

State: Virginia **Filing Company:** The Cincinnati Insurance Company
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: Commercial Auto
Project Name/Number: /CIRF20550

Filing at a Glance

Company: The Cincinnati Insurance Company
Product Name: Commercial Auto
State: Virginia
TOI: 20.0 Commercial Auto
Sub-TOI: 20.0001 Business Auto
Filing Type: Rate
Date Submitted: 05/29/2014
SERFF Tr Num: CNNA-129567958
SERFF Status: Closed-Filed
State Tr Num: 018
State Status: Filed
Co Tr Num: C-IRF-14-C2514-VA

Effective Date: 06/01/2014
Requested (New):
Effective Date: 06/01/2014
Requested (Renewal):
Author(s): Kelly Lindemuth
Reviewer(s): Lee Ann Robertson, CIC (primary)
Disposition Date: 06/19/2014
Disposition Status: Filed
Effective Date (New): 06/01/2014
Effective Date (Renewal): 06/01/2014

State: Virginia
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: Commercial Auto
 Project Name/Number: /CIRF20550

Filing Company: The Cincinnati Insurance Company

General Information

Project Name:	Status of Filing in Domicile: Not Filed
Project Number: CIRF20550	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 06/19/2014	
State Status Changed: 06/19/2014	Deemer Date:
Created By: Kelly Lindemuth	Submitted By: Kelly Lindemuth
Corresponding Filing Tracking Number:	

Filing Description:

At this time, we would like to file an Application For An Excess Rate. The insured has requested a higher Garagekeeper's Comp/Collision limit than what we currently have filed. Attached for your review is a letter with more details as well as a signed Application For An Excess Rate.

Your approval is respectfully requested for use the policy effective June 1, 2014.

Please note that this is a renewal of an Excess Rate Applicable To A Specific Risk that was filed and approved last year, under SERFF tracking number CNNA-129120822.

Company and Contact

Filing Contact Information

Kelly Lindemuth, AINS, AIS, Filings Analyst kelly_lindemuth@cinfin.com

PO BOX 145496 513-603-5980 [Phone]
 Cincinnati, OH 45250-5496 513-603-5650 [FAX]

Filing Company Information

The Cincinnati Insurance Company	CoCode: 10677	State of Domicile: Ohio
6200 S. Gilmore Road	Group Code: 244	Company Type:
Fairfield, OH 45014	Group Name: Cincinnati Fin Grp	State ID Number:
(513) 870-2000 ext. [Phone]	FEIN Number: 31-0542366	

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:

State Specific

Did you review the General Instructions?: Yes

SERFF Tracking #:

CNNA-129567958

State Tracking #:

018

Company Tracking #:

C-IRF-14-C2514-VA

State:

Virginia

Filing Company:

The Cincinnati Insurance Company

TOI/Sub-TOI:

20.0 Commercial Auto/20.0001 Business Auto

Product Name:

Commercial Auto

Project Name/Number:

/CIRF20550

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Lee Ann Robertson, CIC	06/19/2014	06/19/2014

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Info requested from Company	Lee Ann Robertson, CIC	06/13/2014	06/13/2014

Response Letters

Responded By	Created On	Date Submitted
Kelly Lindemuth	06/16/2014	06/16/2014

SERFF Tracking #:

CNNA-129567958

State Tracking #:

018

Company Tracking #:

C-IRF-14-C2514-VA

State:

Virginia

Filing Company:

The Cincinnati Insurance Company

TOI/Sub-TOI:

20.0 Commercial Auto/20.0001 Business Auto

Product Name:

Commercial Auto

Project Name/Number:

/CIRF20550

Disposition

Disposition Date: 06/19/2014

Effective Date (New): 06/01/2014

Effective Date (Renewal): 06/01/2014

Status: Filed

Comment: See Administrative Order No. CTR - 14 - 553 attached.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	COF-1 Rate Certification		Yes
Supporting Document	NAIC's Loss Costs Adoption Forms		Yes
Supporting Document	Virginia Advisory Filing Adoption Form		Yes
Supporting Document	Letter and Application For Excess Rate		Yes
Supporting Document	Supporting Documents		Yes
Supporting Document	Additional Supporting Documents		Yes

2014 JUN 18 P 4: 35

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION
BUREAU OF INSURANCE

AT RICHMOND, June 18, 2014
ADMINISTRATIVE ORDER NO. CTR - 14 - 553

ORDER APPROVING APPLICATION OF THE CINCINNATI
INSURANCE COMPANY FOR USE OF RATES IN EXCESS OF
THOSE OTHERWISE APPLICABLE FOR USE IN WRITING
AUTOMOBILE LIABILITY INSURANCE INSURING MRT
MANUFACTURING

