

State: Illinois **First Filing Company:** Hartford Casualty Insurance Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package
Product Name: Illinois Mine Subsidence
Project Name/Number: Spectrum Policy Program/FN.07.889.2014.07

Filing at a Glance

Companies: Hartford Casualty Insurance Company
Hartford Insurance Company of Illinois
Hartford Underwriters Insurance Company
Property and Casualty Insurance Company of Hartford
Sentinel Insurance Company Limited
Twin City Fire Insurance Company
Hartford Accident and Indemnity Company
Hartford Fire Insurance Company

Product Name: Illinois Mine Subsidence
State: Illinois
TOI: 05.0 CMP Liability and Non-Liability
Sub-TOI: 05.0003 Commercial Package
Filing Type: Rate
Date Submitted: 02/24/2014
SERFF Tr Num: HART-129428807
SERFF Status: Closed-Received
State Tr Num:
State Status:
Co Tr Num: FN.07.889.2014.07

Effective Date 07/01/2014
Requested (New):
Effective Date 07/01/2014
Requested (Renewal):
Author(s): Louis Treviso, Casey Albert-Bard
Reviewer(s): Keith Fanning (primary)
Disposition Date: 02/24/2014
Disposition Status: Received
Effective Date (New): 07/01/2014
Effective Date (Renewal):

State: Illinois**First Filing Company:** Hartford Casualty Insurance Company, ...**TOI/Sub-TOI:** 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package**Product Name:** Illinois Mine Subsidence**Project Name/Number:** Spectrum Policy Program/FN.07.889.2014.07

General Information

Project Name: Spectrum Policy Program

Project Number: FN.07.889.2014.07

Reference Organization:

Reference Title:

Filing Status Changed: 02/24/2014

State Status Changed:

Created By: Louis Treviso

Corresponding Filing Tracking Number:

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Submitted By: Louis Treviso

Filing Description:

In response to Illinois Mine Subsidence Insurance Fund Circular 06 (11/2013), which supersedes Circular 06 (11/2010) and provides a revised mine subsidence premium table, we are revising the mine subsidence insurance rates for use with our Spectrum product.

Company and Contact

Filing Contact Information

Louis Treviso, Product Consultant

The Hartford

One Hartford Plaza

Hartford, CT 06155

louis.treviso@thehartford.com

860-547-2669 [Phone]

State: Illinois **First Filing Company:** Hartford Casualty Insurance Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package
Product Name: Illinois Mine Subsidence
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Filing Company Information

Hartford Casualty Insurance Company	CoCode: 29424	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-0294398	

Hartford Insurance Company of Illinois	CoCode: 38288	State of Domicile: Illinois
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1010609	

Hartford Underwriters Insurance Company	CoCode: 30104	State of Domicile: Connecticut
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1222527	

Property and Casualty Insurance Company of Hartford	CoCode: 34690	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1276326	

Sentinel Insurance Company Limited	CoCode: 11000	State of Domicile: Connecticut
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1552103	

Twin City Fire Insurance Company	CoCode: 29459	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-0732738	

Hartford Accident and Indemnity Company	CoCode: 22357	State of Domicile: Connecticut
690 Asylum Ave	Group Code: 91	Company Type: Property
Hartford, CT 06155	Group Name: The Hartford Ins. Group	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-0383030	

State: Illinois **First Filing Company:** Hartford Casualty Insurance Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0003 Commercial Package
Product Name: Illinois Mine Subsidence
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Hartford Fire Insurance Company	CoCode: 19682	State of Domicile: Connecticut
Hartford Plaza	Group Code: 91	Company Type:
690 Asylum Avenue	Group Name: The Hartford Ins.	State ID Number:
Hartford, CT 06155	Group	
(860) 547-5000 ext. [Phone]	FEIN Number: 06-0383750	

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State Specific

Refer to our checklists prior to submitting filing (http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp):

Acknowledged

Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: Acknowledged

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. :

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp .: Acknowledged

Medical Malpractice rates/rules may now be submitted using SERFF effective January 1, 2012.: Acknowledged

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.":

Acknowledged

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: Acknowledged

State:	Illinois	First Filing Company:	Hartford Casualty Insurance Company, ...
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
Product Name:	Illinois Mine Subsidence		
Project Name/Number:	Spectrum Policy Program/FN.07.889.2014.07		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Received	Keith Fanning	02/24/2014	02/24/2014

State:	Illinois	First Filing Company:	Hartford Casualty Insurance Company, ...
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Disposition

Disposition Date: 02/24/2014
Effective Date (New): 07/01/2014
Effective Date (Renewal):
Status: Received

Comment:

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 req'd):	Minimum % Change (where req'd):
Hartford Casualty Insurance Company	0.000%	0.000%	\$-3,125	113	\$19,178,337	%	%
Hartford Insurance Company of Illinois	0.000%	0.000%	\$-62	3	\$256,044	%	%
Hartford Underwriters Insurance Company	0.000%	0.000%	\$0	0	\$1,246	%	%
Property and Casualty Insurance Company of Hartford	0.000%	0.000%	\$0	0	\$0	%	%
Sentinel Insurance Company Limited	0.000%	0.000%	\$-5,574	197	\$24,154,747	%	%
Twin City Fire Insurance Company	0.000%	0.000%	\$0	0	\$34	%	%
Hartford Accident and Indemnity Company	0.000%	-0.100%	\$-129	3	\$132,992	%	%
Hartford Fire Insurance Company	0.000%	0.000%	\$-87	4	\$1,143,565	%	%

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	\$-8,977
Effect of Rate Filing - Number of Policyholders Affected	320

State:	Illinois	First Filing Company:	Hartford Casualty Insurance Company, ...
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Product Name:	Illinois Mine Subsidence		
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	DO NOT SUBMIT RATES/RULES. Only a Summary Sheet (RF-3) is Required.		Yes
Supporting Document	Request to Maintain Data as Trade Secret Information		Yes
Supporting Document	Assosiated documentation for internal informational purposes only.		Yes

State:	Illinois	First Filing Company:	Hartford Casualty Insurance Company, ...
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
Product Name:	Illinois Mine Subsidence		
Project Name/Number:	Spectrum Policy Program/FN.07.889.2014.07		

Rate Information

Rate data applies to filing.

