

<i>SERFF Tracking Number:</i>	<i>REGU-125942742</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Discover Property & Casualty Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>DPC-CA-DR EX F-08</i>		
<i>TOI:</i>	<i>20.0 Commercial Auto</i>	<i>Sub-TOI:</i>	<i>20.0001 Business Auto</i>
<i>Product Name:</i>	<i>DPC Auto Driver Exc Form</i>		
<i>Project Name/Number:</i>	<i>DPC-CA-DR EX F-08/DPC-CA-DR EX F-08</i>		

Filing at a Glance

Company: Discover Property & Casualty Insurance Company

Product Name: DPC Auto Driver Exc Form

TOI: 20.0 Commercial Auto

Sub-TOI: 20.0001 Business Auto

Filing Type: Form

Effective Date Requested (New): 02/01/2009

Effective Date Requested (Renewal):

State Filing Description:

SERFF Tr Num: REGU-125942742 State: Arkansas

SERFF Status: Closed

Co Tr Num: DPC-CA-DR EX F-08

Co Status:

Author: Rose Battles

Date Submitted: 12/11/2008

State Tr Num: EFT \$50

State Status: Fees verified and received

Reviewer(s): Betty Montesi,
Llyweyia Rawlins

Disposition Date: 12/11/2008

Disposition Status: Approved

Effective Date (New): 02/01/2009

Effective Date (Renewal):

General Information

Project Name: DPC-CA-DR EX F-08

Project Number: DPC-CA-DR EX F-08

Reference Organization:

Reference Title:

Filing Status Changed: 12/11/2008

State Status Changed: 12/11/2008

Corresponding Filing Tracking Number:

Filing Description:

Discover Property & Casualty Insurance Company (DP&C) is submitting a Commercial Auto forms filing.

Status of Filing in Domicile: Pending

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

DP&C is filing one Named Driver exclusion form for use with our Commercial Automobile program. The form excludes coverage for drivers specifically named or designated on the form. This form is optional and there is no rate or rule impact.

SERFF Tracking Number: REGU-125942742 State: Arkansas
Filing Company: Discover Property & Casualty Insurance State Tracking Number: EFT \$50
Company
Company Tracking Number: DPC-CA-DR EX F-08
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: DPC Auto Driver Exc Form
Project Name/Number: DPC-CA-DR EX F-08/DPC-CA-DR EX F-08

The following items are enclosed for your review:

- Forms List
- Independent Form

We are requesting this filing become effective on February 1, 2009.

Company and Contact

Filing Contact Information

(This filing was made by a third party - insuranceregulatoryconsultantsllc)
Rose Battles, rosebattles@ircllc.com
50 Broad Street (941) 926-0144 [Phone]
New York, NY 10004

Filing Company Information

Discover Property & Casualty Insurance Company	CoCode: 36463	State of Domicile: Illinois
5 Batterson Park	Group Code: 164	Company Type:
Farmington, CT 06032	Group Name:	State ID Number:
(860) 674-2660 ext. [Phone]	FEIN Number: 36-2999370	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50 fee for forms filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Discover Property & Casualty Insurance Company	\$50.00	12/11/2008	24482760

SERFF Tracking Number:	REGU-125942742	State:	Arkansas
Filing Company:	Discover Property & Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	DPC-CA-DR EX F-08		
TOI:	20.0 Commercial Auto	Sub-TOI:	20.0001 Business Auto
Product Name:	DPC Auto Driver Exc Form		
Project Name/Number:	DPC-CA-DR EX F-08/DPC-CA-DR EX F-08		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	12/11/2008	12/11/2008

<i>SERFF Tracking Number:</i>	<i>REGU-125942742</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Discover Property & Casualty Insurance</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
	<i>Company</i>		
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<i>Product Name:</i>	<i>DPC Auto Driver Exc Form</i>		
<i>Project Name/Number:</i>	<i>DPC-CA-DR EX F-08/DPC-CA-DR EX F-08</i>		

Disposition

Disposition Date: 12/11/2008

Effective Date (New): 02/01/2009

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	REGU-125942742	State:	Arkansas
Filing Company:	Discover Property & Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	DPC-CA-DR EX F-08		
TOI:	20.0 Commercial Auto	Sub-TOI:	20.0001 Business Auto
Product Name:	DPC Auto Driver Exc Form		
Project Name/Number:	DPC-CA-DR EX F-08/DPC-CA-DR EX F-08		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Forms List	Approved	Yes
Supporting Document	Filing Auth Letter	Approved	Yes
Form	NAMED DRIVER EXCLUSION	Approved	Yes

SERFF Tracking Number: REGU-125942742 State: Arkansas

Filing Company: Discover Property & Casualty Insurance State Tracking Number: EFT \$50
Company

Company Tracking Number: DPC-CA-DR EX F-08

TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto

Product Name: DPC Auto Driver Exc Form

Project Name/Number: DPC-CA-DR EX F-08/DPC-CA-DR EX F-08

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	NAMED DRIVER DA 30 04 EXCLUSION	02 09	02 09	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 UA 30 07 0100 Previous Filing #: 99-PA-ST-02		DA30040209.pdf

POLICY NUMBER:

**COMMERCIAL AUTO
DA 30 04 02 09**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NAMED DRIVER EXCLUSION

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
GARAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

Effective Date:

Named Insured:

The following is added to each Section that provides coverage:

This insurance does not apply to any "accident" or "loss" that occurs while a covered "auto" is operated by the following person:

I have read the above and understand this agreement.

