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Actuarial Services Division
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Subject: N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data
Written Period: Jan 1, 2019 - Dec 31, 2019
Due Date: April 1, 2020

According to North Carolina General Statutes §58-36-30(b2), the Commissioner shall annually collect consent-to-rate data from insurers who are members of the NC Rate Bureau, and have written homeowners policies under the Rate Bureau jurisdiction in North Carolina for residential real property with not more than four housing units.

Only companies that have data to report on Homeowners All Forms (excluding HO4 and HO6) must complete this Data Call.

All individual company data in this data call will be considered proprietary and confidential; only the aggregate data will be published annually and posted on the Department of Insurance Website.

General Instructions:

1. Save this excel file into your local drive and replace "XXXXX" in this file name by the five-digit NAIC code of your company.
2. Input the information and the data only in the green highlighted areas.
3. Save this excel file after completing inputting.
4. Email the completed excel file to us via the email address DataCall@ncdoi.gov with the subject "XXXXX-2019_NC_CRT_58-36-30(b2)". Replace "XXXXX" with your company's 5 digit NAIC code.
5. If company does not write any homeowners policy: do nothing.
6. If company writes any homeowners policy on all forms excluding HO4 and HO6:
 - a. has no CTR policies: please complete Verification Form and 58-36-30(b2)_HO-Owners, columns (1), (2) and (9); save the excel file, then email it to us; **OR**
 - b. has CTR policies: please complete Verification Form and 58-36-30(b2)_HO-Owners, columns (1) through (5) and (9); save the excel file, then email it to us.

Specific Instructions to Complete the Verification Form

1. Input your company's 5-digit NAIC code (in blue), then the most recent contact info will generate.
2. When information is not available, the cells appears as blank; or, when the information needs to be updated, just type in the required info in the green highlighted areas.
3. It is required that the Contact Person and the Officer / Director / Manager sign the Form by typing the names of the Contact and the Officer as signatures in the Form.

Specific Instructions to Input Data in Worksheet 58-36-30(b2) HO-Owners

1. Input whole numbers only without any comma or decimal point.
2. Details of columns:
 - (1) Total # Policies Written: Total number of all policies that are written in the written period in the territory.
 - (2) Total Actual Premium Written: Sum of actual premiums of all policies that are written in the written period.
 - (3) Total # CTR Policies Written: Number of CTR policies that are written in the written period.
 - (4) Total Manual Premium of CTR Policies: Sum of NCRB manual premiums of CTR policies including all applicable/related factors and endorsements.
 - (5) Total Consented Premium of CTR Policies: Sum of actual premiums (manual premiums plus consented amounts above the manual premiums) that company charges CTR policyholders, including all applicable/related factors and endorsements.
 - (9) Company's 2019 Annual Statement, Statutory Page 14, Line 4, Homeowners multiple peril, Direct premiums written.

If you have any question or concern, please email to DataCall@ncdoi.gov

We greatly appreciate your cooperation in this matter.

NORTH CAROLINA DEPARTMENT OF INSURANCE

N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data

Written Period: Jan 1, 2019 - Dec 31, 2019

Due Date: April 1, 2020

Verification Form

In complying with the North Carolina General Statute §58-36-30(b2), the company acknowledges that the information and data provided in this Data Call are true and accurate to the best of the knowledge of the Contact Person and the Company Officer, Director, or Manager whose signatures appear below.

Company NAIC Code (5 digits): **99999**

Company Name: **All Companies Combined**

Address (line 1):

Address (line 2):

City:

State (abbreviation, 2 letters):

Zip Code:

Contact Person:

First Name M.I. Last Name

Phone Number (123-456-7890): Ext.

Email Address:

By typing my name, I indicate my consent to use an electronic signature, that acts as a traditional handwritten signature and I agree to all the terms of this Verification Form.

Contact Person's signature

Officer / Director / Manager:

First Name M.I. Last Name

Phone Number (123-456-7890): Ext.

Email Address:

By typing my name, I indicate my consent to use an electronic signature, that acts as a traditional handwritten signature and I agree to all the terms of this Verification Form.