Filing Method:	Use and File
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	8.000%
Effective Date of Last Rate Revision:	07/20/2013
Filing Method of Last Filing:	Use and File

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 req'd):	Minimum % Change (where req'd):
Hartford Casualty Insurance Company	0.000%	0.000%	\$-3,125	113	\$19,178,337	%	%
Hartford Insurance Company of Illinois	0.000%	0.000%	\$-62	3	\$256,044	%	%
Hartford Underwriters Insurance Company	0.000%	0.000%	\$0	0	\$1,246	%	%
Property and Casualty Insurance Company of Hartford	0.000%	0.000%	\$0	0	\$0	%	%
Sentinel Insurance Company Limited	0.000%	0.000%	\$-5,574	197	\$24,154,747	%	%
Twin City Fire Insurance Company	0.000%	0.000%	\$0	0	\$34	%	%
Hartford Accident and Indemnity Company	0.000%	-0.100%	\$-129	3	\$132,992	%	%
Hartford Fire Insurance Company	0.000%	0.000%	\$-87	4	\$1,143,565	%	%

State:	Illinois	First Filing Company:	Hartford Casualty Insurance Company, ...
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
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Project Name/Number:	Spectrum Policy Program/FN.07.889.2014.07		

Supporting Document Schedules

Satisfied - Item:	DO NOT SUBMIT RATES/RULES. Only a Summary Sheet (RF-3) is Required.
Comments:	Please see attached.
Attachment(s):	Illinois_RF-3.pdf Illinois_RF-3.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Request to Maintain Data as Trade Secret Information
Bypass Reason:	Not applicable.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Assosiated documentation for internal informational purposes only.
Comments:	Assosiated documentation for internal informational purposes only.
Attachment(s):	IL_Rate_Pages_FILING_04192014_mine sub.pdf IL_Exceptions 07 14 - Final.pdf IL_Exceptions 07 14 - TC.pdf
Item Status:	
Status Date:	

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(2)	(3)
	Annual Premium Volume (Illinois)	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	1,143,565	0.0%
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): _____

Change to mine subsidence premiums.

Hartford Fire Insurance Company

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	132,992	-0.1%
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): _____

Change to mine subsidence premiums.

Hartford Accident and Indemnity Company

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	19,178,337	0.0%
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): _____

Change to mine subsidence premiums.

Hartford Casualty Insurance Company

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	1,246	0.0%
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): _____

Change to mine subsidence premiums.

Hartford Underwriters Insurance Company

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(2)	(3)
	Annual Premium Volume (Illinois)	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	0	0.0%
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): _____

Change to mine subsidence premiums.

Twin City Fire Insurance Company

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(2)	(3)
	Annual Premium Volume (Illinois)	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	256,044	0.0%
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): _____

Change to mine subsidence premiums.

Hartford Insurance Company of Illinois

Name of Company

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	0	0.0%
14. Crop Hail		
15. Other		
_____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____
N/ABrief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
Change to mine subsidence premiums.Hartford Insurance Company of the Midwest
Name of Company_____
Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	0	0.0%
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): _____

Change to mine subsidence premiums.

Trumbull Insurance Company_____
Name of Company_____
Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(2)	(3)
	Annual Premium Volume (Illinois)	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	0	0.0%
14. Crop Hail		
15. Other		
_____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____
N/ABrief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
Change to mine subsidence premiums.Property and Casualty Ins. Co. of Hartford
Name of Company_____
Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 7/1/2014

	(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	24,154,747	0.0%
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): _____

Change in mine subsidence premiums. _____

Sentinel Insurance Company

Name of Company

Official - Title

**SPECTRUM
ILLINOIS**

MINE SUBSIDENCE

Premiums Per Covered Structure

All Construction		All Construction	
<u>Coverage Limit</u>	<u>Types</u>	<u>Coverage Limit</u>	<u>Types</u>
Up to 10,000	20	380,001-390,000	128
10,001-20,000	23	390,001-400,000	131
20,001-30,000	26	400,001-410,000	134
30,001-40,000	28	410,001-420,000	137
40,001-50,000	31	420,001-430,000	139
50,001-60,000	34	430,001-440,000	142
60,001-70,000	37	440,001-450,000	145
70,001-80,000	40	450,001-460,000	148
80,001-90,000	43	460,001-470,000	151
90,001-100,000	46	470,001-480,000	154
100,001-110,000	48	480,001-490,000	156
110,001-120,000	51	490,001-500,000	159
120,001-130,000	54	500,001-510,000	162
130,001-140,000	57	510,001-520,000	165
140,001-150,000	60	520,001-530,000	168
150,001-160,000	63	530,001-540,000	171
160,001-170,000	65	540,001-550,000	174
170,001-180,000	68	550,001-560,000	176
180,001-190,000	71	560,001-570,000	179
190,001-200,000	74	570,001-580,000	182
200,001-210,000	77	580,001-590,000	185
210,001-220,000	80	590,001-600,000	188
220,001-230,000	82	600,001-610,000	191
230,001-240,000	85	610,001-620,000	193
240,001-250,000	88	620,001-630,000	196
250,001-260,000	91	630,001-640,000	199
260,001-270,000	94	640,001-650,000	202
270,001-280,000	97	650,001-660,000	205
280,001-290,000	100	660,001-670,000	208
290,001-300,000	102	670,001-680,000	211
300,001-310,000	105	680,001-690,000	213
310,001-320,000	108	690,001-700,000	216
320,001-330,000	111	700,001-710,000	219
330,001-340,000	114	710,001-720,000	222
340,001-350,000	117	720,001-730,000	225
350,001-360,000	119	730,001-740,000	228
360,001-370,000	122	740,001-750,000	230
370,001-380,000	125		

Premiums for Mine Subsidence coverage may not be altered by any rating plan or program.
Even though certain buildings under the Spectrum policy such as garages, storage buildings and appurtenant structures may not be specifically scheduled in the Declarations, the Mine Subsidence premium must be charged for each such building.

Illinois Exception Page

State Forms/Rules:

- ❖ [Illinois Amendatory form SS 01 23](#)
- ❖ [Illinois Changes Condominium Association Coverage form SS 81 06](#)
- ❖ [Illinois Changes – Defense Costs form SS 10 40](#)
- ❖ [Pollution Exclusion – Limited Exception – Illinois form SS 05 70](#)
- ❖ [Absolute Pollution Exclusion form SS 50 52](#)
- ❖ [Printing Services Errors And Omissions Liability – Illinois form SS 40 06](#)
- ❖ [Exclusion – Electromagnetic Hazard SS 50 41](#)
- ❖ [Limited Exclusion – Electromagnetic Hazard SS 50 44](#)
- ❖ [Veterinarian's And Veterinary Clinic Professional Liability Coverage – Illinois SS 40 99](#)
- ❖ [Optical Goods Professional Services Coverage – Illinois](#)
- ❖ [Hearing Aid Establishment Professional Services Coverage – Illinois SS 41 08](#)
- ❖ [Funeral Director's Professional Services Coverages – Illinois](#)
- ❖ [Exclusion – Total Pollution With Hostile Fire Exception SS 50 74](#)
- ❖ [Windstorm or Hail Percentage Deductible SS 82 10](#)

Exceptions To:

1. Product Rules

- ❖ [Rule T. Exclusion of Certain Computer-Related Losses](#)
- ❖ [Rule V. Three \(3\) Year Term Policies](#)
- ❖ [Rule W. Three \(3\) Year Term Policies – Inflation Guard](#)
- ❖ [Rule U. Exclusion – Year 2000 Computer Related And Other Electronic Problems](#)
- ❖ [Rule Z. Terrorism Coverages and Exclusions](#)

2. Optional Coverage Rules:

- ❖ [Rule 10L. Employment Practices Liability Insurance](#)
- ❖ [Rule 10C. Owners & Contractors Protective](#)
- ❖ [Rule 3E. Condominium Association Directors and Officers Liability](#)
- ❖ [Rule 5E. Educator's Legal Liability Coverage](#)
- ❖ [Rule 8.E. FailSafe™ MEGA Technology Errors or Omissions Liability Illinois Changes](#)
- ❖ [Rule 9E. Florist Error & Omissions Liability](#)
- ❖ [Rule 11E. Miscellaneous Errors & Omissions Liability](#)
- ❖ [Rule 13E Pastoral Counseling Errors and Omissions Liability Coverage Form](#)
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- ❖ [Rule 28L Technology Services Coverage](#)
- ❖ [Rule 29L Technology Services Coverage – Limited](#)
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- ❖ [Reserved for Future Use](#)
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- ❖ [Reserved for Future Use](#)
- ❖ [Additional Rule Applicable To Contractors Classes Only – Home Repair and Remodeling Coverage](#)

