

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Filing at a Glance

Companies: Civic Property and Casualty Company
Exact Property and Casualty Company
Farmers Insurance Exchange
Mid-Century Insurance Company
Neighborhood Spirit Property & Casualty Company
Truck Insurance Exchange

Product Name: Businessowners
State: California
TOI: 05.0 CMP Liability and Non-Liability
Sub-TOI: 05.0002 Businessowners
Filing Type: Form
Date Submitted: 02/21/2007
SERFF Tr Num: FARM-125109388
SERFF Status: Closed-Approved
State Tr Num: 07-1577; 07-1578; 07-1579; 07-1580; 07-1581; 07-1582
State Status: Approved
Co Tr Num: J2CA070220BPBD1

Effective Date 09/01/2007
Requested (New):
Effective Date 11/01/2007
Requested (Renewal):
Author(s): Tina Campbell
Reviewer(s): Richard Patterson (primary), Bill Duncan
Disposition Date: 04/18/2007
Disposition Status: Approved
Effective Date (New):
Effective Date (Renewal):

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

General Information

Project Name: Exclusion of Loss Due to Virus or Bacteria Status of Filing in Domicile: Pending
Project Number: J-CA-2007-BP-F Domicile Status Comments: Filing is being made in California
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 04/18/2007
State Status Changed: 04/18/2007 Deemer Date: 05/01/2007
Created By: Cynthia Nelson Submitted By: Bernice Diaz
Corresponding Filing Tracking Number:

Filing Description:

Farmers Insurance Group of Companies respectfully submits the following forms designed to enhance coverage for our Businessowners, Habitational, and Auto Service and Repair programs.

1st Edition J6316 – EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA – For use with our Businessowners and Habitational programs – Is modeled after the corresponding ISO endorsement BP 06 01 01 07 that was contained in ISO filing CL-06-OVBEF effective 01/01 2007; and referenced by CDI. Filing Number- 06-4833. Our Businessowners Package Policies (other than Auto Services & Repair) contain the Businessowners Special Property Coverage Form – BP 00 02. In like fashion, our Habitational Policies contain a Property Coverage Form modeled from the BP 00 02. The approved BP 06 01 01 07 is written with reference points attaching to the newer BP 00 03 01 06 Businessowners Coverage Form. The reference points of the endorsement are not compatible with the appropriate coverage form; therefore, we created the J6316, 1st Edition.

1st Edition J6315 – EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA – For use with our Auto Service and Repair program – Is modeled after the corresponding ISO endorsement BP 06 01 01 07, which was contained in ISO filing CL-06-OVBEF, effective 01/01 2007. Our Auto Services and Repair Businessowners program is written to a platform based upon an older ISO Businessowners Coverage Form BP 00 03 07 02. The approved BP 06 01 01 07 is written with reference points attaching to the newer BP 00 03 01 06 Businessowners Coverage Form. The reference points of the endorsement are not compatible with the appropriate coverage form; therefore, we created the J6315, 1st Edition.

Our effective dates for these forms are September 1, 2007 for new business and November 1, 2007 for renewals.

If you have any questions regarding this forms filing, please contact Ted Petersen at (805) 306-6542, fax number (805) 306-6667 or email Ted.Petersen@FarmersInsurance.com. Please reference the filing numbers listed on the first page. Your early approval of this filing is appreciated.

Company and Contact

Filing Contact Information

Charlene Hall, Commercial Contract Manager
6303 Owensmouth Ave.
Woodland Hills, CA 91367
Charlene_Hall@farmersinsurance.com
818-936-8423 [Phone]

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Filing Company Information

Civic Property and Casualty CoCode: 10315 State of Domicile: California
Company Group Code: 212 Company Type:
4680 Wilshire Blvd. Group Name: State ID Number:
Los Angeles, CA 90010 FEIN Number: 95-4528269
(323) 932-3056 ext. [Phone]

Exact Property and Casualty CoCode: 10318 State of Domicile: California
Company Group Code: 212 Company Type:
4680 Wilshire Blvd. Group Name: State ID Number:
Los Angeles, CA 90010 FEIN Number: 95-4528266
(323) 932-3056 ext. [Phone]

Farmers Insurance Exchange CoCode: 21652 State of Domicile: California
4680 Wilshire Blvd. Group Code: 212 Company Type:
Los Angeles, CA 90010 Group Name: State ID Number: 24000
(323) 932-3056 ext. [Phone] FEIN Number: 95-2575893

