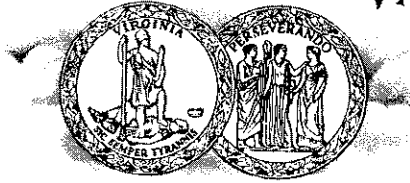


COMMONWEALTH OF VIRGINIA

ALFRED W. GROSS
COMMISSIONER OF INSURANCE
STATE CORPORATION COMMISSION
BUREAU OF INSURANCE



P.O. BOX 1157
RICHMOND, VIRGINIA 23218
TELEPHONE: (804) 371-9741
TDD/VOICE: (804) 371-9206
<http://www.scc.virginia.gov>

LETTER

June 3, 2004

WITHDRAWN

Administrative Letter 2004-04

By Administrative
Letter 2008-02

TO: All Insurers Licensed to Write Private Passenger Automobile and/or Homeowners Insurance in Virginia

RE: Revisions to VA CP-12 (05/04) - Homeowners Competitive Pricing Form and VA CP-20 (05/04) - Private Passenger Automobile Insurance Competitive Pricing Form

This administrative letter introduces revised Virginia Competitive Pricing Forms VA CP-12 (05/04) for homeowners insurance rate filings and VA CP-20 (05/04) for private passenger automobile insurance rate filings. The May 2004 editions replace the Virginia Competitive Pricing Forms, VA CP-12 (6/94) and VA CP-20 (6/94). Effective immediately, insurers should begin using these revised forms with each rate filing.

SUMMARY OF CHANGES

- Form VA CP-19 (6/94) has been discontinued.
- The counties of Fairfax and Henrico have been eliminated.
- ZIP codes have been added for insurers using ZIP codes to define territories.
- The category of "Married Adult Age 45" has been clarified to read "Married Male Age 45."
- The comprehensive coverage deductible has been increased from \$50 to \$100.
- The collision coverage deductible has been increased from \$100 to \$250.
- For the purposes of calculating the physical damage coverage premiums for the CP-20, the example vehicle has been changed from a Chevrolet Corsica, 4 door sedan (depicting an original cost new of approximately \$15,000) to a Toyota Camry LE, 4-cylinder, 4-door sedan (depicting an original cost new of approximately \$25,000).
- The amount of coverage for the CP-12 form has been increased from \$100,000 to \$125,000 to reflect the median value of housing in Virginia based on 2000 U.S. Census data.

The revised competitive pricing forms are available electronically from the Bureau's website at <http://www.state.va.us/scc/division/boi/webpages/vacpforms.htm>.

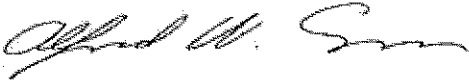
Administrative Letter 2004-04
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In addition, Administrative Letters 1977-2, 1982-7, 1990-21, 1992-4 and 1994-6, which contain competitive pricing forms no longer in use, are hereby withdrawn.

Please direct any questions pertaining to this administrative letter to:

Patricia C. Todd
Senior Insurance Market Examiner
Personal Lines Rates and Forms Section
Property and Casualty Division
(804) 371-9195
ttodd@scc.state.va.us

Sincerely,

A handwritten signature in cursive script, appearing to read "Alfred W. Gross".

Alfred W. Gross
Commissioner of Insurance

COMPANY
 NAIC #
 VIRGINIA HOMEOWNERS INSURANCE PREMIUMS
 RATES EFFECTIVE

TERRITORY/ ZIP CODE						TOTAL PREMIUM			
---------------------	--	--	--	--	--	---------------	--	--	--

Alexandria/22305

Frame (\$125,000)									
Masonry (\$125,000)									

Richmond/23226

Frame (\$125,000)									
Masonry (\$125,000)									

Virginia Beach/23452

Frame (\$125,000)									
Masonry (\$125,000)									

Norfolk/23511

Frame (\$125,000)									
Masonry (\$125,000)									

Roanoke/24012

Frame (\$125,000)									
Masonry (\$125,000)									

Charlotte County/23923 - Use Protection Class 10

Frame (\$125,000)									
Masonry (\$125,000)									

INSTRUCTIONS:

Report ANNUAL premiums for the best fire protection class in each territory for coverage under "Special Form (Form 3)" with a \$250 Flat deductible. Dollar amounts in parentheses are "Insured for" values. Do not apply any other rating rules (including discounts and surcharges) or procedures.

Since Charlotte County is representative of a rural risk, report premiums based on Protection Class 10.