BY CORRESPONDENCE DATED May 29, 2014 through June 16, 2014,
came The Cincinnati Insurance Company, pursuant to Section 38.2-1920 of the
Code of Virginia, and filed with and requested the use of rates as set forth in the
attached application, which are in excess of those filed with the State Corporation
Commission and otherwise applicable for automobile liability insurance, for the
reason set forth in the application;

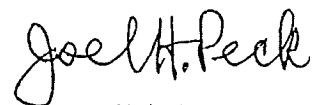
AND IT APPEARING from an examination by the staff of the Bureau of
Insurance that there is no objection to the filing;

THEREFORE, by virtue of the authority vested in me as Commissioner of
Insurance,

IT IS ORDERED:

- (1) That the said filing be, and it hereby is, approved for the period of
June 1, 2014 to June 1, 2015, and
- (2) That an attested copy be sent to the Insurer; the Insured; and, the
Producer.

A True Copy
Teste:



Clerk of the
State Corporation Commission

State: Virginia **Filing Company:** The Cincinnati Insurance Company
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: Commercial Auto
Project Name/Number: /CIRF20550

Objection Letter

Objection Letter Status	Info requested from Company
Objection Letter Date	06/13/2014
Submitted Date	06/13/2014
Respond By Date	06/20/2014

Dear Kelly Lindemuth, AINS, AIS,

Introduction:

Thank you for your submission sent via SERFF 05/29/2014.

(1) Please confirm that this excess rate request is for The Cincinnati Insurance Company (NAIC Number 10677). Your application reflects NAIC Number 10877.

(2) Please confirm exactly what coverage you are providing.

\$5,700,000 Garagekeepers (Direct Primary)

Comprehensive with theft and mischief or vandalism subject to a \$500 per car and \$2500 per occurrence deductible

Collision subject to a \$1000 deductible

(3) Please provide support for the .65 RMF.

Conclusion:

We will suspense this filing until 06/20/2014 pending your response.

Sincerely,

Lee Ann Robertson, CIC

State: Virginia
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: Commercial Auto
 Project Name/Number: /CIRF20550

Filing Company: The Cincinnati Insurance Company

Response Letter

Response Letter Status Submitted to State
 Response Letter Date 06/16/2014
 Submitted Date 06/16/2014

Dear Lee Ann Robertson, CIC,

Introduction:

Thank you for reviewing this filing; see below for a response to your objection.

Response 1

Comments:

(1) Yes, our NAIC Number is 10677, not 10877. The error was made by the agency and they have been made aware of the typo.

(2) Yes, we are providing Direct Primary Garagekeepers at a \$5,700,000 limit and Garagekeepers provides physical damage coverage Comprehensive with the limit shown with deductible \$500 per car and \$2,500 per occurrence. Garagekeepers provides physical damage coverage Collision with a deductible of \$1,000 per occurrence.

(3) Attached is the support for the .65 RMF.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied - Item:	Additional Supporting Documents
Comments:	
Attachment(s):	IP001.pdf

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Please let me know if you have any other questions or concerns. As always, thank you for your time and consideration.

Sincerely,

Kelly Lindemuth

State: Virginia
 TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
 Product Name: Commercial Auto
 Project Name/Number: /CIRF20550

Filing Company: The Cincinnati Insurance Company

Supporting Document Schedules

Satisfied - Item:	COF-1 Rate Certification
Comments:	
Attachment(s):	SIGNED COF 2.pdf
Item Status:	
Status Date:	

Bypassed - Item:	NAIC's Loss Costs Adoption Forms
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Virginia Advisory Filing Adoption Form
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Letter and Application For Excess Rate
Comments:	
Attachment(s):	Signed CTR.pdf IRF LETTER.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Supporting Documents
Comments:	
Attachment(s):	Rating.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Additional Supporting Documents
Comments:	
Attachment(s):	IP001.pdf
Item Status:	

SERFF Tracking #: CNNA-129567958 State Tracking #: 018 Company Tracking #: C-IRF-14-C2514-VA

State: Virginia Filing Company: The Cincinnati Insurance Company
TOI/Sub-TOI: 20.0 Commercial Auto/20.0001 Business Auto
Product Name: Commercial Auto
Project Name/Number: /CIRF20550

Status Date:

Virginia

Rate/Loss Cost Certification Form for Use with File and Use Filings (Filings Subject to Chapter 19 of Title 38.2 of the Code of Virginia)

Certification of

THE CINCINNATI INSURANCE COMPANY

Name of Insurance Company/Organization

Filing being certified: C-IRF-14-C2514-VA

Proposed effective date: 06/01/2014

I, being a qualified actuary, certify that appropriate consideration has been given in this filing to the applicable factors specified in subsections A and B of § 38.2-1904 of the Code of Virginia. For the purpose of this certification, a qualified actuary is defined as [1] a member in good standing of the American Academy of Actuaries, [2] a fellow or associate of the Casualty Actuarial Society, or [3] an individual who has both the educational background necessary for the practice of actuarial science and at least four years of property and casualty actuarial experience.

I am a qualified actuary in accordance with [1] [2], or [3] above

It is understood that the Bureau of Insurance will rely on this certification and, should it be determined that the rates, loss costs, and/or supplementary rate information submitted in this filing do not comply with the provisions of § 38.2-1904 or that this certification is materially false or incorrect, appropriate corrective and/or disciplinary action, as authorized by law, will be taken by the Bureau of Insurance.

Name of qualified actuary: Richard A Knudson Jr. ACAS, MAA

Title of qualified actuary: Associate Actuary

Signature of qualified actuary:



Date: 05/29/2014

Telephone number: 513-870-2193

E-mail address: Richard_Knudson@cinfina.com

EXHIBIT I

APPLICATION FOR AN EXCESS RATE (OTHER THAN WORKERS COMPENSATION) APPLICABLE TO A SPECIFIC RISK VIRGINIA

NOTE: This application must be completed in full, including supporting documentation for the premium calculation, signed by the insured or prospective insured, and submitted by the insurer on or before the effective date of the excess rate.

Line of Insurance Garagekeepers

Insurance Company Cincinnati Insurance Company

Mailing Address P O Box 145496 Cincinnati, Ohio 45250-5496

NAIC No. 10877 Contact Name Kathleen Farrell Phone No. 513-603-5592

Agent/Producer's Name Alexis V Richards / Richards Group Inc.

National Producer Number (NPN) 3084338

Mailing Address 4931 Boonsboro Road Lynchburg, VA 24503

Name of Insured MRT Manufacturing

Mailing Address 12660 E Lynchburg Salem Turnpike Forest, VA 24551

Filed rate: Maximum limit filed is \$2,500,000 with base premium of \$4,409 Comprehensive and base premium of \$9,150 for Collision.

Proposed excess rate \$.058 Comp/.069 Col

Specific reason(s) for excess rate: Interpolation per Rule:35 in Auto manual - limit requested is higher than limits filed with rates. Interpolation factor is .722 for Comprehensive and 1.504 for Collision.

Effective Date of Policy: From 06/01/14 to 06/01/15

Effective Date of Excess Rate: From 06/01/14 to 06/01/15

Insured's (or prospective insured's) written consent to excess rate

Section 38.2-1920 of the Code of Virginia permits the Insurance Commissioner to approve a rate in excess of an insurer's filed rate for a specific risk upon receipt of a statement of the reason(s) for the excess rate and the signed consent of the insured or prospective insured. Your signature below indicates that you understand that the proposed excess rate is higher than the insurer's filed rate and that you understand the reason(s) for the excess rate shown above.

Signature: [Handwritten Signature]

Date: 5-28-14 Title: President

Handwritten initials and date: 5/28/14



The Cincinnati Insurance Company ■ The Cincinnati Indemnity Company
The Cincinnati Casualty Company ■ The Cincinnati Specialty Underwriters Insurance Company
The Cincinnati Life Insurance Company

May 29, 2014

Ms. Jacqueline K. Cunningham
Commissioner of Insurance
Virginia Bureau of Insurance
P.O. Box 1157
Richmond, VA 23218

Reference: The Cincinnati Insurance Company - NAIC # 0244-10677
Commercial Lines
Excess Rate Filing
Insured: MRT Manufacturing
Policy Number: CPA 1058411
Filing # C-IRF-14-C2514-VA

We are submitting this Application For An Excess Rate Applicable To A Specific Risk – Virginia, for the above captioned insured. The insured has requested a higher Garagekeepers limit for Comprehensive and Collision Coverage. The limit required, \$5,500,000, exceeds our filed highest limit of \$2,500,000 and we have used our filed and approved interpolation rule to calculate the revised increased limit factors of .722 for Comprehensive and 1.504 for Collision.

