

APPENDIX

Exhibit A

Expedited Homeowners Filings

Company/Group: _____

Company File No.: _____

Section	Item	Page #
11:2-42.3 Filing Requirements		
(a)2	Filing Source Document MARS001 and accompanying certification	
(a)3	Information required on each page	Yes / No
(a)4	All data reported on direct basis exclusive of reinsurance	Yes / No
(a)5	All data from voluntary market only	Yes / No
(a)6	Most recent AY ends no more than 15 months prior to submission date	Yes / No
(a)7	Three copies of filing submitted	Yes / No
(b)1	<ul style="list-style-type: none"> • Cover letter notifying DOBI of intention to modify rates under expedited approval procedure • Exhibit C, Rate change information • Proposed effective date • Name/Telephone/Address of Company officer to whom inquiries about the filing may be directed 	 <hr/> <hr/> <hr/>
(b)2	Exhibit A, this checklist	
(b)3	<ul style="list-style-type: none"> • Manual rating pages • Explanatory memorandum • Company File # • New/Renewal Effective Dates 	 <hr/> <hr/> <hr/>
(b)4	Rating Examples	
(b)5	Exhibit B, rate change distribution by interval	
(b)6	Maximum Increase/Decrease with profile	
(b)7	Territorial Definitions	
(b)8	Justification for Minimum Premium (if changing)	
(b)9	Effects of each change in detail	
(b)10	Seven year rate history	

11:2-42.4 Premium and Loss Data - All data must be on a direct basis, and must be consistent throughout the filing. All data is to be provided by form by accident year for each of the latest five years.

(b)	NJ Earned Exposures by form and accident year	
(c)1	Earned Premium by form and accident year	
(c)2	On-Level factors	
(c)3	Current Amount factors	
(c)4	Premium Trend factors	
(c)5	Premium Trend period	
(d)1	Incurred Loss and ALAE (separately or combined)	
(d)2	Loss Development Factors - Incurred Loss and ALAE (separately or combined)	
(d)3	Current Cost Factors	
(d)4	Loss Trend Factors	
(d)5	ULAE factor (based on latest 3 year avg. from IEE Part 3)	
(d)6	Wind & Water Losses (if excluded)	
(d)7	Catastrophe Losses (if excluded)	
(d)8	Hurricane Losses (if excluded)	
(d)9	Excess Losses (if excluded)	
(d)10	Total of (d)6-8 does not exceed 20%	Yes / No
(d)11	Losses excluded in (d)6-9 also excluded from LDFs	Yes / No
(e)	Ultimate Loss + LAE ratio weighted 10/15/20/25/30	

11:2-42.4 Expense Data

(f)1	Commission & Brokerage Expense based on latest 3 years of NJ Page 14	
(f)2	General & Other Acquisition Expense based on latest 3 years of IEE Part 3	
(f)3	Taxes, Licenses, and Fees based on latest 3 years of NJ Page 14	
(f)4	Profit & Contingency Provision (with explanation if > 5%)	
(f)5	Investment Income using Cash Flow or State X	
(f)6	Total Expenses are sum of (f)1-4 less (f)5	
(g)	Permissible Loss Ratio = 1 - Total Expenses	

11:2-42.4 Indications

(h)	Credibility based on 240,000 exposures per form	
(i)	Complement of Credibility	
(j)	Indication by form and overall based on 5 accident years, separated by categories in 4(a).	
(k)	Territorial Indications (if non-uniform base rate changes proposed)	
(l)	Alternate Methodology (optional)	

11:2-42.5 Limitation on filer's rate request

	Requested increase overall and by form is the lower of indication or 5 percent	Yes / No
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Exhibit B

Size of Rate Change Distribution

Indicate the number of in-force exposures for each category.

Evaluation Date: _____

Overall

Rate Change	In-Force Exposures	Distribution
Above +40%		
+35% to +40%		
+30% to +35%		
+25% to +30%		
+20% to +25%		
+15% to +20%		
+10% to +15%		
+5% to +10%		
0% to +5%		
No Change		
-5% to 0%		
-10% to -5%		
-15% to -10%		
-20% to -15%		
Below -20%		
TOTAL		

Exhibit C

Data is as of: _____

Form	In-Force Exposures	Latest Year On-Level Premium	Proposed Percentage Change	Proposed Dollar Effect	Current Average Premium	Proposed Average Premium
HO-1						
HO-2						
HO-3, 3 w/ 15						
HO-5						
HO-8						
Total Owners						
HO-4						
HO-6						
Total TN/CO						
Overall HO						

Form	In-Force Exposures	Latest Year On-Level Premium	Proposed Percentage Change	Proposed Dollar Effect	Current Average Premium	Proposed Average Premium
DW						
EC						
Total DW Fire						