

NORTH CAROLINA RATE BUREAU

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January 29, 2002

TO THE DEVIATING COMPANY ADDRESSED:

Re: Supplemental Call for 2001 Non-Fleet
Private Passenger Automobile Insurance
Expense Experience-Deviating Companies

Annually this Bureau issues a Call for North Carolina Automobile and Motorcycle Insurance Expense Experience. Data obtained pursuant to the Call are consolidated and utilized by the Rate Bureau and the North Carolina Reinsurance Facility in preparing rate filings. The Rate Bureau's Call for calendar year 2001 data was issued by a Circular Letter to All Member companies A-02-HO1 dated January 28, 2002.

Instructions for completion of Form E-1 included in the Call require a company or a group of companies to report premiums and losses on the basis of data reported on Page 15 of the Annual Statement for North Carolina excluding refunds issued in conjunction with the rate cases settlement on March 9, 2000. All refunds should be reported on E-1R and the attached E-3 should not reflect any refunds in connection with the settlement.

Your Company is among several which had in effect during 2001 an approved deviation on North Carolina non-fleet private passenger automobile insurance coverages. All such companies are being requested to complete, in addition to the forms included in the Call referred to above, the enclosed supplemental Form E-3. Form E-3 is designed to provide for reporting non-fleet private passenger automobile insurance premiums and, if appropriate, expenses developed on the basis of manual or North Carolina Rate Bureau premium rates rather than on the basis of actual deviated premium rates as reported on Form E-1. Data reported on Form E-3 should agree with the data reported on E-1 except for appropriate adjustments to eliminate the effect of approved rate deviations. If the data reported on Form E-1 reflect a "group" of companies, please make sure that Form E-3 is completed on the same basis with the appropriate adjustments made in the data of the deviating company or companies.

Non-fleet private passenger automobile physical damage insurance business written on a consent-to-rate basis and reported as non-standard business on Form E-1 should not be included in the data reported on Form E-3 attached hereto.

It is essential that these reports be submitted as soon as possible and in no event later than **April 1, 2002**. Your cooperation in supplying the requested data, accompanied by the completed Affidavit, would be greatly appreciated.

Very truly yours,

Ellen S. Holloway

Statistical Data Technician

ESH:dp
Enclosures

NORTH CAROLINA RATE BUREAU
 NORTH CAROLINA REINSURANCE FACILITY
THIS REPORT DUE APRIL 1, 2002

Return to:
 North Carolina Rate Bureau
 P. O. Box 176010
 Raleigh, North Carolina 27619-6010

Calendar Year 2001
 North Carolina Private Passenger
 Automobile Expense - Experience
 Adjusted to Reflect Manual Rates*

ITEMS	PRIVATE PASSENGER AUTOMOBILE -- CALENDAR YEAR 2001		
	Automobile Liability Coverages		Automobile Physical Damage Coverages (Standard Rates) (b)
	Bodily Injury	Property Damage	
	Amount (a)	Amount (a)	Amount (a)
1. Direct Written Premiums	\$	\$	\$
2. Direct Earned Premiums			
3. Direct Losses Incurred	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
4. Direct Loss Adjustment Exp. Incurred:	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
a. Defense & Cost Containment	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
b. Adjusting & Other Expense Payments	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
5. Direct Commissions and Brokerage			
6. Direct Other Acquisition, Field Supervision and Collection Exp. Incurred:			
a. Branch Office--State's Share			
b. Home Office--State's Share			
7. Direct General Expenses Incurred			
8. Direct Taxes, Licenses, Fees Incurred			

* Data reported on this Form should be based on the data reported on Form E-1. If Form E-1 reflects a "Group" of companies, please make sure that this Form is submitted on a "Group" basis.
 (a) Report dollar amounts only--no cents.
 (b) Data reported on this Form should be based on the data reported on Form E-1 in the "Standard Rates" column. Do not include non-standard or consent-to-rate business.

Company or Group: _____ (If "Group", please provide a list of companies included.)

Completed by: _____ Title: _____ Date: _____
 (Please print or type)

Telephone Number _____ FAX Number _____ E-Mail Address _____

Return to:
 North Carolina Rate Bureau
 P. O. Box 176010
 Raleigh, North Carolina 27619-6010

AFFIDAVIT

STATE OF _____)
) SS.
 COUNTY OF _____)

_____, the (Insert Name of Company Official) (Insert Title)
 of the _____ (Insert Name of Company) being duly sworn, deposes

and says that as a company official responsible for compilation of statistical data, the statistical data reported upon all Forms constituting the reporting of premiums, losses and expenses of the said company under the 2002 Supplemental Call for North Carolina Automobile Insurance Expense Experience for Calendar Year 2001 is a true and accurate statement of such experience of the company for the period covered, to the best of my knowledge, information and belief.

(Signature)

Subscribed and sworn to before me this

_____ day of _____, 2002

Notary Public