criteria for which you reasonably anticipate differences in losses, expenses, or both from the remainder of your policyholders, you must separately track the statistics for risks who receive the applicable rates, discounts, or surcharges for these classifications. After at least two years of providing the rate differentials, we may ask you to produce data to show that actual losses and/or expenses for these classifications are reflective of the amount of rate, discount, or surcharge that you provide. If data that you supply does not justify the differential between the rate for a particular classification and the rate for the remainder of your policyholders, then that classification will be considered unfairly discriminatory in violation of MCLA 500.2109(1)(c), 2403(1)(d) or 2603(1)(d).

If we subsequently review your materials, we will withdraw approval of all policy forms that violate Michigan law and all classifications with rate differentials that are not justified by actual and credible loss and expense statistics. If necessary, we will take regulatory action to eliminate use of unacceptable policy forms and unreasonable classifications pursuant to MCLA 500.2114, 2236(5), 2418, 2430, 2452, 2618, 2628, or 2648.

You should not submit commercial insurance rules and rates to us when you have placed a prominent disclaimer on the policy form for that type of commercial insurance, except workers compensation and credit life/disability coverage, which states "This policy is exempt from the filing requirements of section 2236 of the insurance code of 1956, 1956 PA 218, MCL 500.2236." or words that are substantially similar.

CMS-01aSERFF (11-06)

**SERFF Tracking #:**

NWPP-128681430

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Rate data does NOT apply to filing.

<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	FIS 0782-Time Deviation Data Sheet		Yes
<b>Supporting Document (revised)</b>	FILING MEMO		Yes
<b>Supporting Document</b>	FILING MEMO		Yes
<b>Supporting Document</b>	POLICY FORMS/ENDORSEMENTS		Yes
<b>Supporting Document</b>	RATE JUSTIFICATION EXHIBITS		Yes
<b>Supporting Document</b>	RULE/RATE MANUAL PAGES		Yes
<b>Form</b>	Conversion Letter		Yes
<b>Form</b>	Security Plus Travel Coverage Endorsement		Yes
<b>Form</b>	Allied Extra Coverages		Yes
<b>Form</b>	Auto Death Indemnity Coverage		Yes

**State:** Michigan

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## Amendment Letter

Submitted Date: 09/14/2012

Comments:

Dear Melissa Hayes,

The Scheduled Items have been updated to include Allied Extra Coverages endorsement, AA0016 and Auto Death Indemnity Coverage Endorsement, AA0016M which will be replacing the Allied Extra endorsement on file for Allied Property and Casualty Insurance Company, AA0017. Please note that the filing letter has also been updated accordingly.

Thank you for your time and consideration.

Changed Items:

### Form Schedule Item Changes:

Form Name	Form Number	Edition Date	Form Type	Action	Replaced Form #	Previous Filing #	Readability Score	Attachments
Allied Extra Coverages	AA0016	06-09	Endorsement/Amendment/Conditions	Replaced	AA0017 (12-10)	NWPP-126327981	59.340	AA0016-0609.File.pdf
Auto Death Indemnity Coverage	AA0016MI	12-10	Endorsement/Amendment/Conditions	Replaced	AA0017 (12-10)	NWPP-126327981	67.720	AA0016MI-1210.File.pdf

### Supporting Document Schedule Item Changes:

Satisfied -Name: FILING MEMO

Comment: Please see filing letter for details

MI Conversion Form Filing Letter.pdf

State: Michigan

Filing Company:

Allied Property and Casualty Insurance Company

TOI/Sub-TOI: 19.0 Personal Auto/19.0001 Private Passenger Auto (PPA)

Product Name: MI Soft Nonrenewal Letter and Security Plus Endorsement

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## Form Schedule

Item No.	Schedule Item Status	Form Name	Form Number	Edition Date	Form Type	Action/ Action Specific Data	Readability Score	Attachments
1		Conversion Letter	ACL1001MI	11-12	CNR	New:	58.180	ACL1001MI-1112.File.pdf
2		Security Plus Travel Coverage Endorsement	A18542B	02-08	END	New:	78.470	A18542B-0208.File.pdf
3		Allied Extra Coverages	AA0016	06-09	END	Replaced: Replaced Form #: AA0017 (12-10) Previous Filing #: NWPP-126327981	59.340	AA0016-0609.File.pdf
4		Auto Death Indemnity Coverage	AA0016MI	12-10	END	Replaced: Replaced Form #: AA0017 (12-10) Previous Filing #: NWPP-126327981	67.720	AA0016MI-1210.File.pdf

### Form Type Legend:

<b>ABE</b>	Application/Binder/Enrollment	<b>ADV</b>	Advertising
<b>BND</b>	Bond	<b>CER</b>	Certificate
<b>CNR</b>	Canc/NonRen Notice	<b>DEC</b>	Declarations/Schedule
<b>DSC</b>	Disclosure/Notice	<b>END</b>	Endorsement/Amendment/Conditions
<b>ERS</b>	Election/Rejection/Supplemental Applications	<b>OTH</b>	Other



Thank you for choosing us for your important insurance protection. We value your business and would like to inform you of changes to your auto insurance policy.

