

SAMPLE LETTER #1

(NEW DEVIATIONS)

ABC INSURANCE COMPANY

Date

Commissioner of Insurance
Property & Casualty Division
Post Office Box 26387
Raleigh, North Carolina 27611

RE: ABC Insurance Company - Federal Employer Number
Homeowners Rate Deviation

Gentlemen:

The ABC Insurance Company wishes to deviate from the North Carolina Rate Bureau homeowners rates as follows:

1. Credits for increasing the deductible.
2. New Home Credits.
3. Guaranteed Replacement Cost (HO-500), deletion of charge.
4. Personal Liability, deletion of additional premium for increasing liability from \$50,000 to \$100,000.

Attached is a completed deviation questionnaire in support of this filing. We propose this deviation become effective (date).

Sincerely yours,

cc: N. C. Rate Bureau

SAMPLE

Exception Page 1

ABC Insurance Company

Deductible Credits

Deductible
\$ 250
500
1000
2500

Credit
5%
10%
18%
25%

SAMPLE

Exception Page 2

ABC INSURANCE COMPANY

New Home Credits

Age of Dwelling
0
1
2
3
4
5
6

Credits
14%
12%
10%
8%
6%
4%
2%

SAMPLE

Exception Page 3

ABC Insurance Company

Guaranteed Replacement Cost (HO-500) Deletion of charge.

SAMPLE

Exception Page 4

ABC Insurance Company

Personal Liability - deletion of additional premium for increasing liability from \$50,000 to \$100,000.

SAMPLE LETTER #2 (DEVIATION MODIFICATION)

ABC INSURANCE COMPANY

Date

Commissioner of Insurance
Property & Casualty Division
P. O. Box 26387
Raleigh, North Carolina 27611

RE: ABC Insurance Company - Federal Employer Number
Homeowners Deviation Modification
Existing Insurance Department File Number

Gentlemen:

The ABC Insurance Company wishes to modify it's deviation of North Carolina Rate Bureau rates currently on file with the North Carolina Department of Insurance as follows:

1. Item #2, New Home Credits is deleted.
2. A new item is added, -25% base deviation on all forms.

Our deviation will now read as follows:

1. Credits for increasing the deductible.
2. -25% base deviation on all forms.
3. Guaranteed replacement cost (HO-500), deletion of charge.
4. Personal liability, deletion of additional premium for increasing liability from \$50,000 to \$100,000.

Attached is a completed deviation questionnaire in support of this filing. We propose this change become effective (date).

Sincerely yours,

cc: North Carolina Rate Bureau

SAMPLE

Exception Page 1

ABC Insurance Company

Deductible Credits

Deductible
\$ 250
500
1000
2500

Credit
5%
10%
18%
25%

SAMPLE

Exception Page 2

ABC INSURANCE COMPANY

**A 25% CREDIT WILL BE APPLIED TO THE BASE PREMIUM FOR ALL FORMS.
THIS CREDIT WILL APPLY ONLY TO THE BASE PREMIUM.**

SAMPLE

Exception Page 3

ABC Insurance Company

Guaranteed Replacement Cost (HO-500) Deletion of charge.

SAMPLE

Exception Page 4

ABC Insurance Company

Personal Liability - deletion of additional premium for increasing liability from \$50,000 to \$100,000.

SAMPLE LETTER #3 **(WITHDRAWALS)**

ABC INSURANCE COMPANY

Date

Commissioner of Insurance
Property & Casualty Division
Post Office Box 26387
Raleigh, North Carolina 27611

RE: ABC INSURANCE COMPANY - Federal Employer Number _____
Homeowners Deviation Effective (date)
Existing Insurance Department File Number:

Gentlemen:

The ABC Insurance Company proposes to withdraw its homeowners deviation referenced above.

This deviation has been in effect at least six (6) months. We propose this withdrawal become effective (date).

Sincerely yours,

cc: N. C. Rate Bureau

SAMPLE

NEW

Date

Insurance Company Name
Address

RE: ABC INSURANCE COMPANY
Federal Employer #01-2345678
Homeowners Deviation (05)
OUR FILE NUMBER: 12345

Dear

Approval is given to your request of _____ for a deviation from the rates of the North Carolina Rate Bureau. Your deviation will read as follows:

- 1.) Company Deviation
- 2.) New Home Discount
- 3.) Installment Payment Plan

This deviation is approved to become effective _____ in accordance with N. C. General Statute 58-36-30(a) and (c).

Sincerely yours,

Bernard Cox
Policy & Rate Analyst
Property & Casualty Division

BC/dw

cc: North Carolina Rate Bureau

SAMPLE
MODIFICATION

Date

Insurance Company Name
Address

RE: ABC INSURANCE COMPANY
Federal Employer #01-2345678
Homeowners Deviation Modification (05)
OUR FILE NUMBER: 12345

Dear

Approval is given to your request of _____ for a deviation from the rates of the North Carolina Rate Bureau. Your deviation will now read as follows:

- 1.) Company Deviation
- 2.) New Home Discount
- 3.) Installment Payment Plan

This deviation is approved to become effective _____ in accordance with N. C. General Statute 58-36-30(a) and (c).

Sincerely yours,

Bernard Cox
Policy & Rate Analyst
Property & Casualty Division

BC/dw

cc: North Carolina Rate Bureau

SAMPLE
WITHDRAWAL

Date

Insurance Company Name
Address

RE: ABC INSURANCE COMPANY
Federal Employer #01-2345678
Workers' Compensation Rate Deviation Withdrawal (13)
OUR FILE NUMBER: 12345

Dear

Your request of _____ is granted to withdraw your below described deviation for file number _____:

-10 Workers' Compensation and Employers' Liability (01)

This withdrawal is to become effective _____ in accordance with N. C. General Statute 58-36-30(a).

Sincerely yours,

Bernard Cox
Policy & Rate Analyst
Property & Casualty Division

BC:dw

cc: North Carolina Rate Bureau