Please note that this is a renewal of an Excess Rate Applicable To A Specific Risk, that was filed and approved last year, under SERFF tracking number CNNA-129120822.

Attached is the application for excess rates, signed by the insured.

Your approval is respectfully requested for use on the policy effective 06/01/2014.

Sincerely,

Kelly A. Lindemuth, AINS, AIS
Filings Analyst III
Staff Underwriting Department
(513) 603-5980
kelly_lindemuth@cinfin.com

GARAGE

MANUAL COVERAGE

Coverage: GARAGEKEEPERS - COMPREHENSIVE
Code: 7351

Quote: 2617574 Version: 2 Policy: CPA 1058411 Effective Date: 06/01/2014 Rating State: VA

Description: 6575 X .75 (DED) X .650 RMF = 3,205

Premium
3,205

Coverage: GARAGEKEEPERS COLLISION

Code: 7351

Description: 13,662 X .43 (DED) X .650(RMF) = 3819

Premium
3,819

AUTO/GARAGE INTERPOLATION WORK SHEET

STEP 1.

Determine CSL (Show Split Limits per \$1,000; i.e., \$100,000=100)

BI (Per Person)	_____	x .50 =	_____
BI (Per Accident)	_____	x .45 =	_____
PD	_____	x .15 =	_____
	Total (per 1,000) =		_____

*Note: If limit is not on chart, continue.

STEP 2.

Determine Higher and Lower Limit from "Increased Limits Table
(i.e., \$290,000 needed, use \$300,000 for Higher and \$250,000 for Lower)
*(Refer to Garagekeepers Comp. and Collision pages for Garagekeepers Interpolation.)

Higher	2,500,000		
Lower	2,000,000		
Difference	500,000	÷ 1,000 =	500

STEP 3.

Determine Higher and Lower *Rates from Increase Limit Table per limits shown in Step 2
*(Use Garagekeepers premiums for Garagekeepers Interpolation.)

Higher	4409		
Lower	4048		
Difference	361		

STEP 4.

Divide Answer 3 by Answer 2

361	÷	500	=	.722
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STEP 5.

Subtract Lower Limit (Determined in Step 2)
from *Actual CSL (Determined in Step 1)
*(Use Limit of Insurance for Garagekeepers.)

Actual CSL	5,500,000		
Lower Limit	2,000,000		
Difference	3,500,000	÷ 1,000 =	3500

STEP 6.

Multiply Answer from Step 4
by Answer from Step 5

Answer IV	.722		
Answer V	x 3500		
Increase	2527		

STEP 7.

Add the Increase Determined in Step 6 to the Lower Rate Determined in Step 3

Lower Rate	4048		
Step 6 Increase	+ 2527		
Increased Limit Factor (rounded to 2 decimal places)	6575	x .75 (DED) x .65 (RMF) =	\$3,205

Note: When interpolating garagekeepers comp and collision, skip Step 1 and begin with Step 2.

AUTO/GARAGE INTERPOLATION WORK SHEET

C-11

STEP 1.

Determine CSL (Show Split Limits per \$1,000; i.e., \$100,000=100)

BI (Per Person)	_____	x .50 =	_____
BI (Per Accident)	_____	x .45 =	_____
PD	_____	x .15 =	_____
	Total (per 1,000) =		_____

*Note: If limit is not on chart, continue.

STEP 2.

Determine Higher and Lower Limit from *Increased Limits Table
(i.e., \$290,000 needed, use \$300,000 for Higher and \$250,000 for Lower)
*(Refer to Garagekeepers Comp. and Collision pages for Garagekeepers Interpolation.)

Higher	2,500,000		
Lower	2,000,000		
Difference	500,000	÷ 1,000 =	500

STEP 3.

Determine Higher and Lower *Rates from Increase Limit Table per limits shown in Step 2
*(Use Garagekeepers premiums for Garagekeepers Interpolation.)

Higher	9150		
Lower	8292		
Difference	752		

STEP 4.

Divide Answer 3 by Answer 2

752	÷	500	=	1.504
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STEP 5.

Subtract Lower Limit (Determined in Step 2) from *Actual CSL (Determined in Step 1)
*(Use Limit of Insurance for Garagekeepers.)

Actual CSL	5,500,000		
Lower Limit	2,000,000		
Difference	3,500,000	÷ 1,000 =	3500

STEP 6.