### **What's Changing?**

- Please note that the company issuing this policy has changed but is still a member of Allied Insurance. Your Allied Property and Casualty Insurance Company policy will be non-renewed as of the beginning of your policy period and replaced with your new AMCO Insurance Company policy with uninterrupted coverage. Your policy number remains the same, but the prefix has been changed. If a copy of your previous policy has been provided for your bank or other lending institution, we will also provide a replacement copy for that firm.

### **What Do You Need To Do?**

- Review the revised policy and endorsements included in this envelope. These contain important information about your insurance coverage.
- To maintain uninterrupted coverage with us, please pay your premium bill when it arrives. Your current policy expires at 12:01 a.m. on your renewal effective date. If you selected Electronic Fund Transfer, your payments will be automatically withdrawn from your bank.

### **Who Can You Contact?**

- If you have any questions about your policy, need to make changes, or want to learn more about how we can further serve your personal insurance needs, please contact your agent.
- For billing questions, questions about the new rating plan, or to report a claim, please call 800-282-1446 from anywhere in the U.S. Our associates are available to assist you 24 hours a day, seven days a week.
- If you choose not to accept the offer, you may be eligible for automobile insurance through the Michigan Automobile Placement Facility.

### **REPLACEMENT OF YOUR AUTO INSURANCE**

If the policy being terminated is one that insures your automobile(s), you should obtain replacement insurance in the normal market for at least that portion of your insurance necessary to satisfy Michigan Financial Responsibility requirements by contacting your agent or another insurance company directly. If you cannot obtain coverage in the normal market, any agent can help you arrange coverage through the Michigan Automobile Placement Facility.

**WARNING: IF THIS NOTICE PERTAINS TO AUTO INSURANCE, ACCORDING TO MICHIGAN LAW, YOU MUST NOT OPERATE OR PERMIT THE OPERATION OF ANY MOTOR VEHICLE TO WHICH THE "NOTICE" APPLIES, OR OPERATE ANY OTHER VEHICLE, UNLESS THE VEHICLE IS INSURED AS REQUIRED BY LAW.**

### **YOUR RIGHT TO A HEARING**

If you have any reason to believe that we have improperly denied you of your insurance, or charged an incorrect premium for that insurance, you are entitled to have your complaint resolved through one of the procedures described below and to a review by the Michigan Insurance Bureau if we fail to resolve the dispute.

We will provide you, upon request and payment of a reasonable copying charge, with information pertinent to the denial of insurance or to the premium charged.

We will attempt to resolve any dispute promptly and informally, while protecting both your interests and ours. You have the right to participate in any process for resolving the complaint either by telephone discussion, by mail or by a private informal managerial level conference. If conference is by telephone, we will identify all persons listening to the telephone conference by name and title. We will either provide toll free telephone service or pay

**ACL1001MI (11-12)**

all telephone charges associated with such telephone conferences. If you wish to have a private conference by telephone, please call us collect at the following number, unless the number indicated is toll free: 1-800-848-2981.

If we fail to provide a process for resolving the complaint and proposed resolution within 30 days after your request, or if you disagree with the proposed resolution after processing your complaint, you are entitled to a determination of the matter by the Commissioner of Insurance.

If you wish to review any complaint with us, please contact us at the address shown above. This should be done before contacting the Michigan Insurance Bureau.

If after conferring with us you feel the dispute has not been satisfactorily resolved, you may contact the Michigan Insurance Bureau, P.O. Box 30220, Lansing, Michigan 48909.

You also have the right to appoint another person to act in your behalf throughout the appeal process.

**Thank you for placing your trust in us.**

**Allied Insurance  
1100 Locust Street Des Moines, IA 50391  
Hearing or Voice Impaired: 1-800-622-2421 (TTY only)  
alliedinsurance.com**

Nationwide, the Nationwide framework and Nationwide is On Your Side are federally registered service marks of Nationwide Mutual Insurance Company.

## SECURITY PLUS TRAVEL COVERAGE ENDORSEMENT

For an additional premium, the following coverages apply to the policy.

