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Actuarial Services Division
DataCall@ncdoi.gov

Subject: N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data
Written Period: Jan 1, 2020 - Dec 31, 2020
Due Date: April 1, 2021

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-2020_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 2020 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, 2020 - Dec 31, 2020

Due Date: April 1, 2021

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: **An Insurance Company**
Address (line 1): **999 Street Blvd**
Address (line 2): **PO Box 999**
City: **Raleigh**
State (abbreviation, 2 letters): **NC**
Zip Code: **27603**

Contact Person: **Marciana Paul**

First Name M.I. Last Name
999-999-9999 Ext. **999**

Phone Number (123-456-7890):
Email Address: **Marciana.Paul@ISPCompany.com**

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.

Marciana Paul

Contact Person's signature

Officer / Director / Manager: **Kevin Conley**

First Name M.I. Last Name
999-999-9990 Ext. **990**

Phone Number (123-456-7890):
Email Address: **Kevin.Conley@ISPCompany.com**

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.

Kevin Conley

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, 2021

Company Name: An Insurance Company
 Company NAIC Code: 99999
 Written Period: Jan 1, 2020 - Dec 31, 2020

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	16,469	33,332,778	4,375	6,963,032	8,734,410	26.6%	26.2%	405
120	20,513	38,354,782	5,216	5,385,330	7,308,389	25.4%	19.1%	369
130	16,616	17,568,292	3,225	3,698,692	4,722,814	19.4%	26.9%	318
140	103,162	134,239,260	21,705	26,371,918	31,517,923	21.0%	23.5%	237
150	52,748	60,036,488	16,153	18,928,921	24,454,410	30.6%	40.7%	342
160	49,361	48,477,680	12,898	12,435,260	15,938,844	26.1%	32.9%	272
170	5,197	6,354,328	2,287	2,326,769	3,149,827	44.0%	49.6%	360
180	64,047	84,209,233	29,519	33,597,967	44,323,468	46.1%	52.6%	363
190	16,255	23,104,822	6,025	7,622,949	9,984,046	37.1%	43.2%	392
200	7,228	11,691,839	2,497	3,617,273	4,740,340	34.5%	40.5%	450
210	23,734	26,285,765	9,146	8,838,879	11,774,846	38.5%	44.8%	321
220	68,079	93,633,578	37,978	46,876,121	59,581,910	55.8%	63.6%	335
230	18,005	24,536,353	6,941	8,523,294	11,228,831	38.5%	45.8%	390
240	101,454	114,438,785	39,949	41,385,864	53,227,539	39.4%	46.5%	296
250	41,233	51,418,633	17,827	21,501,358	26,922,293	43.2%	52.4%	304
260	33,879	36,760,761	13,996	13,024,242	17,073,965	41.3%	46.4%	289
270	337,029	400,757,372	144,430	160,207,784	200,153,281	42.9%	49.9%	277
280	51,843	63,476,786	21,663	24,320,377	30,253,520	41.8%	47.7%	274
290	42,836	50,858,851	16,232	18,448,922	22,647,845	37.9%	44.5%	259
300	16,098	17,894,293	5,577	5,587,938	7,295,767	34.6%	40.8%	306
310	307,709	295,720,812	130,747	112,896,782	144,036,877	42.5%	48.7%	238
320	157,738	153,536,632	53,845	49,654,091	62,397,220	34.1%	40.6%	237
330	8,720	7,753,852	2,949	2,365,948	3,005,452	33.8%	38.8%	217
340	376,785	428,592,510	177,718	180,195,888	233,947,709	47.2%	54.6%	302
350	114,881	109,706,994	42,613	37,561,555	48,254,021	37.1%	44.0%	251
360	233,205	228,810,554	91,652	81,844,052	102,569,065	39.3%	44.8%	226
370	13,206	15,245,559	3,774	4,180,505	5,147,925	28.6%	33.8%	256
380	42,137	43,775,795	16,212	15,521,363	19,259,827	38.5%	44.0%	231
390	48,317	54,303,778	16,253	16,893,690	20,928,356	33.6%	38.5%	248
Statewide	2,388,480	2,674,877,166	953,404	970,776,764	1,234,580,720	39.9%	46.2%	277

(9) Annual Statement, Statutory Page 14, Line 4, Homeowners multiple peril, Direct premiums written:

2,845,142,543

(10): Statewide(2) - (9)

-170,265,377

(11): (10) / (9)

-6%