Officer, Director, or Manager's signature

North Carolina Insurance Department
 N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data
 Subject: Consent-to-Rate (CTR) Policies - Residential Property (Not More Than 4 Housing Units)
 Due Date: April 1, 2020

Company Name: All Companies Combined
 Company NAIC Code: 99999
 Written Period: Jan 1, 2019 - Dec 31, 2019

Owners Forms (All Forms Excluding HO4 and HO6)

Territory	(1)	(2)	(3)	(4)	(5)	(6) = (3) / (1)	(7) = (5) / (2)	(8) = [(5)-(4)] / (3)
	Total Policies		Total CTR Policies			% of CTR Policies of Total Policies		Avg Premium Difference per CTR Policy
	# Policies Written	Actual Written Premium	# CTR Policies Written	Manual Premium	Consented Premium	% # CTR Policies	% CTR Policy Premium	
110	15,882	27,751,072	2,729	5,568,171	6,894,521	17.2%	24.8%	486
120	16,998	29,381,656	3,438	4,228,826	5,761,710	20.2%	19.6%	446
130	13,354	14,316,396	4,295	5,022,918	6,117,211	32.2%	42.7%	255
140	98,983	117,701,739	22,680	28,008,822	31,676,390	22.9%	26.9%	162
150	50,453	55,628,422	17,033	19,146,287	25,060,861	33.8%	45.1%	347
160	46,478	43,180,994	11,659	10,828,503	14,503,561	25.1%	33.6%	315
170	4,834	5,968,867	2,352	2,345,881	3,175,173	48.7%	53.2%	353
180	58,072	75,737,615	31,051	33,828,929	45,280,524	53.5%	59.8%	369
190	14,736	20,252,856	6,404	7,478,932	9,915,665	43.5%	49.0%	381
200	6,703	10,990,811	2,633	3,716,516	4,860,599	39.3%	44.2%	435
210	22,411	23,958,651	9,200	8,407,185	11,297,675	41.1%	47.2%	314
220	62,854	84,985,179	38,200	45,876,751	57,036,509	60.8%	67.1%	292
230	15,869	21,797,909	7,080	8,397,253	11,065,133	44.6%	50.8%	377
240	96,075	104,826,053	40,239	39,559,880	51,320,102	41.9%	49.0%	292
250	39,891	47,313,780	18,245	21,298,365	25,694,142	45.7%	54.3%	241
260	31,608	34,266,475	13,759	12,484,685	16,503,431	43.5%	48.2%	292
270	318,045	368,825,800	142,434	149,807,997	189,978,788	44.8%	51.5%	282
280	49,511	59,206,997	22,136	23,809,319	29,878,189	44.7%	50.5%	274
290	38,956	46,471,560	17,370	19,429,298	23,659,639	44.6%	50.9%	244
300	15,298	16,648,064	5,335	5,188,935	6,823,992	34.9%	41.0%	307
310	301,437	282,587,556	132,386	108,170,739	140,730,051	43.9%	49.8%	246
320	156,264	147,733,058	53,158	47,122,603	60,665,734	34.0%	41.1%	255
330	8,338	7,635,061	2,659	2,109,340	2,740,846	31.9%	35.9%	237
340	365,270	409,311,711	178,709	171,874,124	229,231,901	48.9%	56.0%	321
350	111,686	104,918,365	41,859	36,028,244	46,823,078	37.5%	44.6%	258
360	226,615	215,099,497	91,694	78,460,639	97,980,914	40.5%	45.6%	213
370	12,950	14,157,510	3,557	3,833,125	4,741,514	27.5%	33.5%	255
380	41,138	41,531,273	16,644	15,350,206	19,189,436	40.5%	46.2%	231
390	47,483	51,505,543	16,191	16,256,562	20,127,333	34.1%	39.1%	239
Statewide	2,288,195	2,483,690,470	955,130	933,639,034	1,198,734,622	41.7%	48.3%	278
(9) Annual Statement, Statutory Page 14, Line 4, Homeowners multiple peril, Direct premiums written: 2,688,959,983								
(10): Statewide(2) - (9) -205,269,513								
(11): (10) / (9) -8%								