

# NORTH CAROLINA RATE BUREAU

POST OFFICE BOX 176010  
RALEIGH, NORTH CAROLINA 27619-6010

RAYMOND F. EVANS, JR. CPCU  
General Manager

5401 SIX FORKS ROAD  
RALEIGH, NORTH CAROLINA 27609-4435

TELEPHONE (919) 783-9790  
FACSIMILE (919) 783-0355

JERRY G. HAMRICK  
Workers Compensation Manager

F. TIMOTHY LUCAS  
Personal Lines Manager

DAVID E. SINK, JR.  
Accounting Manager

April 16, 2002

## CIRCULAR LETTER TO ALL MEMBER COMPANIES

Re: Supplemental Call for 2001 North Carolina  
Property Expense Experience

Annually this Bureau issues calls for North Carolina property expense experience. Data obtained pursuant to these calls are consolidated and utilized by the Rate Bureau in preparing rate filings and for allocating Rate Bureau expenses. The Rate Bureau's Call for 2001 North Carolina Property Expense Experience data was issued by Circular Letter to All Member Companies P-02-H01 dated April 15, 2002.

Instructions for completion of the Form P-1 included in the Call required a company or group of companies to report premiums and losses on the basis of data reported on the Statutory Page 14 data of the Annual Statement for North Carolina.

Your Company is among several which had in effect during 2001 an approved deviation on North Carolina property coverages. All such companies are being requested to complete, in addition to the Form P-1, the enclosed supplemental Form P-3. Form P-3 is designed to provide for reporting property coverages, 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 P-1. Data reported on Form P-3 should agree with the data reported on Form P-1 except for appropriate adjustments to eliminate the effect of approved deviations. If the data reported on Form P-1 reflected a "group" of companies, please make sure that Form P-3 is completed on the same basis with the appropriate adjustments made in the data of the deviating company or companies.

Your cooperation in supplying the requested data, accompanied by the completed Affidavit, as soon as possible but **in no event later than July 1, 2002**, would be greatly appreciated.

Very truly yours,

Ellen S. Holloway

Statistical Data Technician

ESH:dp  
P-02-H02  
Enclosures

NORTH CAROLINA RATE BUREAU

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

**THIS REPORT DUE JULY 1, 2002**

Call for Calendar Year 2001  
 North Carolina Property  
 Expense Experience - Adjusted to  
 Reflect Manual Rates\*

ITEMS	Property Expense Experience - Calendar Year 2001				
	Homeowners (Excluding Mobile Home)	Mobile Home		Dwelling	
		MH (C)	MH (F)	Fire	Extended Coverage
	Amount (a)	Amount (a)	Amount (a)	Amount (a)	Amount (a)
1. Direct Written Premiums	\$	\$	\$	\$	\$
2. Direct Earned Premiums					
3. Direct Losses Incurred	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
4. Loss Adj. Expenses Incurred:					
a. Allocated	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
b. Unallocated	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
5. Commission & Brokerage					
6. Other Acquisitions Incurred:					
a. Branch Off-State's Share					
b. Home Off.--State's Share					
7. General Expense Incurred					
8. Taxes, Licenses, Fees Incurred					

\* Data reported on this Form should be based on the data reported on Form P-1. If Form P-1 reflects a "Group" of companies, please make sure that this Form is submitted on a "Group" basis. See cover letter.

(a) Report dollar amounts only--no cents.

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

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Please Print or Type)

Telephone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Return to:

North Carolina Rate Bureau  
5401 Six Forks Road  
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 \_\_\_\_\_ being duly sworn, deposes  
(Insert Name of Company)

and says that as a company official responsible for compilation of statistical data, the statistical data reported upon this form constitutes the reporting of experience of the said company under the Supplemental Call for 2001 North Carolina Property Expense Experience 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