STATE OF HAWAII INSURANCE DIVISION DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

P.O. Box 3614 August 24, 2007 Memorandum 2007-1R Honolulu, HI 96811

TO: All Motor Vehicle Insurers Authorized in the State of Hawaii

FROM: J.P. Schmidt, Insurance Commissioner

SUBJECT: Annual Publication of Motor Vehicle Insurers and Private Passenger Auto Premiums

Pursuant to section 431:10C-210, Hawaii Revised Statutes, the Insurance Commissioner shall publish in a newspaper of general circulation in the State a list of all motor vehicle insurers with representative annual premiums for motor vehicle insurance. The Hawaii Insurance Division intends to publish this listing based on insurers' rates in effect on **November 1, 2007**.

The representative premium listing will be based on a new applicants request for the minimum coverages required under the Hawaii Motor Vehicle Insurance Law, and may include required optional additional coverages, as follows:

\$20,000/\$40,000 Bodily Injury Liability \$10,000 Property Damage Liability \$10,000 Personal Injury Protection

\$20,000/\$40,000 Uninsured Motorist Coverage, Stacked \$20,000/\$40,000 Underinsured Motorist Coverage, Stacked

\$100 Deductible Comprehensive

\$500 Deductible Collision

Automobile: 2006 Honda Accord VP, 4-door sedan, VIN 1HGCM561&6 (I.S.O., VSR=06-11; OCN=06-13)

Note: Premiums are to be provided for a **new applicant who is the sole owner of one vehicle**. Any

discounts/surcharges afforded to new applicants must be separately identified on the worksheet.

Each insurer shall provide for the Commissioner's review representative annual premium quotations no later than <u>September 24, 2007</u>. The worksheets are posted at our website. See instructional box below.

Be advised of the following requirements:

- 1. If, within the next 90 days, your company is proposing to implement a rate revision, an <u>additional set</u> of worksheets must be completed reflecting your proposed rates.
- 2. Insurers providing motor vehicle policies in accordance with §431-12, Hawaii Revised Statutes, Mass Merchandising of Insurance, shall provide the address, telephone number and name of a contact person at the insurer's office in the State designated to conduct the administration of its business and handle claims. Insurers may request an additional listing to be labeled as a mass merchandising premium.
- 3. Any insurer desiring special annotations or exclusion from this publication listing may provide a written request for such consideration by the Commissioner <u>in addition</u> to the insurers' premium quotations. (Insurers declaring that no new applicants are being accepted must complete worksheets for renewal business).
- 4. A motor vehicle insurer that does not transact private passenger auto business in Hawaii shall submit a letter stating such exemption.

As strict publication deadlines have been imposed, it is imperative that insurers submit accurate reports by the indicated deadline. Pursuant to §431:10C-215 and §431:14-117 HRS, failure to comply may subject your company to a civil penalty of not less than \$500 and not to exceed \$5,000.

Please print copies of the worksheets for the annual premium quotations from our website:

Go to: www.hawaii.gov/dcca/areas/ins/commissioners memo

Select: Commissioner's Memorandum 2007-1R

You may submit a written request for printed copies by sending us a self-addressed 9x6 envelope. <u>Mail your completed worksheets</u> to the attention: Rate & Policy Analysis Branch, Insurance Division, P.O. Box 3614, Honolulu, HI 96811. Questions may be directed to the Insurance Division's Rate and Policy Analysis Branch at (808)586-2809 or <u>RPAdatacall@dcca.hawaii.gov</u>.

If your rating factors for pleasure use, clear driving record, and single vehicle are other than 1.00, you must complete Worksheet A-Supplement in addition to the physical damage portion of this worksheet.

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insurance Company					
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Worksheet D Profile: Pleasure, \$20,000/40,000 BI \$10,000 PD \$10,000 Basic PIP	1 DUI Conviction	With SR-22		Total:	
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If your rating factors for pleasure use, clear driving record, and single vehicle are other than 1.00, you must complete Worksheet A-Supplement in addition to the physical damage portion of Worksheet A. Insurance Company Company's latest rate level adjustment effective as of Classification: Pleasure Use Clear Driving Record DETERMINATION OF RATES AT BASE LIMITS Single Vehicle Policy Effective Date: November 1, 2007 Age/ Symbol Automobile: 2006 Honda Accord, VP, 4-Dr Sedan Model Year One Registered Owner (I.S.O., V.S.R. = 06-11)One Driver/One Vehicle As Reflected in Manual ANNUAL BASE RATES AT MINIMUM Disclose all rating relativities used in deriving annual base rates to adjust to: Pleasure *Other Min Required Clean Single *Other REQUIRED STATUTORY LIMITS FOR Use Driving Vehicle Adjustment SINGLE VEHICLE ONE REGISTERED Limits Rates Statutory Adjustment Territory 01 - Oahu Limits Record OWNER ВΙ \$20,000/40,000 BI \$10,000 PD PIP \$10,000 Basic PIP UM (S) \$20,000/40,000 UM (S) UIM (S) \$20,000/40,000 UIM (S) (To be reported on summary sheet) Sub Total: Territory 03 – Maui ВΙ \$20,000/40,000 BI PD \$10,000 PD PIP \$10,000 Basic PIP UM (S) \$20,000/40,000 UM (S) UIM (S) \$20,000/40,000 UIM (S) Sub Total: (To be reported on summary sheet) Territory 04 - Kauai ВΙ \$20,000/40,000 BI PD \$10,000 PD PIP \$10,000 Basic PIP UM (S) \$20,000/40,000 UM (S) UIM (S) \$20,000/40,000 UIM (S) (To be reported on summary sheet) Sub Total: Territory 05 – Hawaii ВΙ \$20,000/40,000 BI PD \$10,000 PD PIP \$10,000 Basic PIP UM (S) \$20,000/40,000 UM (S) UIM (S) \$20,000/40,000 UIM (S) (To be reported on summary sheet) Sub Total: (S) = stacked*Other Rating Factors - Explain: Responsible Officer: (Name) ______(Title) _____

(Address)

Summary Sheet - Rates in effect November 1, 2007

Insurance Company			_		
		, B, C, and D below:			
		ANNUAL	PREMIUM		
	Oahu (01)	Maui (03)	Kauai (04)	Hawaii (05)	Other Territory*
Worksheet A (or A-Supplement) (Pleasure, Clear record)					
Worksheet B (Pleasure, 1 accident, \$1,000 property loss)					
Worksheet C (Pleasure, 1 speeding conviction)					
Worksheet D (Pleasure, 1 DUI conviction w/SR-22)					

^{*} Insurers with other territories must complete worksheet OT