### Emergency Travel Expenses

If “your covered auto” is disabled due to a loss covered under **Part D** of the policy and it is more than 50 miles away from your home, we will pay up to a total of \$250 for any one or a combination of the following expenses:

1. Temporary housing and meals
2. Travel expense to your home, and then to return to pick up the vehicle at the location where the vehicle was disabled.
3. The cost for a Rental Car for up to two days.

No deductible will apply to this coverage.

### Clothing and Luggage Coverage

If your clothing or luggage is lost, stolen, or destroyed while it is in “your covered auto”, this policy will pay up to a total of \$500 per occurrence on a Replacement Cost basis.

No deductible will apply to this coverage.

### Towing and Labor Costs Coverage

The limit for this coverage is \$100 per occurrence.

No deductible will apply to this coverage.

### Locksmith Services

Coverage is provided up to \$50 per policy period for the cost of services of a professional locksmith, if the keys for “your covered auto” are misplaced or stolen.

No deductible will apply to this coverage.

## ALLIED EXTRA COVERAGES

When you have in effect a Homeowners Insurance Policy or Farm Property Coverage Form issued by an affiliated company of Nationwide Mutual Insurance Company (Nationwide) or an affiliated company of Allied Property and Casualty Insurance Company (Allied) that covers your "residence premises" or "dwelling", as defined in the Nationwide or Allied policy, Allied Extra Coverages will apply in accordance with the following provisions:

### Emergency Lockout Coverage

We will reimburse you up to \$150 for reasonable expense incurred for the services needed to gain entry into "your covered auto" or your "residence premises" or your "dwelling" subject to these conditions:

1. Your key (including electronic entry device) has been lost, stolen, disabled, or locked in "your covered auto" or "residence premises" or "dwelling" and you are unable to enter such auto, residence premises or dwelling; or
2. Your key (including electronic entry device) has been lost or stolen and you have changed the locks to prevent an unauthorized entry.

Original copies of receipts for services must be provided before reimbursement is payable.

For the purposes of this coverage:

"Your covered auto" shall mean any auto described in the Declarations for which a premium charged indicates either Part A – LIABILITY COVERAGE or Part D – COVERAGE FOR DAMAGE TO YOUR COVERED AUTO applies.

"Residence Premises" and "Dwelling" shall mean the dwelling insured under your Homeowners Insurance Policy or Farm Property Coverage Form.

### Special Deductible Provision

In the event of a covered loss, the following Special Deductible Provisions will apply:

1. When the "residence premises" or "dwelling", as defined in your Homeowners Insurance Policy or your Farm Property Coverage Form, is a total fire loss, as determined by us, the "residence premises" or "dwelling" deductible will be waived, up to \$5000; or
2. If the same event results in a covered loss to two or more Allied or Nationwide policies insuring:
  - a. "your covered auto" under your Personal Auto Policy;
  - b. property covered under your Homeowners Insurance Policy;
  - c. a recreational vehicle covered under your Recreational Vehicle Policy;
  - d. a watercraft covered under your Pleasure Boatowners Insurance Policy; or
  - e. Farm policy covering the "dwelling", as defined in your Farm Property Coverage Form;

the largest deductible applicable shall apply once to all covered losses. (subject to the assessment and reimbursement of lower deductibles).

This provision applies only if the combined loss or damage exceeds the higher of the applicable deductibles.

The application of this provision shall not serve to reduce your recovery to less than the amount you would have received under individual policies.

For the purpose of this coverage "your covered auto" shall mean any auto described in the Declarations for which a premium charge indicates Part D – COVERAGE FOR DAMAGE TO YOUR COVERED AUTO applies.

**Air Bag Replacement Coverage**

We will pay for reasonable expenses incurred in replacing an air bag in “your covered auto” that deploys without the auto being involved in a loss.

For the purpose of this coverage “your covered auto” shall mean any auto described in the Declarations for which a premium charge indicates Part D – COVERAGE FOR DAMAGE TO YOUR COVERED AUTO applies.

This coverage applies only if you submit proper receipts for expenses claimed under this coverage.

Unless otherwise stated above, all provisions of the policies apply.

## AUTO DEATH INDEMNITY COVERAGE

The coverage provided by this endorsement is non-premium bearing.

### Auto Death Indemnity

In the event of "your" death we shall pay the amount of \$10,000 in accordance with these provisions:

1. Death must result directly and independently of all other causes from "bodily injury" caused by accident and sustained by you while "occupying "your covered auto".
2. You must be wearing a seat belt at the time of the accident.
3. Death must occur within 90 days after the accident.

For the purpose of the coverage "your covered auto" shall mean any auto described in the Declarations for which a premium charge indicates Part A – LIABILITY COVERAGE applies.