Mid-Century Insurance Company CoCode: 21687 State of Domicile: California
4680 Wilshire Blvd. Group Code: 212 Company Type:
Los Angeles, CA 90010 Group Name: State ID Number: 45400
(323) 932-3056 ext. [Phone] FEIN Number: 95-6016640

Neighborhood Spirit Property & CoCode: 10317 State of Domicile: California
Casualty Company Group Code: 212 Company Type:
4680 Wilshire Blvd. Group Name: State ID Number:
Los Angeles, CA 90010 FEIN Number: 95-4528264
(323) 932-3056 ext. [Phone]

Truck Insurance Exchange CoCode: 21709 State of Domicile: California
4680 Wilshire Blvd. Group Code: 212 Company Type:
Los Angeles, CA 90010 Group Name: State ID Number: 74500
(323) 932-3056 ext. [Phone] FEIN Number: 95-2575892

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:

FARM-125109388

State Tracking #:

07-1577; 07-1578; 07-1579; 07-1580; 07-1...

Company Tracking #:

J2CA070220BPBD1

State:

California

First Filing Company:

Civic Property and Casualty Company, ...

TOI/Sub-TOI:

05.0 CMP Liability and Non-Liability/05.0002 Businessowners

Product Name:

Businessowners

Project Name/Number:

Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Bill Duncan	04/18/2007	04/18/2007

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending company response	Richard Patterson	03/13/2007	03/13/2007
Pending company response	Jesse Rivera	02/28/2007	02/28/2007
Pending company response	Jesse Rivera	02/23/2007	02/23/2007

Response Letters

Responded By	Created On	Date Submitted
Bernice Diaz	03/16/2007	03/16/2007
Bernice Diaz	02/26/2007	02/26/2007

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	CA-FA	Bernice Diaz	02/28/2007	02/28/2007

SERFF Tracking #: FARM-125109388 **State Tracking #:** 07-1577; 07-1578; 07-1579; 07-1580; 07-1... **Company Tracking #:** J2CA070220BPBD1

State: California **First Filing Company:** Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Disposition

Disposition Date: 04/18/2007

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Only the changes specifically indicated in the application set forth above, as it may have been amended, are approved. Nothing in this letter shall constitute approval of any other application, whether incorporated by reference, or filed prior or subsequent to the application set forth above. The insurer shall begin issuing policies pursuant to this approval within 90 days of the date of this approval, provided that the insurer is licensed in California to transact the line of insurance for which the approval is given. The insurer may implement this approval earlier if it is able to do so. Regardless of the implementation date, the insurer shall implement this approval with the same effective date for both new and renewal business and shall offer this product to all eligible applicants as of the implementation date. This approval shall continue to have full force and effect until such time as a subsequent change for the referenced lines or programs may be approved or ordered by the Insurance Commissioner.

If any portion of the application or related documentation conflicts with California law, that portion is specifically not approved. This approval does not constitute an approval of underwriting guidelines nor the specific language, coverages, terms, covenants and conditions contained in any forms, or the forms themselves. Policy forms and underwriting guidelines included in this filing were reviewed only insofar as they relate to rates contained in this filing or currently on file with the California Department of Insurance. Any subsequent changes to underwriting guidelines or coverage, terms, covenants and conditions contained in any forms must be submitted with supporting documentation where those changes result in any rating impact. The Commissioner may at any time take any action allowed by law if he determines that any underwriting guidelines, forms or procedures for application of rates, or any other portions of the application conflict with any applicable laws or regulations.

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Prior Approval Rate Application		Yes
Supporting Document	CA-RA2, CA-RA3, CA-RA4		No
Supporting Document (revised)	CA-FA		No
Supporting Document	CA-FA		No
Form	Exclusion of Loss Due to Virus or Bacteria		No
Form	Exclusion of Loss Due to Virus or Bacteria		No

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Objection Letter

Objection Letter Status Pending company response
Objection Letter Date 03/13/2007
Submitted Date 03/13/2007
Respond By Date

Dear Charlene Hall,

Introduction:

ISO indicated its endorsement filings, referenced in your memorandum, were not being made in response to any particular past virus/bacterial losses, but rather to reinforce policy intent and to avoid or limit the number of disputes that may otherwise arise.