- ❖ [Additional Rule Applicable To Medical Expenses](#)
- ❖ [Rule 36L. Data Breach Coverage – Defense and Liability \(Claims Made\)](#)

3. [Rating Procedures](#)

- ❖ [None](#)

I. [STATE FORMS/RULES](#)

- A. **Illinois Amendatory form SS 01 23**, **must** be attached to all policies covering property located in Illinois.
- B. **Illinois Changes Condominium Association Coverage form SS 81 06**, **must** be attached to all policies covering property located in Illinois where coverage is provided under the Condominium Association.
- C. **Illinois Changes – Defense Costs form SS 10 40** must be attached to all policies covering property located in Illinois.
- D. **Pollution Exclusion – Limited Exception – Illinois form SS 05 70** applies in lieu of **Pollution Exclusion – Limited Exception form SS 04 83**.
- E. **Absolute Pollution Exclusion form SS 50 52** is **not available** in Illinois.
- F. **Printing Services Errors And Omissions Liability – Illinois form SS 40 06** applies in lieu of **Printing Services Errors And Omissions Liability form SS 04 35**.
- G. **Exclusion – Electromagnetic Hazard form SS 50 41** is **not available** in the state of Illinois.
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- I. **Veterinarian's and Veterinary Clinic Professional Liability Coverage – Illinois form SS 40 99** applies in lieu of **Veterinarian's and Veterinary Clinic Professional Liability Coverage form SS 04 36**.
- J. **Optical Goods Professional Services Coverage – Illinois form SS 41 06** applies in lieu of **Optional Goods Professional Services Coverage form SS 41 05**.
- K. **Hearing Aid Establishment Professional Services Coverage – Illinois form SS 41 08** applies in lieu of **Hearing Aid Establishment Professional Services Coverage form SS 41 07**.
- L. **Funeral Director's Professional Services Coverage – Illinois form SS 41 10** applies in lieu of **Funeral Director's Professional Services Coverage form SS 41 09**.
- M. **Exclusion – Total Pollution with Hostile Fire Exception form SS 50 74** is used in lieu of **Exclusion – Total Pollution form SS 50 73** in the state of Illinois.
- N. **Windstorm or Hail Percentage Deductible Form SS 82 10**
This endorsement applies a 1%, 2%, 3%, 4% or 5% deductible applicable to windstorm or hail. The selected deductible will be shown separately in the Declarations for each covered location. This deductible is subject to a \$500 minimum deductible per occurrence. The use of this endorsement is at the company's discretion, subject to applicable law.

The appropriate percentage deductible factor shown below shall be applied to the premium for each location to which this form is applicable.

Wind Deductible	Amount of Insurance	FF, MF, CT and Xpand	All Other Programs
1%	50K - 100K	0.970	0.980
	100K - 250K	0.960	0.970
	250K -	0.950	0.960
2%	25K - 100K	0.965	0.975
	100K - 250K	0.955	0.965
	250K -	0.945	0.955

3%	16K - 100K	0.960	0.970
	100K -	0.955	0.960
	250K -	0.940	0.950
4%	15K - 100K	0.955	0.965
	100K -	0.950	0.955
	250K -	0.935	0.945
5%	10K - 100K	0.950	0.960
	100K -	0.940	0.955
	250K -	0.930	0.940
*There is no rate credit for the windstorm or hail percentage deductible if the Limit of Insurance applicable to the property being rated is less than this amount. In such case, the rate modification factor is 1.00.			

II. **EXCEPTION TO PRODUCT RULES**

A. **Rule T. Exclusion of Certain Computer-Related Losses Form SS 05 41**

Exclusion of Certain Computer Related Losses is not available.

B. **Rule V. Three (3) Year Term Policies**

Three (3) Year Term Policies is **not available**.

C. **Rule W. Three (3) Year Term Policies – Inflation Guard**

Three(3) Year Term Policies – Inflation Guard is **not available**.

D. **Rule U. Exclusion – Year 2000 Computer Related and Other Electronic Problems**

form SS 05 42 is not applicable in Illinois.

E. **Rule Z. Terrorism Coverages and Exclusions**

Rejection of TRIA exception:

Illinois law prohibits the exclusion of loss due to fire following an act of terrorism. When coverage for Certified Acts of Terrorism is rejected, the rejection does not apply to fire losses resulting from an act of terrorism.

The 2% rate applied to the Total Spectrum Premium for coverage for Certified Acts of Terrorism will be replaced with a rate of 1% to account for the fire following exposure.

ADDITIONAL RULE FOR ALL PROGRAMS:

Mine Subsidence Insurance (Major Line 3317)

1. Mandatory Counties

Illinois Changes – Mine Subsidence Insurance Endorsement form SS 06 16, must be attached to all new and renewal policies covering eligible buildings(s) and other structures located in the following (non-exempt) counties:

Bond	La Salle	Putnam
Bureau	Logan	Randolph
Christian	McDonough	Rock Island
Clinton	Macoupin	St. Clair
Douglas	Madison	Saline
Franklin	Marion	Sangamon

Fulton
Gallatin
Grundy
Jackson
Jefferson
Knox

Marshall
Menard
Mercer
Montgomery
Peoria
Perry

Tazewell
Vermillion
Washington
Williamson

Waiver of Coverage

Mine Subsidence coverage may not be removed unless specifically waived in writing and the waiver signed by the insured. Use **Notice to Insured – Waiver of Mine Subsidence – Illinois**, form **PC-373**, to waive coverage for risks in the above counties.

2. Exempt Counties

The Mine Subsidence coverage is **not mandatory** in the balance of counties in Illinois. However, when the insured specifically requests this coverage, we must provide it using the same form and premiums as in the mandatory (non-exempt) counties.

Waiver of Coverage

A signed waiver of coverage is **not required** when the insured does not want Mine Subsidence coverage in an exempt county.

3. Coverage

The Illinois Mine Subsidence Act (Article XXXVIII) requires that Mine Subsidence Insurance be available for any building in Illinois on policies providing fire and extended coverage. Coverage applies to direct physical loss of or damage to buildings and must be provided up to a maximum limit of insurance of \$750,000 per building.

Appurtenant Structures

IMPORTANT: Even though certain buildings under the Spectrum policy such as garages, storage buildings and appurtenant structures may not be specifically scheduled in the Declarations, the Mine Subsidence premium **must** be charged for each such building.

Loss Payment Limit

Loss payment is limited to the amount available in the Illinois Mine Subsidence Insurance Fund to reimburse the Company. However, any amount over \$750,000 per building is not reimbursable.

4. Deductible

A 2% deductible (minimum of \$500) applies to each loss, except for 1 - 4 family dwellings. For 1- 4 family dwellings the deductible is \$500. The deductible applies separately to each structure.