The premiums displayed contemplate a Section II Liability Limit of \$100,000 and Medical Payments coverage of \$1,000.

NOTE:

IF THE COMPANY DOES NOT PROVIDE THE SPECIFIC COVERAGE REQUESTED, PLEASE CLEARLY NOTE THIS FACT AND INDICATE THE DIFFERENCES BELOW* AND REPORT THE PREMIUM CHARGED FOR THE POLICY MOST NEARLY COMPARABLE TO THE ONE FOR WHICH PREMIUM DATA IS REQUESTED. FOR EXAMPLE, IF THE COMPANY DOES NOT OFFER A \$250 DEDUCTIBLE, REPORT THE PREMIUMS FOR THE MOST COMPARABLE DEDUCTIBLE.

***COMPANY'S EXCEPTIONS:**

Form completed by: _____ Signature Date Completed: _____

_____ Title Phone: _____

**COMPANY:
 VIRGINIA PRIVATE PASSENGER AUTOMOBILE INSURANCE PREMIUMS
 RATES EFFECTIVE:**

CLASS FACTORS	<u>TERRITORY/ZIP CODE</u>	<u>BODILY INJURY</u> 25/50	<u>PROPERTY DAMAGE</u> \$20,000	<u>MEDICAL EXPENSE BENEFITS</u> \$2,000	<u>UNINSURED/ UNDERINSURED MOTORISTS</u> 25/50/20	* MODEL YEAR USED		<u>TOTAL</u>
						<u>OCN/SYMBOL USED</u>	<u>OCN/SYMBOL USED</u>	
						<u>COMPREHENSIVE</u> \$100 <u>DEDUCTIBLE</u>	<u>COLLISION</u> \$250 <u>DEDUCTIBLE</u>	
	<u>Alexandria / 22305</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							
	<u>Richmond / 23226</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							
	<u>Virginia Beach /23452</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							
	<u>Norfolk /23511</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							
	<u>Roanoke / 24012</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							
	<u>Charlotte County / 23923</u>							
	Married Male – Age 45							
	Unmarried Male – Age 20							
	Unmarried Female – Age 20							

***INSTRUCTIONS:**

Report ANNUAL premiums for minimum liability coverage required by Virginia's financial responsibility laws (e.g., Bodily Injury limits of \$25,000/\$50,000, Property Damage limits of \$20,000, Uninsured/Underinsured Motorists coverage at minimum limits and Medical Expense Benefits coverage of \$2,000).

Report ANNUAL physical damage premiums for a new (e.g., age group 1), standard performance class car with an original cost new of approximately \$25,000. A new Toyota Camry LE, 4-cylinder, 4-door sedan fits this description. Please note that the current model year changes on October 1. Report Comprehensive premiums with a \$100 deductible. Report Collision premiums with a \$250 deductible.

Report premiums for risks who are owners or principal operators, who are accident and conviction free for the preceding three years, who have had driver training, who do not use their vehicles for business, who drive 12,000 miles a year and who drive to or from work 9 miles each way. (Report the married male premiums for a risk whose vehicle is customarily operated by no one other than the named insured or spouse.) Do not apply any other rating rules (including discounts and surcharges) or procedures.

NOTE: 1. IF THE COMPANY DOES NOT PROVIDE THE SPECIFIC COVERAGE REQUESTED, PLEASE CLEARLY NOTE THIS FACT BELOW AND REPORT THE PREMIUM CHARGED FOR THE POLICY MOST NEARLY COMPARABLE TO THE ONE FOR WHICH PREMIUM DATA IS REQUESTED. FOR EXAMPLE, IF THE COMPANY DOES NOT OFFER A \$100 DEDUCTIBLE COMPREHENSIVE OR MINIMUM LIABILITY COVERAGE, REPORT THE PREMIUMS FOR THE MOST COMPARABLE DEDUCTIBLE OR LIMIT.

2. INCLUDE, BY SEPARATE ATTACHMENT, A SPECIFIC EXAMPLE OF THE METHOD OF CALCULATION USED TO COMPUTE THE PREMIUMS FOR EACH COVERAGE. THE EXAMPLE SHOULD INCLUDE ALL THE STEPS NECESSARY TO COMPUTE THE FINAL PREMIUMS, SUCH AS ROUNDING, APPLICATION OF FACTORS, ETC.

COMPANY'S EXCEPTIONS:

Form completed by:

Signature

Title

Date Completed _____

Phone: _____

E-mail Address: _____