For the Farmers' companies, what is the anticipated annualized premium level impact attributed to the proposed forms amendments due to the elimination of losses, if any?

Please respond by March 20, 2007.

Conclusion:

Sincerely,
Richard Patterson

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Objection Letter

Objection Letter Status	Pending company response
Objection Letter Date	02/28/2007
Submitted Date	02/28/2007
Respond By Date	

Dear Charlene Hall,

Introduction:

We also need the complete CA-FA page. I need it today.

Conclusion:

Sincerely,
Jesse Rivera

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Objection Letter

Objection Letter Status Pending company response
Objection Letter Date 02/23/2007
Submitted Date 02/23/2007
Respond By Date

Dear Charlene Hall,

Introduction:

Please submit the CA-RA2, CA-RA3 and CA-RA4.

Conclusion:

Sincerely,
Jesse Rivera

State: California First Filing Company: Civic Property and Casualty Company, ...
 TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
 Product Name: Businessowners
 Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Response Letter

Response Letter Status Submitted to State
 Response Letter Date 03/16/2007
 Submitted Date 03/16/2007

Dear Richard Patterson,

Introduction:

Response 1

Comments:

Hi Richard,

CA-FA has been revised to accurately reflect that this is not a restriction of coverage, but it is actually just a clarification of coverage. As such, there is no anticipated annualized premium level impact.

Sorry for any inconvenience this may have caused you. If you have any further questions please give me a call at (805) 306-6517.

Thank you,

Bernice Diaz

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	CA-FA
Comments:	Attached is the CA-FA requested.
Attachment(s):	CAFA.pdf CA-FA.rev.pdf
<i>Previous Version</i>	
Satisfied - Item:	CA-FA
Comments:	Attached is the CA-FA requested.
Attachment(s):	CAFA.pdf

No Form Schedule items changed.

SERFF Tracking #: FARM-125109388 **State Tracking #:** 07-1577; 07-1578; 07-1579; 07-1580; 07-1...
Company Tracking #: J2CA070220BPBD1

State: California **First Filing Company:** Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

No Rate/Rule Schedule items changed.

Conclusion:

*Sincerely,
Bernice Diaz*

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Response Letter

Response Letter Status Submitted to State
Response Letter Date 02/26/2007
Submitted Date 02/26/2007

Dear Richard Patterson,

Introduction:

Response 1

Comments:

Added CA-RA2, CA-RA3, CA-RA4.

Sorry for any inconvenience this may have caused. If you need any further information please feel free to call me at (805) 306-6517.

Thank you,

Bernice Diaz

Changed Items:

Table with 2 columns: Field (Satisfied - Item, Comments, Attachment(s)) and Value (CA-RA2, CA-RA3, CA-RA4, CA-RA234.pdf)

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,

Bernice Diaz

State: California First Filing Company: Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Amendment Letter

Submitted Date: 02/28/2007

Comments:

Attached please find the CA-FA as requested. Please correct the effective date for New Business to be 11/1/07 as California uses the same effective dates for new business and renewals.

Sorry for any inconvenience this may have caused you. If you have any further questions please call me at (805) 306-6517.

Thank you,
Bernice Diaz

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	CA-FA
Comments:	Attached is the CA-FA requested.
Attachment(s):	CAFA.pdf

SERFF Tracking #:	FARM-125109388	State Tracking #:	07-1577; 07-1578; 07-1579; 07-1580; 07-1...	Company Tracking #:	J2CA070220BPBD1
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State:	California	First Filing Company:	Civic Property and Casualty Company, ...
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0002 Businessowners		
Product Name:	Businessowners		
Project Name/Number:	Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking #: FARM-125109388 **State Tracking #:** 07-1577; 07-1578; 07-1579; 07-1580; 07-1... **Company Tracking #:** J2CA070220BPBD1

State: California **First Filing Company:** Civic Property and Casualty Company, ...
TOI/Sub-TOI: 05.0 CMP Liability and Non-Liability/05.0002 Businessowners
Product Name: Businessowners
Project Name/Number: Exclusion of Loss Due to Virus or Bacteria/J-CA-2007-BP-F

Supporting Document Schedules

Satisfied - Item:	Prior Approval Rate Application
Comments:	
Attachment(s):	CDIcombined.pdf
Item Status:	
Status Date:	