5. Eligibility

The Mine Subsidence coverage is available for commercial and residential buildings written on a Spectrum policy providing fire and extended coverage.

However, if structures are already damaged, then an insurer may decline to make Mine Subsidence Coverage available to cover an eligible structure evidencing unrepaired mine subsidence damage, until necessary repairs are made.

6. Not Covered

Coverage is not applicable to:

- a. Personal Property Coverage, except to the extent that improvements and betterments would be considered buildings.
- b. Business Interruption Coverage.
- c. Trees, plants or crops.

d. Living units of commercial and residential buildings (except those described above).

7. Premiums:

Premium for Mine Subsidence coverage may not be altered by any rating plan or program. The following premiums must be charged for each building or structure covered by the policy.

**Premium Schedule for Commercial Properties
And Residential Properties Written on Commercial Forms**

Coverage Limit			Premiums
	Up To	10,000	20
10,001	To	20,000	23
20,001	To	30,000	26
30,001	To	40,000	28
40,001	To	50,000	31
50,001	To	60,000	34
60,001	To	70,000	37
70,001	To	80,000	40
80,001	To	90,000	43
90,001	To	100,000	46
100,001	To	110,000	48
110,001	To	120,000	51
120,001	To	130,000	54
130,001	To	140,000	57
140,001	To	150,000	60
150,001	To	160,000	63
160,001	To	170,000	65
170,001	To	180,000	68
180,001	To	190,000	71
190,001	To	200,000	74
200,001	To	210,000	77
210,001	To	220,000	80
220,001	To	230,000	82
230,001	To	240,000	85
240,001	To	250,000	88
250,001	To	260,000	91
260,001	To	270,000	94
270,001	To	280,000	97
280,001	To	290,000	100
290,001	To	300,000	102
300,001	To	310,000	105
310,001	To	320,000	108
320,001	To	330,000	111
330,001	To	340,000	114
340,001	To	350,000	117
350,001	To	360,000	119
360,001	To	370,000	122
370,001	To	380,000	125
380,001	To	390,000	128
390,001	To	400,000	131
400,001	To	410,000	134

410,001	To	420,000	137
420,001	To	430,000	139
430,001	To	440,000	142
440,001	To	450,000	145
450,001	To	460,000	148
460,001	To	470,000	151
470,001	To	480,000	154
480,001	To	490,000	156
490,001	To	500,000	159
500,001	To	510,000	162
510,001	To	520,000	165
520,001	To	530,000	168
530,001	To	540,000	171
540,001	To	550,000	174
550,001	To	560,000	176
560,001	To	570,000	179
570,001	To	580,000	182
580,001	To	590,000	185
590,001	To	600,000	188
600,001	To	610,000	191
610,001	To	620,000	193
620,001	To	630,000	196
630,001	To	640,000	199
640,001	To	650,000	202
650,001	To	660,000	205
660,001	To	670,000	208
670,001	To	680,000	211
680,001	To	690,000	213
690,001	To	700,000	216
700,001	To	710,000	219
710,001	To	720,000	222
720,001	To	730,000	225
730,001	To	740,000	228
740,001	To	750,000	230

III. EXCEPTIONS TO OPTIONAL COVERAGE RULES

A. Rule 10L. Employment Practices Liability Insurance

1. **Illinois Changes – Employment Practices Liability**, form **SS 09 06**, is mandatory.
2. **Loss Information**
 If the policy is cancelled or non-renewed for other than non-payment of premium or fraud:
 - a. The date and description of Claims and Wrongful Acts must be provided within 30 days after receipt of the Insured's written request.
 - b. Detailed information relating to Claims and Wrongful Acts, including reserve amounts must be provided within 20 days upon receipt of the Insured's written request.

B. Rule 10C. Owners & Contractors Protective

SS 10 30 Illinois Changes – Owners and Contractors Protective Liability Coverage is a mandatory endorsement when optional form **Owners and Contractors Protective Liability Coverage** form **SS 00 31** is purchased.

C. **Rule 3E. Condominium Association Directors and Officers Liability**

Illinois Changes – Condominium Association Directors and Officers Liability Coverage form **SS 20 11** is mandatory when optional form **SS 02 66 Condominium Association Directors and Officers Liability Coverage Form (Claims Made)** is purchased.

D. **Rule 5E. Educator's Legal Liability Coverage form**

Illinois Changes – Educator's Legal Liability Coverage form **SS 02 54** is a mandatory endorsement when optional form **SS 02 45 Educator's Legal Liability Form (Claims Made)** is purchased.

E. **Rule 8.E.2 FailSafe™ MEGA Technology Errors or Omissions Liability**

Illinois Changes – FailSafe Mega Technology Errors or Omissions Liability, Form SS 02 77, must be attached to all policies which include **FailSafe™ MEGA Technology Errors or Omissions Liability Coverage** when the predominant location is in the state of Illinois.

F. **Rule 9E. Florist Error & Omissions Liability**

Florist Error & Omissions Liability form **SS 40 36** is **not available** in Illinois.

G. **Rule 11E. Miscellaneous Errors & Omissions Liability**

Miscellaneous Errors & Omissions Liability form **SS 02 01** is **not available**.

H. **Rule 13E Pastoral Counseling Errors and Omissions Liability Coverage Form**

Illinois Changes – Pastoral Counseling Errors and Omissions Liability Coverage form **SS 02 64** is a mandatory endorsement when optional **Pastoral Counseling Errors and Omissions Liability Coverage Form** form **SS 02 50** is purchased.

I. **Rule 14E Pet Groomers Professional Coverage**

Pet Groomers Professional Liability form **SS 40 37** is **not available** in Illinois.

J. **Rule 28L Technology Services Coverage**

Technology Services Coverage - Illinois form **SS 40 29** applies in lieu of **Technology Services Coverage** form **SS 40 58**.

A separate limit of insurance applies.

K. **Rule 29L Technology Services Coverage – Limited**

Technology Services Coverage – Limited Illinois form **SS 40 30** applies in lieu of **Technology Services Coverage – Limited** form **SS 40 59**.

A separate limit of insurance applies.

L. **Additional Rule Applicable to Contractors Classes Only – Home Repair and Remodeling Coverage**

As a result of State of Illinois Public Act 91-0230, an optional coverage endorsement, **Illinois Changes – Contractors – Home Repair and Remodeling**, form **SS 10 15**, is available to insureds engaged in home repair and remodeling work to residences containing six or fewer dwelling units. A flat charge of \$60, not subject to further modification, applies to this coverage.

M. **Rule 17E. Lawyers Professional Liability Coverage**

Illinois Changes – Lawyers' Professional Liability Coverage, form **SS 24 15**, is a mandatory endorsement when optional **Lawyers' Professional Liability Coverage Form (Claims Made)** form **SS 24 01** is purchased.

N. **13P. Earthquake Coverage Form SS 04 06**

This coverage is also available for the Spectrum Xpand product.

The percentage deductible table and the rating rule in the Earthquake Coverage Rule 13P. is replaced with the rules below.