Signature of Named Insured

Title

<i>SERFF Tracking Number:</i>	<i>REGU-125942742</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Discover Property & Casualty Insurance</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
	<i>Company</i>		
<i>Company Tracking Number:</i>	<i>DPC-CA-DR EX F-08</i>		
<i>TOI:</i>	<i>20.0 Commercial Auto</i>	<i>Sub-TOI:</i>	<i>20.0001 Business Auto</i>
<i>Product Name:</i>	<i>DPC Auto Driver Exc Form</i>		
<i>Project Name/Number:</i>	<i>DPC-CA-DR EX F-08/DPC-CA-DR EX F-08</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: REGU-125942742 State: Arkansas
Filing Company: Discover Property & Casualty Insurance State Tracking Number: EFT \$50
Company
Company Tracking Number: DPC-CA-DR EX F-08
TOI: 20.0 Commercial Auto Sub-TOI: 20.0001 Business Auto
Product Name: DPC Auto Driver Exc Form
Project Name/Number: DPC-CA-DR EX F-08/DPC-CA-DR EX F-08

Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 12/11/2008

Comments:
Attachment:
AR F NAIC.pdf

Satisfied -Name: Forms List **Review Status:** Approved 12/11/2008

Comments:
Attachment:
20 States Forms List.pdf

Satisfied -Name: Filing Auth Letter **Review Status:** Approved 12/11/2008

Comments:
Attachment:
1 FA Letter.pdf

FORM UT Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">New Business</div> <div style="width: 40%;"></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">Renewal Business</div> <div style="width: 40%;"></div> </div> f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3. Group Name	Group NAIC #
Travelers	3548

4. Company Name(s)	Domicile	NAIC #	FEIN #
Discover Property & Casualty Insurance Company	IL	36463	36-2999370

5. Company Tracking Number	DPC-CA-DR EX F-08
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Rose Battles Insurance Regulatory Consultants 50 Broad Street, Suite 501 New York, NY 10004	Manager	(941) 926-0144	(212) 571-2502	rosebattles@irccllc.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Rose Battles

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	20.0000 Commercial Automobile
10. Sub-Type of Insurance (Sub-TOI)	20.0001 Business Auto
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	N/A
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14. Effective Date(s) Requested	New: February 1, 2009 Renewal:
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	December 11, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	DPC-CA-DR EX F-08
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21. Filing Description [This area should be similar to the body of a cover letter and is free-form text]
Discover Property & Casualty Insurance Company (DP&C) is submitting a Commercial Auto forms filing. DP&C is filing one Named Driver exclusion form for use with our Commercial Automobile program. The form excludes coverage for drivers specifically named or designated on the form. This form is optional and there is no rate or rule impact. The following items are enclosed for your review: <ul style="list-style-type: none">• Forms List• Independent Form A fee in the amount of \$50.00 is being submitted to cover the required filing fee. We are requesting this filing become effective on February 1, 2009.

22. Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
Check #: EFT Amount: \$50 Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #		DPC-CA-DR EX F-08		
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)		DPC-CA-DR EX F-08		
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Named Driver Exclusion	DA 30 04 02 09	<input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither	UA 30 07 01 00	
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
03			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
04			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
05			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
06			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
07			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
08			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
09			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
10			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

COMMERCIAL AUTO FORMS AND ENDORSEMENTS

Form Title	New Form Number	Replaced Form Number	Type of Form	Description of Form
Commercial Auto				
Named Driver Exclusion	DA 30 04 02 09	*	E-AL-O	R - This endorsement excludes all coverage for use of an auto by the individual designated on the schedule.

Applicable in AL, AZ, AR, CA, CO, DC, GA, IL, IA, ME, MA, MI, NE, NM, ND, OH, RI, SD, TN, WY

*Replaces UA 30 07 0100 in AL, AZ, AR, CA, CO, DC, GA, IL, IA, ME, MI, NE, NM, ND, OH, RI, TN, WY

*Replaces UA 30 34 in MA

*New form in SD

DISCOVER_{RE}

December 1, 2008

RE: Authority for Insurance Regulatory Consultants, LLC to Process Filings on
behalf of Discover Property & Casualty Insurance Company

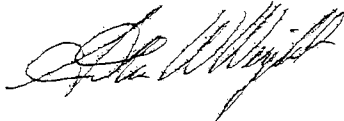
Dear Regulatory Official:

Please accept this letter as the authorization for representatives of Insurance Regulatory Consultants, LLC, to prepare and submit, on behalf of Discover Property & Casualty Insurance Company filings in your state. This authorization includes our permission for representatives of Insurance Regulatory Consultants, LLC, to receive and respond to any inquiries that you may raise on these filings.

This authority will continue in place until you receive, from Discover Property & Casualty Insurance Company, a written statement that the authority has been removed.

If you have any questions on this or need any additional information, please don't hesitate to contact me.

Very truly yours,



Arthur W. Wright
President

Re: Discover Property & Casualty Insurance Company NAIC Number: 3548-36463
FEIN Number: 36-2999370
Commercial Automobile Forms Filing – Named Driver Exclusion
Company Filing Designation Number: DPC-CA-DR EX F-08