Multiply Answer from Step 4 by Answer from Step 5

Answer IV	1.504		
Answer V x	3500		
Increase	5264		

STEP 7.

Add the Increase Determined in Step 6 to the Lower Rate Determined in Step 3

Lower Rate	8292		
Step 6 Increase	5264	+	13556
Increased Limit factor (rounded to 2 decimal places)	13556	x	.43
		x .65 (RMF) =	\$3,819

Note: When interpolating garagekeepers comp and collision, skip Step 1 and begin with Step 2.

THE CINCINNATI INSURANCE COMPANIES
DIVISION ONE
COMMERCIAL LINES
AUTOMOBILE MANUAL
RATES

35. GARAGEKEEPERS' INSURANCE - PREMIUM DEVELOPMENT

Subline Code (618)

GARAGEKEEPERS' - OTHER THAN COLLISION				
*Theft and Mischief or Vandallism are subject to a \$100 per car/\$500 per occurrence deductible.				
Maximum Limit of Liability	Specified Perils		Comprehensive	
	Legal Liability	Direct (Primary)	Legal Liability	Direct (Primary)
	Coverage Codes		Coverage Codes	
	(214)	(215)	(211)	(212)
\$ 6,000	30	41	36	49
7,500	35	47	42	56
9,000	40	54	48	65
12,000	50	67	60	80
15,000	58	79	70	95
18,000	65	88	78	106
22,500	79	106	95	127
30,000	98	133	118	160
37,500	116	157	139	188
45,000	133	179	160	215
60,000	164	221	197	265
75,000	193	260	232	312
90,000	222	300	266	360
120,000	273	369	328	443
150,000	320	433	384	520
180,000	369	499	443	599
225,000	444	599	533	719
300,000	562	759	674	911
375,000	681	920	817	1104
450,000	798	1077	958	1292
600,000	1022	1379	1226	1655
750,000	1238	1672	1486	2006
900,000	1449	1957	1739	2348
1,200,000	1849	2496	2219	2995
1,500,000	2208	2981	2650	3577
2,000,000	2498	3373	2998	4048
2,500,000	2721	3674	3265	4409
Over 2,500,000	Refer to Company			
Direct Coverage (Excess)				
Specified Perils (216) - Multiply the Coverage 214 premium by 1.15.				
Comprehensive (213) - Multiply the Coverage 211 premium by 1.15.				
*Optional Deductibles:				
\$250 per car and \$500 per occurrence - Multiply the above by .94.				
\$250 per car and \$1,000 per occurrence - Multiply the above by .90.				
\$500 per car and \$1,000 per occurrence - Multiply the above by .84.				
\$500 per car and \$2,500 per occurrence - Multiply the above by .75.				
\$1,000 per car and \$2,500 per occurrence - Multiply the above by .69.				

THE CINCINNATI INSURANCE COMPANIES
DIVISION ONE
COMMERCIAL LINES
AUTOMOBILE MANUAL
RATES

35. GARAGEKEEPERS' INSURANCE - PREMIUM DEVELOPMENT (Cont'd)

Subline Code (618)

GARAGEKEEPERS' - COLLISION

Maximum Limit Of Liability	Deductibles							
	\$100		\$250		\$500		\$1,000	
	Legal Liability	Direct (Primary)	Legal Liability	Direct (Primary)	Legal Liability	Direct (Primary)	Legal Liability	Direct (Primary)
	Coverage Codes		Coverage Codes		Coverage Codes		Coverage Codes	
	(311)	(312)	(311)	(312)	(311)	(312)	(311)	(312)
\$ 6,000	\$83	\$85	\$41	\$55	\$32	\$43	\$27	\$37
7,500	73	99	47	64	37	50	31	43
9,000	83	112	54	73	42	56	36	48
12,000	106	143	69	93	53	72	46	61
15,000	126	170	82	111	63	85	54	73
18,000	149	202	97	131	75	101	64	87
22,500	176	237	114	154	88	119	76	102
30,000	226	304	147	198	113	152	97	131
37,500	265	358	172	233	133	179	114	154
45,000	299	403	194	262	150	202	129	173
60,000	375	506	244	329	188	253	161	218
75,000	451	609	293	396	226	305	194	262
90,000	517	698	336	454	259	349	222	300
120,000	646	873	420	567	323	437	278	375
150,000	776	1,048	504	681	388	524	334	451
180,000	895	1,209	582	788	448	605	385	520
225,000	1,071	1,446	696	940	536	723	461	622
300,000	1,363	1,840	886	1,196	682	920	586	791
375,000	1,651	2,229	1,073	1,449	826	1,115	710	958
450,000	1,937	2,614	1,259	1,699	969	1,307	833	1,124
600,000	2,500	3,375	1,625	2,194	1,250	1,688	1,075	1,451
750,000	3,054	4,122	1,985	2,679	1,527	2,061	1,313	1,772
900,000	3,575	4,826	2,324	3,137	1,788	2,413	1,537	2,075
1,200,000	4,546	6,137	2,955	3,989	2,273	3,069	1,955	2,639
1,500,000	5,451	7,359	3,543	4,783	2,726	3,680	2,344	3,164
2,000,000	6,221	8,398	4,044	5,459	3,111	4,199	2,675	3,611
2,500,000	6,778	9,150	4,406	5,948	3,389	4,575	2,915	3,935
Over 2,500,000	Refer to Company							
	Direct Coverage (Excess)							
	Coverage Code (313) - Multiply the Coverage 311 premium by 1.15							