Deductible Options:

The following minimum and optional percentage earthquake deductibles apply for risks located in Illinois:

The Earthquake Coverage includes a percentage deductible which will be stated in the Declarations. The standard percentage deductible varies by construction:

Construction	Additional EQ Construction Type	Minimum Deductible Percentage	Optional Deductible Percentage
Frame (1) or Veneer (7)	Brick or Masonry Veneer	5%	10%, 15%
	Other than above	2%	5%, 10%, 15%
Joisted Masonry (2)	Hollow Concrete Block	5%	10%, 15%
	Other than above	2%	5%, 10%, 15%
Non-combustible (3)	N/A	2%	5%, 10%, 15%
Masonry Non-combustible (4)	N/A	2%	5%, 10%, 15%
Fire Resistive (6)	N/A	2%	5%, 10%, 15%
Masonry Non-Combustible with Wind Resistive Roofing (9)	N/A	2%	5%, 10%, 15%

Coverage is designated by location/building in the Declarations.

This optional coverage is available in: **All Rating Programs.**

Rating

Step	Action
a.	Determine the Base Rate from the Optional Coverage Rate Pages in the applicable Rating Program. Applicable to Specified Limit: If Building and Business Personal Property both apply to the location, apply the base rate applicable to either Building or Business Personal Property that is the higher of the two base rates.
b.	Multiply the rate determined in (a.) by the Construction Surcharge Factor (if applicable) from the Optional Coverage rate page in the applicable Rating Program. If Building and Business Personal Property both apply to the policy and the building is Brick Veneer, use a Construction Surcharge Factor of 1.0 regardless of which Earthquake Base Rate is applied in a. above.
c.	<input type="checkbox"/> Multiply the Earthquake Base Rate determined above by the appropriate Rate Factor from the table below to convert the rate to a Specified-Limit Earthquake Rate (if applicable).
d.	Multiply the rate determined above by the appropriate Deductible Credit Factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program.
e.	Multiply the rate thus determined by the Building, Business Personal Property, Personal Property of Others plus Tenants Improvements and Betterments Amount of Insurance (per \$100); or, multiply the Specified-Limit Earthquake Rate determined in d. by the Earthquake specified Limit of Insurance (per \$100), which ever is applicable.

f.	If Business Income and Extra Expense applies, multiply the premium determined in e. by 1.20.
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NOTE: If Earthquake coverage is provided, no additional charge is to be made for Earthquake Sprinkler Leakage, as it is included in the Earthquake charge.

The premium for this coverage is in addition to the Policywriting Minimum Premium.

Percent that Specified-Limit is to Total Values (Round to nearest percentage. If .05, use the next highest percentage value).	Rate Factor
90%	1.05
80%	1.10
70%	1.15
60%	1.20
50%	1.30
40%	1.50
30%	1.80
20%	2.25
10%	3.00
5%	4.00

O. 14P. Earthquake Sprinkler Leakage Coverage Form SS 04 07

This coverage is also available for the Spectrum Xpand product.

The deductible statement in the Earthquake Sprinkler Leakage Coverage Rule 14P. is replaced with the deductible options below:

Deductible Options:

The following earthquake sprinkler leakage deductibles apply for risks located in Illinois:

The standard deductible applicable to this endorsement is \$250 under Traditional Spectrum and \$500 under Spectrum Xpand. Options are available:

Traditional Spectrum: \$250, \$500, \$1,000 and \$2,500

Spectrum Xpand: \$500, \$1,000 and \$2,500

Coverage is designated by location/building in the Declarations.

This optional coverage is available in: **All Rating Programs.**

Rating

Step	Action
a.	Determine the Base Rate from the Optional Coverage Rate Pages in the applicable Rating Program. . Applicable to Specified Limit: If Building and Business Personal Property both apply to the policy, apply the base rate applicable to

	either Building or Business Personal Property that is the higher of the two base rates.
b.	Multiply the rate determined in (a.) by the Construction Surcharge factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program. If Building and Business Personal Property both apply to the policy and the building is Brick Veneer, use a Construction Surcharge Factor of 1.0 regardless of which Earthquake Sprinkler Leakage Base Rate is applied in a. above.
c.	Multiply the Earthquake Sprinkler Leakage Base Rate by the appropriate Rate Factor from the table below to convert the Earthquake Sprinkler Leakage Base Rate to a Specified-Limit Earthquake Sprinkler Leakage Rate (if applicable).
d.	Multiply the rate determined above by the Deductible Credit Factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program.
e.	Multiply the rate thus determined by the Building, Business Personal Property, Personal Property of Others plus Tenants Improvements and Betterments Amount of Insurance (per \$100); or, multiply the Specified-Limit Earthquake Sprinkler Leakage Rate determined in d. by the Earthquake Sprinkler Leakage specified Limit of Insurance (per \$100), which ever is applicable.
f.	If Business Income and Extra Expense applies, multiply the premium determined in d. by 1.20.

The premium for this coverage is **in addition to** the Policywriting Minimum Premium.

Percent that Specified-Limit is to Total Values (Round to nearest percentage. If .05, use the next highest percentage value).	Rate Factor
90%	1.05
80%	1.10
70%	1.15
60%	1.20
50%	1.30
40%	1.50
30%	1.80
20%	2.25
10%	3.00
5%	4.00

Q. Reserved for Future Use

R. Reserved for Future Use

S. Reserved for Future Use

T. Additional Rule Applicable to Medical Expenses

The default limit for Medical Expenses is \$5,000 for the classes listed below. The premium for this coverage is contemplated in the rating for Business Liability coverage.

Class Code	Class Description
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58190	Restaurants – With Cooking – Lessors Risk Only
58001	Restaurant – Fine Dining
58011	Restaurant – Full Service (Waiter/Waitress)
58031	Restaurant – Fast Food or Quick Service (Full Cooking)
58101	Restaurant – Cafeterias
58111	Restaurant – Buffets
58161	Caterers
58171	Food Cart – Not Self-Propelled
58051	Restaurant – Delivery Only

An option of \$10,000 is available. To calculate the additional premium, apply a Rate Factor of 1.001 to the Liability premium at each location.

T. Rule 36L. Data Breach Coverage (Claims Made)

Illinois Changes – Data Breach-Defense and Liability, form **SS 10 63**, is a mandatory endorsement when optional form **SS 00 48, Data Breach Coverage – Defense and Liability (Claims Made)** is purchased.