This insurance does not apply to:

1. Loss caused by or resulting from disease except pus forming infection which shall occur through "bodily injury" to which this insurance applies.
2. Suicide, sane or insane, or to any attempt thereat.
3. Death due to war, whether or not declared, civil war, insurrection, rebellion or revolution, or to any act or condition incident to any of the foregoing.

The following Conditions will apply:

1. Policy Provisions: None of the Insuring Agreements, Exclusion or Conditions of the policy shall apply to the insurance afforded by this coverage except Part F – GENERAL PROVISIONS entitled "Policy Period and Territory", "Fraud", "Changes", "Legal Action Against Us" and "Termination".
2. Notice of Claim: When loss covered hereunder occurs, written notice thereof shall be given by the beneficiary, or someone on his or her behalf, to us or any of our authorized agents as soon as practicable.
3. Proof of Claim; Medical Reports: As soon as practicable, the beneficiary or someone on his or her behalf shall give us proof of claim, under oath if required; and shall after each request from us execute authorization to enable us to obtain medical reports and copies or records.

Proof of claim shall be made upon forms furnished by us unless we shall have failed to furnish such forms within 15 days after receiving notice of claim.

4. Payment of Death Indemnity; Autopsy: If the decedent person is survived by a spouse who was a resident of the same household at the time of the accident, this benefit is payable to such spouse; otherwise, this benefit is payable to the decedent person's estate.

The spouse is considered to be resident of the same household when there is a legitimate marital covenant as defined under Michigan law, shared economic and non-economic burdens, and legitimate reasons for the spouses to be staying in another home or location.

We have the right and opportunity to request an autopsy where not forbidden by law.

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Product Name: MI Soft Nonrenewal Letter and Security Plus Endorsement

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## Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	FIS 0782-Time Deviation Data Sheet		
Bypass Reason:	Not Applicable. This is a forms only filing		
Comments:			

		Item Status:	Status Date:
Satisfied - Item:	FILING MEMO		
Comments:	Please see filing letter for details		
Attachment(s):	MI Conversion Form Filing Letter.pdf		

		Item Status:	Status Date:
Satisfied - Item:	POLICY FORMS/ENDORSEMENTS		
Comments:	Please see Forms Schedule tab for details.		

		Item Status:	Status Date:
Bypassed - Item:	RATE JUSTIFICATION EXHIBITS		
Bypass Reason:	Not Applicable. This is a forms only filing.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	RULE/RATE MANUAL PAGES		
Bypass Reason:	Not Applicable. This is a forms only filing.		
Comments:			

September 14, 2012

## **FILING MEMORANDUM**

Personal Auto

Allied Property and Casualty Insurance Company, NAIC No.: 42579

AMCO Insurance Company, NAIC No.: 19100

Company Tracking No.: 321APF12150

SERFF Tracking No.: NWPP- 128681430

We are hereby filing for your review and approval ACL1001MI (11-12) "Conversion Letter – Allied to AMCO", A18542B (02-08) "Security Plus Travel Coverage endorsement" for Allied Property and Casualty Insurance Company. AA0016 (06-09) – Allied Extra Coverages and AA0016MI (12-10) Auto Death Indemnity Coverage are introduced to replace AA0017 (12-10) – Allied Extra Coverages for Allied Property and Casualty Insurance Company. We are requesting an effective date of on or after November 17, 2012 for New and December 17, 2012 for Renewal Business.

ACL1001MI (11-12) is created as a soft nonrenewal letter to notify policyholders currently in Allied Property and Casualty Insurance Company that at renewal, they will now be written in the AMCO Insurance Company.

A18542B (02-08) is introduced as an optional coverage to customers in the AMCO Insurance Company which provides Emergency Travel Expenses, Clothing and Luggage Coverage, Towing and Labor Cost Coverage and Locksmith Services. Customers currently with the Security Plus Travel Coverage in the Allied Property and Casualty Insurance Company will continue to keep their coverage when converted to AMCO Insurance Company.

AA0016 (06-09) and AA0016MI (12-10) are introduced to replace AA0017 (12-10) because customers in the Allied Property and Casualty Insurance Company will automatically receive Auto Death Indemnity when they convert to AMCO Insurance Company. We will not be adding or removing any coverages for Allied P&C policies upon conversion to AMCO Insurance Company other than those that currently don't qualify for Allied Extra – those will gain the coverage for Auto Death Indemnity.



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## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
09/11/2012	Supporting Document	FILING MEMO	09/14/2012	MI Conversion Form Filing Letter.pdf (Superseded)

September 13, 2012

## **FILING MEMORANDUM**

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