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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, 2021 - Dec 31, 2021
Due Date: April 8, 2022

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-2021_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 2021 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, 2021 - Dec 31, 2021
Due Date: April 8, 2022

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**
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 8, 2022

Company Name: ALL COMPANIES
 Company NAIC Code: 99999
 Written Period: Jan 1, 2021 - Dec 31, 2021

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	13,721	32,830,684	4,750	7,493,100	9,609,490	34.6%	29.3%	446
120	22,066	45,972,831	6,063	6,210,971	8,471,464	27.5%	18.4%	373
130	18,223	19,989,925	3,307	3,916,185	5,190,899	18.1%	26.0%	385
140	104,077	139,995,763	25,268	36,088,739	43,685,735	24.3%	31.2%	301
150	52,985	61,714,625	15,606	19,122,241	25,066,105	29.5%	40.6%	381
160	52,822	53,351,143	15,626	16,341,222	20,853,271	29.6%	39.1%	289
170	4,994	6,309,564	2,417	2,545,245	3,455,973	48.4%	54.8%	377
180	61,790	85,181,311	28,864	34,665,509	46,186,663	46.7%	54.2%	399
190	15,303	23,320,976	6,093	8,211,239	10,845,081	39.8%	46.5%	432
200	6,780	11,634,630	2,597	3,885,826	5,158,425	38.3%	44.3%	490
210	23,346	27,284,541	9,310	9,577,889	12,913,860	39.9%	47.3%	358
220	70,463	99,912,946	37,901	48,938,565	63,302,774	53.8%	63.4%	379
230	16,736	24,486,753	6,972	8,895,666	11,827,913	41.7%	48.3%	421
240	108,944	126,655,816	42,042	46,408,221	60,952,992	38.6%	48.1%	346
250	46,779	58,665,719	19,175	24,146,684	31,043,788	41.0%	52.9%	360
260	33,639	37,731,869	15,531	14,624,149	19,756,673	46.2%	52.4%	330
270	353,665	445,178,777	158,639	185,403,295	239,767,828	44.9%	53.9%	343
280	54,212	69,791,540	23,131	27,088,225	34,796,046	42.7%	49.9%	333
290	42,641	53,215,010	16,170	19,273,295	24,184,068	37.9%	45.4%	304
300	16,113	19,183,462	5,970	6,325,029	8,342,841	37.0%	43.5%	338
310	316,333	324,835,544	139,959	128,584,675	167,786,108	44.2%	51.7%	280
320	167,691	171,152,124	59,756	58,466,400	74,595,211	35.6%	43.6%	270
330	8,655	8,029,487	3,166	2,651,537	3,343,590	36.6%	41.6%	219
340	391,684	475,532,394	195,644	208,479,501	277,317,755	49.9%	58.3%	352
350	119,406	120,183,501	46,801	43,876,925	56,924,395	39.2%	47.4%	279
360	237,857	249,333,842	98,342	92,842,644	118,510,463	41.3%	47.5%	261
370	13,514	16,081,970	4,261	4,807,589	5,983,888	31.5%	37.2%	276
380	43,021	47,622,731	17,978	18,175,169	22,823,948	41.8%	47.9%	259
390	50,038	59,010,558	18,375	19,909,865	25,072,770	36.7%	42.5%	281
Statewide	2,467,500	2,914,190,037	1,029,713	1,106,955,600	1,437,770,017	41.7%	49.3%	321

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

3,093,751,158

(10): Statewide(2) - (9) -179,561,120

(11): (10) / (9) -6%