IV. EXCEPTIONS TO RATING PROCEDURES

There are no Exceptions to Rating Procedures

Illinois Exception Page

State Forms/Rules:

- ❖ [Illinois Amendatory form SS 01 23](#)
- ❖ [Illinois Changes Condominium Association Coverage form SS 81 06](#)
- ❖ [Illinois Changes – Defense Costs form SS 10 40](#)
- ❖ [Pollution Exclusion – Limited Exception – Illinois form SS 05 70](#)
- ❖ [Absolute Pollution Exclusion form SS 50 52](#)
- ❖ [Printing Services Errors And Omissions Liability – Illinois form SS 40 06](#)
- ❖ [Exclusion – Electromagnetic Hazard SS 50 41](#)
- ❖ [Limited Exclusion – Electromagnetic Hazard SS 50 44](#)
- ❖ [Veterinarian's And Veterinary Clinic Professional Liability Coverage – Illinois SS 40 99](#)
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- ❖ [Hearing Aid Establishment Professional Services Coverage – Illinois SS 41 08](#)
- ❖ [Funeral Director's Professional Services Coverages – Illinois](#)
- ❖ [Exclusion – Total Pollution With Hostile Fire Exception SS 50 74](#)
- ❖ [Windstorm or Hail Percentage Deductible SS 82 10](#)

Exceptions To:

1. Product Rules

- ❖ [Rule T. Exclusion of Certain Computer-Related Losses](#)
- ❖ [Rule V. Three \(3\) Year Term Policies](#)
- ❖ [Rule W. Three \(3\) Year Term Policies – Inflation Guard](#)
- ❖ [Rule U. Exclusion – Year 2000 Computer Related And Other Electronic Problems](#)
- ❖ [Rule Z. Terrorism Coverages and Exclusions](#)

2. Optional Coverage Rules:

- ❖ [Rule 10L. Employment Practices Liability Insurance](#)
- ❖ [Rule 10C. Owners & Contractors Protective](#)
- ❖ [Rule 3E. Condominium Association Directors and Officers Liability](#)
- ❖ [Rule 5E. Educator's Legal Liability Coverage](#)
- ❖ [Rule 8.E. FailSafe™ MEGA Technology Errors or Omissions Liability Illinois Changes](#)
- ❖ [Rule 9E. Florist Error & Omissions Liability](#)
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3. [Rating Procedures](#)

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- C. **Illinois Changes – Defense Costs form SS 10 40** must be attached to all policies covering property located in Illinois.
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- F. **Printing Services Errors And Omissions Liability – Illinois form SS 40 06** applies in lieu of **Printing Services Errors And Omissions Liability form SS 04 35**.
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- H. **Limited Exclusion – Electromagnetic Hazard form SS 50 44** is **not available** in the state of Illinois.
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- K. **Hearing Aid Establishment Professional Services Coverage – Illinois form SS 41 08** applies in lieu of **Hearing Aid Establishment Professional Services Coverage form SS 41 07**.
- L. **Funeral Director's Professional Services Coverage – Illinois form SS 41 10** applies in lieu of **Funeral Director's Professional Services Coverage form SS 41 09**.
- M. **Exclusion – Total Pollution with Hostile Fire Exception form SS 50 74** is used in lieu of **Exclusion – Total Pollution form SS 50 73** in the state of Illinois.
- N. **Windstorm or Hail Percentage Deductible Form SS 82 10**
This endorsement applies a 1%, 2%, 3%, 4% or 5% deductible applicable to windstorm or hail. The selected deductible will be shown separately in the Declarations for each covered location. This deductible is subject to a \$500 minimum deductible per occurrence. The use of this endorsement is at the company's discretion, subject to applicable law.

The appropriate percentage deductible factor shown below shall be applied to the premium for each location to which this form is applicable.

Wind Deductible	Amount of Insurance	FF, MF, CT and Xpand	All Other Programs
1%	50K - 100K	0.970	0.980
	100K - 250K	0.960	0.970
	250K -	0.950	0.960
2%	25K - 100K	0.965	0.975
	100K - 250K	0.955	0.965
	250K -	0.945	0.955

3%	16K - 100K	0.960	0.970
	100K -	0.955	0.960
	250K -	0.940	0.950
4%	15K - 100K	0.955	0.965
	100K -	0.950	0.955
	250K -	0.935	0.945
5%	10K - 100K	0.950	0.960
	100K -	0.940	0.955
	250K -	0.930	0.940
*There is no rate credit for the windstorm or hail percentage deductible if the Limit of Insurance applicable to the property being rated is less than this amount. In such case, the rate modification factor is 1.00.			

II. EXCEPTION TO PRODUCT RULES

A. **Rule T. Exclusion of Certain Computer-Related Losses Form SS 05 41**

Exclusion of Certain Computer Related Losses is not available.

B. **Rule V. Three (3) Year Term Policies**

Three (3) Year Term Policies is **not available**.

C. **Rule W. Three (3) Year Term Policies – Inflation Guard**

Three(3) Year Term Policies – Inflation Guard is **not available**.

D. **Rule U. Exclusion – Year 2000 Computer Related and Other Electronic Problems**

form SS 05 42 is not applicable in Illinois.

E. **Rule Z. Terrorism Coverages and Exclusions**

Rejection of TRIA exception:

Illinois law prohibits the exclusion of loss due to fire following an act of terrorism. When coverage for Certified Acts of Terrorism is rejected, the rejection does not apply to fire losses resulting from an act of terrorism.

The 2% rate applied to the Total Spectrum Premium for coverage for Certified Acts of Terrorism will be replaced with a rate of 1% to account for the fire following exposure.

ADDITIONAL RULE FOR ALL PROGRAMS:

Mine Subsidence Insurance (Major Line 3317)

1. Mandatory Counties

Illinois Changes – Mine Subsidence Insurance Endorsement form SS 06 16, must be attached to all new and renewal policies covering eligible buildings(s) and other structures located in the following (non-exempt) counties:

Bond
Bureau
Christian
Clinton
Douglas
Franklin

La Salle
Logan
McDonough
Macoupin
Madison
Marion

Putnam
Randolph
Rock Island
St. Clair
Saline
Sangamon

Fulton
Gallatin
Grundy
Jackson
Jefferson
Knox

Marshall
Menard
Mercer
Montgomery
Peoria
Perry

Tazewell
Vermillion
Washington
Williamson

Waiver of Coverage

Mine Subsidence coverage may not be removed unless specifically waived in writing and the waiver signed by the insured. Use **Notice to Insured – Waiver of Mine Subsidence – Illinois**, form **PC-373**, to waive coverage for risks in the above counties.

2. Exempt Counties

The Mine Subsidence coverage is **not mandatory** in the balance of counties in Illinois. However, when the insured specifically requests this coverage, we must provide it using the same form and premiums as in the mandatory (non-exempt) counties.

Waiver of Coverage

A signed waiver of coverage is **not required** when the insured does not want Mine Subsidence coverage in an exempt county.

3. Coverage

The Illinois Mine Subsidence Act (Article XXXVIII) requires that Mine Subsidence Insurance be available for any building in Illinois on policies providing fire and extended coverage. Coverage applies to direct physical loss of or damage to buildings and must be provided up to a maximum limit of insurance of \$750,000 per building.

Appurtenant Structures

IMPORTANT: Even though certain buildings under the Spectrum policy such as garages, storage buildings and appurtenant structures may not be specifically scheduled in the Declarations, the Mine Subsidence premium **must** be charged for each such building.

Loss Payment Limit

Loss payment is limited to the amount available in the Illinois Mine Subsidence Insurance Fund to reimburse the Company. However, any amount over \$750,000 per building is not reimbursable.

4. Deductible

A 2% deductible (minimum of \$500) applies to each loss, except for 1 - 4 family dwellings. For 1- 4 family dwellings the deductible is \$500. The deductible applies separately to each structure.

5. Eligibility

The Mine Subsidence coverage is available for commercial and residential buildings written on a Spectrum policy providing fire and extended coverage.

However, if structures are already damaged, then an insurer may decline to make Mine Subsidence Coverage available to cover an eligible structure evidencing unrepaired mine subsidence damage, until necessary repairs are made.