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File # :	J-2-CA-07-02-15-BP-TP1
File Contains Group Data? <input checked="" type="checkbox"/>	TRUE
Latest applicable CDI File No. (in this Line, Subline and/or Program):	05-603
	Mid Century Insurance Company
Group Name:	Farmers Insurance Group
NAIC Company Code:	21687
NAIC Group Code:	212
Organized under the laws of the state of:	CA
Personal or Commercial?	COMMERCIAL ▼
Line of Insurance:	COMMERCIAL MULTI-PERIL ▼
Subline:	BUSINESSOWNERS ▼
Program:	All Lines of Businessowners including ASR & HAB
Home Office Street Address:	4680 Wilshire Blvd
City:	Los Angeles
	California
Zip Code:	90010-3807
Main Administrative Office in California Street Address/PO Box :	3041 Cochran St.
City:	Simi Valley, CA
Zip Code:	90065
Name of Contact Person:	Ted Petersen
Title of Contact Person:	Risk Management Consultant
Phone Number:	805-306-6542
FAX Number:	805-306-6667
Internet Address:	ted.petersen@farmersinsurance.com
Street Address/PO Box:	as above
City:	
State:	
Zip Code:	

Department Use only	
CDI File #	
Date Filed	
Compliance Date	
Date Public Notified	
Deemer Date	
Intake Analyst	
Bureau Code	
Senior Analyst	
Group Filing X Ref.	
Filing Type	
Percent Change	0.00%

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File #: J-2-CA-07-02-15-BP-TP1

File Contains Group Data? TRUE

Latest applicable CDI File No. (in this Line, Subline and/or Program): 05-604

Neighborhood Spirit Property and

Group Name: Farmers Insurance Group

NAIC Company Code: 10318

NAIC Group Code: 212

Organized under the laws of the state of: CA

Personal or Commercial? COMMERCIAL ▼

Line of Insurance: COMMERCIAL MULTI-PERIL ▼

Subline: BUSINESSOWNERS ▼

Program: All Lines of Businessowners including ASR & HAB

Home Office Street Address: 4680 Wilshire Blvd

City: Los Angeles

California

Zip Code: 90010-3807

Main Administrative Office in California

Street Address/PO Box: 3041 Cochran St.

City: Simi Valley, CA

Zip Code: 90065

Name of Contact Person: Ted Petersen

Title of Contact Person: Risk Management Consultant

Phone Number: 805-306-6542

FAX Number: 805-306-6667

Internet Address: ted.petersen@farmersinsurance.com

Street Address/PO Box: as above

City:

State:

Zip Code:

Department Use only	
CDI File #:	
Date Filed:	
Compliance Date:	
Date Public Notified:	
Deemer Date:	
Intake Analyst:	
Bureau Code:	
Senior Analyst:	
Group Filing X Ref.:	
Filing Type:	
Percent Change:	0.00%

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File # :	J-2-CA-07-02-15-BP-TP1
File Contains Group Data? <input checked="" type="checkbox"/>	TRUE
Latest applicable CDI File No. (in this Line, Subline and/or Program):	05-605
	Truck Insurance Exchange
Group Name:	Farmers Insurance Group
NAIC Company Code:	21709
NAIC Group Code:	212
Organized under the laws of the state of:	CA
Personal or Commercial?	COMMERCIAL ▼
Line of Insurance:	COMMERCIAL MULTI-PERIL ▼
Subline:	BUSINESSOWNERS ▼
Program:	All Lines of Businessowners including ASR & HAB
Home Office Street Address:	4680 Wilshire Blvd
City:	Los Angeles
	California
Zip Code:	90010-3807
Main Administrative Office in California, Street Address/PO Box :	3041 Cochran St.
City:	Simi valley, CA
Zip Code:	90065
Name of Contact Person:	Ted Petersen
Title of Contact Person:	Risk Management Consultant
Phone Number:	805-306-6542
FAX Number:	805-306-6667
Internet Address:	ted.petersen@farmersinsurance.com
Street Address/PO Box:	as above
City:	
State:	
Zip Code:	

Department Use only	
CDI File #	
Date Filed	
Compliance Date	
Date Public Notified	
Deemer Date	
Intake Analyst	
Bureau Code	
Senior Analyst	
Group Filing X Ref.	
Filing Type	
Percent Change	