For additional coverages, refer to company.

*9150 / 3935 = .43

**THE
CINCINNATI
INSURANCE COMPANIES**

Commercial Lines
IRPM/Schedule Modification
Documentation Sheet

Date: 6/1/2014

To: _____ (Underwriter) From: _____ (Fieldperson)

Inspected by: _____

Agency: Richards Group Code: 45115

Insured: MRT Manufacturing

Is the application complete? Yes Does the application match the quote? Yes Has experience rating been applied? Yes (If "Yes," please attach documentation.)

Percentage of Credit (–) / Debit (+)

Risk Characteristics:	Property	Gen. Liability	Automobile	Crime	Other
1. Management					10
2. Location					
3. Building Features					
4. Premises & Equipment					10
5. Employees					
6. Attitude					5
7. Protection					10
8. Equipment—Auto					
9. Safety—Auto					
Total IRPM:					35.000

I recommend that the premium on the risk be adjusted (IRPM) as shown above for the reasons explained below:

Property
General Liability
Automobile
Crime
Other

1. Management:
- Fire drills are conducted regularly
 - Burglar alarms are installed on premises
 - Closely supervised family business
 - Financial stability of the risk is good
 - Attends continuing education classes regularly throughout the year
 - Management responsive to loss control suggestions
 - Conducts regular safety meetings
 - Experienced management

2. Location:
- Easily accessible entrances and thru-ways
 - Well-traveled street
 - Adjacent occupancies are low hazard
 - Police patrol area on a regular basis

3. Building Features:
- Older buildings have been updated
 - Lightning surge protection
 - Non-skid surfaces on walkways
 - Panic bars on doors
 - Property well lighted
 - Exit signs clearly marked
 - Emergency power source on premises
 - Annual service contract for fire protection system
 - Built with superior workmanship and materials

<u>Property</u>		<u>General Liability</u>		<u>Automobile</u>		<u>Crime</u>		<u>Other</u>
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<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>					<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>						<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

4. Premises and Equipment:
- Mostly new equipment
 - Equipment maintained on a regular basis
 - Layout of premises provides for easy flow of people, equipment and supplies
 - Aisles are free of clutter
 - No public access to employee break areas or stockroom
 - Well-paved parking lot
 - Flammables are stored in locked area
 - Immaculate housekeeping
-

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5. Employees:
- Effective supervision of employees
 - Experienced staff
 - Thorough training process
 - Low turnover of employees
 - All employees stringently screened prior to hiring
 - Prohibits volunteers from hazardous activities
 - Good ratio of teachers to students
-

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6. Attitude:
- Strict adherence to OSHA and state requirements
 - Actively pursues exposure reduction
 - No smoking permitted on premises
 - Emergency evacuation plan posted
-

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7. Protection:
- Valuable equipment stored in locked area
 - Windows and frames well maintained
 - Above-average police protection
 - Protective glass over stained glass
 - Electronic surveillance system
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8. Equipment (Automobile & Garage Risks Only):
- Vehicles in excellent condition
 - Above-average repair facilities
 - Vehicles kept inside locked premises at night
 - Regular maintenance schedule in place
 - Back-up alarms on vehicles
 - No vehicles driven home by employees
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9. Safety Organization (Automobile & Garage Risks Only):
- Reviews all losses with employees
 - Has a designated Safety Director
 - Holds regular safety meetings
 - Obtains MVRs on all drivers
 - No overnight travel
 - Loads properly secured, covered and flagged
 - Safe-driver incentive program
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10. Other: _____