6. Not Covered

Coverage is not applicable to:

- a. Personal Property Coverage, except to the extent that improvements and betterments would be considered buildings.
- b. Business Interruption Coverage.
- c. Trees, plants or crops.

d. Living units of commercial and residential buildings (except those described above).

7. Premiums:

Premium for Mine Subsidence coverage may not be altered by any rating plan or program. The following premiums must be charged for each building or structure covered by the policy.

**Premium Schedule for Commercial Properties
And Residential Properties Written on Commercial Forms**

Coverage Limit			Premiums
	Up To	10,000	<u>2023</u>
10,001	To	20,000	<u>2326</u>
20,001	To	30,000	<u>2630</u>
30,001	To	40,000	<u>2833</u>
40,001	To	50,000	<u>3136</u>
50,001	To	60,000	<u>3440</u>
60,001	To	70,000	<u>3743</u>
70,001	To	80,000	<u>4046</u>
80,001	To	90,000	<u>4350</u>
90,001	To	100,000	<u>4653</u>
100,001	To	110,000	<u>4856</u>
110,001	To	120,000	<u>5159</u>
120,001	To	130,000	<u>5463</u>
130,001	To	140,000	<u>5766</u>
140,001	To	150,000	<u>6069</u>
150,001	To	160,000	<u>6373</u>
160,001	To	170,000	<u>6576</u>
170,001	To	180,000	<u>6879</u>
180,001	To	190,000	<u>7183</u>
190,001	To	200,000	<u>7486</u>
200,001	To	210,000	<u>7789</u>
210,001	To	220,000	<u>8092</u>
220,001	To	230,000	<u>8296</u>
230,001	To	240,000	<u>8599</u>
240,001	To	250,000	<u>88402</u>
250,001	To	260,000	<u>91406</u>
260,001	To	270,000	<u>94409</u>
270,001	To	280,000	<u>97442</u>
280,001	To	290,000	<u>100446</u>
290,001	To	300,000	<u>102449</u>
300,001	To	310,000	<u>105422</u>
310,001	To	320,000	<u>108425</u>
320,001	To	330,000	<u>111429</u>
330,001	To	340,000	<u>114432</u>
340,001	To	350,000	<u>117435</u>
350,001	To	360,000	<u>119439</u>
360,001	To	370,000	<u>122442</u>
370,001	To	380,000	<u>125445</u>
380,001	To	390,000	<u>128449</u>
390,001	To	400,000	<u>131452</u>
400,001	To	410,000	<u>134455</u>

410,001	To	420,000	<u>137458</u>
420,001	To	430,000	<u>139462</u>
430,001	To	440,000	<u>142465</u>
440,001	To	450,000	<u>145468</u>
450,001	To	460,000	<u>148472</u>
460,001	To	470,000	<u>151475</u>
470,001	To	480,000	<u>154478</u>
480,001	To	490,000	<u>156482</u>
490,001	To	500,000	<u>159485</u>
500,001	To	510,000	<u>162488</u>
510,001	To	520,000	<u>165491</u>
520,001	To	530,000	<u>168495</u>
530,001	To	540,000	<u>171498</u>
540,001	To	550,000	<u>174204</u>
550,001	To	560,000	<u>176205</u>
560,001	To	570,000	<u>179208</u>
570,001	To	580,000	<u>182244</u>
580,001	To	590,000	<u>185245</u>
590,001	To	600,000	<u>188248</u>
600,001	To	610,000	<u>191224</u>
610,001	To	620,000	<u>193224</u>
620,001	To	630,000	<u>196228</u>
630,001	To	640,000	<u>199234</u>
640,001	To	650,000	<u>202234</u>
650,001	To	660,000	<u>205238</u>
660,001	To	670,000	<u>208244</u>
670,001	To	680,000	<u>211244</u>
680,001	To	690,000	<u>213248</u>
690,001	To	700,000	<u>216254</u>
700,001	To	710,000	<u>219254</u>
710,001	To	720,000	<u>222257</u>
720,001	To	730,000	<u>225264</u>
730,001	To	740,000	<u>228264</u>
740,001	To	750,000	<u>230267</u>

III. **EXCEPTIONS TO OPTIONAL COVERAGE RULES**

A. **Rule 10L. Employment Practices Liability Insurance**

1. **Illinois Changes – Employment Practices Liability**, form **SS 09 06**, is mandatory.
2. **Loss Information**
If the policy is cancelled or non-renewed for other than non-payment of premium or fraud:
 - a. The date and description of Claims and Wrongful Acts must be provided within 30 days after receipt of the Insured's written request.
 - b. Detailed information relating to Claims and Wrongful Acts, including reserve amounts must be provided within 20 days upon receipt of the Insured's written request.

B. **Rule 10C. Owners & Contractors Protective**

SS 10 30 Illinois Changes – Owners and Contractors Protective Liability Coverage is a mandatory endorsement when optional form **Owners and Contractors Protective Liability Coverage** form **SS 00 31** is purchased.

C. **Rule 3E. Condominium Association Directors and Officers Liability**

Illinois Changes – Condominium Association Directors and Officers Liability Coverage form **SS 20 11** is mandatory when optional form **SS 02 66 Condominium Association Directors and Officers Liability Coverage Form (Claims Made)** is purchased.

D. **Rule 5E. Educator's Legal Liability Coverage form**

Illinois Changes – Educator's Legal Liability Coverage form **SS 02 54** is a mandatory endorsement when optional form **SS 02 45 Educator's Legal Liability Form (Claims Made)** is purchased.

E. **Rule 8.E.2 FailSafe™ MEGA Technology Errors or Omissions Liability**

Illinois Changes – FailSafe Mega Technology Errors or Omissions Liability, Form SS 02 77, must be attached to all policies which include **FailSafe™ MEGA Technology Errors or Omissions Liability Coverage** when the predominant location is in the state of Illinois.

F. **Rule 9E. Florist Error & Omissions Liability**

Florist Error & Omissions Liability form **SS 40 36** is **not available** in Illinois.

G. **Rule 11E. Miscellaneous Errors & Omissions Liability**

Miscellaneous Errors & Omissions Liability form **SS 02 01** is **not available**.

H. **Rule 13E Pastoral Counseling Errors and Omissions Liability Coverage Form**

Illinois Changes – Pastoral Counseling Errors and Omissions Liability Coverage form **SS 02 64** is a mandatory endorsement when optional **Pastoral Counseling Errors and Omissions Liability Coverage Form** form **SS 02 50** is purchased.

I. **Rule 14E Pet Groomers Professional Coverage**

Pet Groomers Professional Liability form **SS 40 37** is **not available** in Illinois.

J. **Rule 28L Technology Services Coverage**

Technology Services Coverage - Illinois form **SS 40 29** applies in lieu of **Technology Services Coverage** form **SS 40 58**.

A separate limit of insurance applies.

K. **Rule 29L Technology Services Coverage – Limited**

Technology Services Coverage – Limited Illinois form **SS 40 30** applies in lieu of **Technology Services Coverage – Limited** form **SS 40 59**.

A separate limit of insurance applies.

L. **Additional Rule Applicable to Contractors Classes Only – Home Repair and Remodeling Coverage**

As a result of State of Illinois Public Act 91-0230, an optional coverage endorsement, **Illinois Changes – Contractors – Home Repair and Remodeling**, form **SS 10 15**, is available to insureds engaged in home repair and remodeling work to residences containing six or fewer dwelling units. A flat charge of \$60, not subject to further modification, applies to this coverage.