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File # :	J-2-CA-07-02-15-BP-TP1
File Contains Group Data?	<input checked="" type="checkbox"/> TRUE
Latest applicable CDI File No. (in this Line, Subline and/or Program):	05-600
	Civic Property and Casualty
Group Name:	Farmers Insurance Group
NAIC Company Code:	10315
NAIC Group Code:	212
Organized under the laws of the state of:	CA
Personal or Commercial?	COMMERCIAL ▼
Line of Insurance:	COMMERCIAL MULTI-PERIL ▼
Subline:	BUSINESSOWNERS ▼
Program:	All Lines of Businessowners
Home Office Street Address:	4680 Wilshire Blvd
City:	Los Angeles
	California
Zip Code:	90010-3807
Main Administrative Office in California:	
Street Address/PO Box :	3041 Cochran St.
City:	Simi Valley, CA
Zip Code:	90065
Name of Contact Person:	Ted Petersen
Title of Contact Person:	Risk Management Consultant
Phone Number:	805-306-6542
FAX Number:	805-306-6667
Internet Address:	ted.petersen@farmersinsurance.com
Street Address/PO Box:	as above
City:	
State:	
Zip Code:	

<u>Department Use only</u>	
CDI File # :	
Date Filed:	
Compliance Date:	
Date Public Notified:	
Deemer Date:	
Intake Analyst:	
Bureau Code:	
Senior Analyst:	
Group Filing X Ref.:	
Filing Type:	
Percent Change:	0.00%

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File # :	J-2-CA-07-02-15-BP-TP1
File Contains Group Data? <input checked="" type="checkbox"/>	TRUE
Latest applicable CDI File No. (in this Line, Subline and/or Program):	05-602
Group Name:	Farmers Insurance Exchange Farmers Insurance Group
NAIC Company Code:	21652
NAIC Group Code:	212
Organized under the laws of the state of:	CA
Personal or Commercial?	COMMERCIAL ▼
Line of Insurance:	COMMERCIAL MULTI-PERIL ▼
Subline:	BUSINESSOWNERS ▼
Program:	All Lines of Businessowners including ASR & HAB
Home Office Street Address:	4680 Wilshire Blvd
City:	Los Angeles California
Zip Code:	90010-3807
Main Administrative Office in California, Street Address/PO Box :	3041 Cochran St.
City:	Simi Valley, CA
Zip Code:	90065
Name of Contact Person:	Ted Petersen
Title of Contact Person:	Risk Management Consultant
Phone Number:	805-306-6542
FAX Number:	805-306-6667
Internet Address:	ted.petersen@farmersinsurance.com
Street Address/PO Box:	as above
City:	
State:	
Zip Code:	

<u>Department Use only</u>	
CDI File # :	
Date Filed:	
Compliance Date:	
Date Public Notified:	
Deemer Date:	
Intake Analyst:	
Bureau Code:	
Senior Analyst:	
Group Filing X Ref.:	
Filing Type:	
Percent Change:	0.00%

**STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE (CDI)
APPLICATION FOR APPROVAL OF INSURANCE RATES**

Your File # :	J-2-CA-07-02-15-BP-TP1
File Contains Group Data? <input checked="" type="checkbox"/>	TRUE
Latest applicable CDI File No. (in this Line, Subline and/or Program):	05-601
	Exact Property and Casualty
Group Name:	Farmers Insurance Group
NAIC Company Code:	103171
NAIC Group Code:	2121
Organized under the laws of the state of:	CA
Personal or Commercial?	COMMERCIAL ▼
Line of Insurance:	COMMERCIAL MULTI-PERIL ▼
Subline:	BUSINESSOWNERS ▼
	All Lines of Businessowners including ASR & HAB
Home Office Street Address:	4680 Wilshire Blvd
City:	Los Angeles
	California
Zip Code:	90010-3807
Main Administrative Office in California, Street Address/PO Box :	3041 Cochran St.
City:	Simi Valley, CA
Zip Code:	90065
Name of Contact Person:	Ted Petersen
Title of Contact Person:	Risk Management Consultant
Phone Number:	805-306-6393
FAX Number:	805-306-6667
Internet Address:	ted.petersen@farmersinsurance.com
Street Address/PO Box:	as above
City:	
State:	
Zip Code:	

<u>Department Use only</u>	
CDI File #	
Date Filed	
Compliance Date	
Date Public Notified	
Deemer Date	
Intake Analyst	
Bureau Code	
Senior Analyst	
Group Filing X Ref.	
Filing Type	
Percent Change	0.00%