M. **Rule 17E. Lawyers Professional Liability Coverage**

Illinois Changes – Lawyers' Professional Liability Coverage, form **SS 24 15**, is a mandatory endorsement when optional **Lawyers' Professional Liability Coverage Form (Claims Made)** form **SS 24 01** is purchased.

N. **13P. Earthquake Coverage Form SS 04 06**

This coverage is also available for the Spectrum Xpand product.

The percentage deductible table and the rating rule in the Earthquake Coverage Rule 13P. is replaced with the rules below.

Deductible Options:

The following minimum and optional percentage earthquake deductibles apply for risks located in Illinois: The Earthquake Coverage includes a percentage deductible which will be stated in the Declarations. The standard percentage deductible varies by construction:

Construction	Additional EQ Construction Type	Minimum Deductible Percentage	Optional Deductible Percentage
Frame (1) or Veneer (7)	Brick or Masonry Veneer	5%	10%, 15%
	Other than above	2%	5%, 10%, 15%
Joisted Masonry (2)	Hollow Concrete Block	5%	10%, 15%
	Other than above	2%	5%, 10%, 15%
Non-combustible (3)	N/A	2%	5%, 10%, 15%
Masonry Non-combustible (4)	N/A	2%	5%, 10%, 15%
Fire Resistive (6)	N/A	2%	5%, 10%, 15%
Masonry Non-Combustible with Wind Resistive Roofing (9)	N/A	2%	5%, 10%, 15%

Coverage is designated by location/building in the Declarations.

This optional coverage is available in: **All Rating Programs.**

Rating

Step	Action
a.	Determine the Base Rate from the Optional Coverage Rate Pages in the applicable Rating Program. Applicable to Specified Limit: If Building and Business Personal Property both apply to the location, apply the base rate applicable to either Building or Business Personal Property that is the higher of the two base rates.
b.	Multiply the rate determined in (a.) by the Construction Surcharge Factor (if applicable) from the Optional Coverage rate page in the applicable Rating Program. If Building and Business Personal Property both apply to the policy and the building is Brick Veneer, use a Construction Surcharge Factor of 1.0 regardless of which Earthquake Base Rate is applied in a. above.
c.	<input type="checkbox"/> Multiply the Earthquake Base Rate determined above by the appropriate Rate Factor from the table below to convert the rate to a Specified-Limit Earthquake Rate (if applicable).
d.	Multiply the rate determined above by the appropriate Deductible Credit Factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program.
e.	Multiply the rate thus determined by the Building, Business Personal Property, Personal Property of Others plus Tenants Improvements and Betterments Amount of Insurance (per \$100); or, multiply the Specified-Limit Earthquake Rate determined in d. by the Earthquake specified Limit of Insurance (per \$100), which ever is applicable.

f. If Business Income and Extra Expense applies, multiply the premium determined in e. by 1.20.

NOTE: If Earthquake coverage is provided, no additional charge is to be made for Earthquake Sprinkler Leakage, as it is included in the Earthquake charge.

The premium for this coverage is in addition to the Policywriting Minimum Premium.

Percent that Specified-Limit is to Total Values (Round to nearest percentage. If .05, use the next highest percentage value).	Rate Factor
90%	1.05
80%	1.10
70%	1.15
60%	1.20
50%	1.30
40%	1.50
30%	1.80
20%	2.25
10%	3.00
5%	4.00

O. 14P. Earthquake Sprinkler Leakage Coverage Form SS 04 07

This coverage is also available for the Spectrum Xpand product.

The deductible statement in the Earthquake Sprinkler Leakage Coverage Rule 14P. is replaced with the deductible options below:

Deductible Options:

The following earthquake sprinkler leakage deductibles apply for risks located in Illinois:

The standard deductible applicable to this endorsement is \$250 under Traditional Spectrum and \$500 under Spectrum Xpand. Options are available:

Traditional Spectrum: \$250, \$500, \$1,000 and \$2,500

Spectrum Xpand: \$500, \$1,000 and \$2,500

Coverage is designated by location/building in the Declarations.

This optional coverage is available in: **All Rating Programs.**

Rating

Step	Action
a.	Determine the Base Rate from the Optional Coverage Rate Pages in the applicable Rating Program. . Applicable to Specified Limit: If Building and Business Personal Property both apply to the policy, apply the base rate applicable to

	either Building or Business Personal Property that is the higher of the two base rates.
b.	Multiply the rate determined in (a.) by the Construction Surcharge factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program. If Building and Business Personal Property both apply to the policy and the building is Brick Veneer, use a Construction Surcharge Factor of 1.0 regardless of which Earthquake Sprinkler Leakage Base Rate is applied in a. above.
c.	Multiply the Earthquake Sprinkler Leakage Base Rate by the appropriate Rate Factor from the table below to convert the Earthquake Sprinkler Leakage Base Rate to a Specified-Limit Earthquake Sprinkler Leakage Rate (if applicable).
d.	Multiply the rate determined above by the Deductible Credit Factor (if applicable) from the Optional Coverage Rate Pages in the applicable Rating Program.
e.	Multiply the rate thus determined by the Building, Business Personal Property, Personal Property of Others plus Tenants Improvements and Betterments Amount of Insurance (per \$100); or, multiply the Specified-Limit Earthquake Sprinkler Leakage Rate determined in d. by the Earthquake Sprinkler Leakage specified Limit of Insurance (per \$100), which ever is applicable.
f.	If Business Income and Extra Expense applies, multiply the premium determined in d. by 1.20.

The premium for this coverage is **in addition to** the Policywriting Minimum Premium.

Percent that Specified-Limit is to Total Values (Round to nearest percentage. If .05, use the next highest percentage value).	Rate Factor
90%	1.05
80%	1.10
70%	1.15
60%	1.20
50%	1.30
40%	1.50
30%	1.80
20%	2.25
10%	3.00
5%	4.00

Q. Reserved for Future Use

R. Reserved for Future Use

S. Reserved for Future Use

T. Additional Rule Applicable to Medical Expenses

The default limit for Medical Expenses is \$5,000 for the classes listed below. The premium for this coverage is contemplated in the rating for Business Liability coverage.

Class Code	Class Description
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58190	Restaurants – With Cooking – Lessors Risk Only
58001	Restaurant – Fine Dining
58011	Restaurant – Full Service (Waiter/Waitress)
58031	Restaurant – Fast Food or Quick Service (Full Cooking)
58101	Restaurant – Cafeterias
58111	Restaurant – Buffets
58161	Caterers
58171	Food Cart – Not Self-Propelled
58051	Restaurant – Delivery Only

An option of \$10,000 is available. To calculate the additional premium, apply a Rate Factor of 1.001 to the Liability premium at each location.

T. Rule 36L. Data Breach Coverage (Claims Made)

Illinois Changes – Data Breach-Defense and Liability, form **SS 10 63**, is a mandatory endorsement when optional form **SS 00 48, Data Breach Coverage – Defense and Liability (Claims Made)** is purchased.

IV. EXCEPTIONS TO RATING PROCEDURES

There are no Exceptions to Rating Procedures