NORTH CAROLINA DEPARTMENT OF INSURANCE **DEVIATION QUESTIONNAIRE**

Α.	GENERAL DESCRIPTION
(1)	NAME OF COMPANY The Travelers Home and Marine Insurance Company
(2)	FILER'S FILE # <u>TRVD-G134635311</u>
(3)	LINE OF INSURANCE Private Passenger Automobile Insurance
(4)	SUBLINE/PROGRAM TITLE (IF APPLICABLE)
(5)	PREVIOUS DEPARTMENT FILE # (IF APPLICABLE) TRVD-G134486649
(6)	PROPOSED EFFECTIVE DATE AND RULES OF IMPLEMENTATION (Note: no retroactive effective dates will be given)
	This change applies to policies effective on and after 12/11/2025.
В.	IMPACT OF THE AGGREGATE DEVIATION
(7)	COMPANY'S CURRENT N.C. VOLUME OF BUSINESS FOR THE LINE: WRITTEN PREMIUM: \$79,916,707 EXPOSURES: 88,746
(8)	COMPANY'S N.C. MARKET SHARE BASED ON WRITTEN PREMIUM: 1.3 %
(9)	COMPANY'S CURRENT COUNTRYWIDE VOLUME OF BUSINESS FOR THE LINE: WRITTEN PREMIUM: \$244,853,534 EXPOSURES: 262,463
(10)	ESTIMATED NUMBER OF N.C. EXPOSURES AFFECTED BY ONE OR MORE COMPONENTS OF THE AGGREGATE DEVIATION:
	CURRENT DEVIATION: 82,688 PROPOSED DEVIATION: 82,688
(11)	PERCENTAGE OF COMPANY'S N.C. EXPOSURES AFFECTED BY ONE OR MORE COMPONENTS OF THE AGGREGATE DEVIATION: 1009/
	CURRENT DEVIATION: 100% PROPOSED DEVIATION: 100%
(12)	WHAT IS THE TOTAL DOLLAR AMOUNT OF PREMIUMS THAT WILL NOT BE COLLECTED ON THE PROPOSED DEVIATION ON AN ANNUAL BASIS AS A RESULT OF THIS DEVIATION? \$29,773,094
(13)	WHAT IS THE AVERAGE DOLLAR DIFFERENCE PER EXPOSURE FROM MANUAL RATES? \$360
(14)	INDICATE THE MAXIMUM DEVIATION POSSIBLE FOR ANY ONE INSURED. 79%
(15)	INDICATE WHETHER THE DEVIATION MAY PRODUCE A PREMIUM GREATER THAN MANUAL FOR AN INDIVIDUAL INSURED:
	CURRENT DEVIATION: YES \square NO \boxtimes PROPOSED DEVIATION: YES \square NO \boxtimes
(16)	IF EITHER ANSWER TO (15) IS YES, PROVIDE AN EXPLANATION:

C. <u>DEVIATION COMPONENTS</u>

	MPONENT IS TO BE APPLIED.
1)	Territory Factors by Coverage (C)
2)	Policy Variables - Multi (NC)
3)	Household Composition 1 (NC)
4)	Household Composition 2 (NC)
5)	Household Composition 3 (NC)
6)	Household Composition 4 (NC)
7)	Underwriting Tier (NC)
8)	Driver Insured Elsewhere (NC)
9)	Accident Forgiveness (NC)
10)	Vehicle Mileage (NC)
11)	Vehicle History (NC)
12)	Digital Auto Discount (NC)
13)	Unverifiable MVR (NC)
14)	Coverage Level Adjustment Deviations (NC)
15)	Location Level (NC)
16)	Vehicle Liability Risk Group - BI (NC)
17)	Vehicle Liability Risk Group - PD (NC)
18)	Vehicle Liability Risk Group - MP (NC)
19)	Physical Damage Symbols - CL (NC)
20)	Physical Damage Symbols - CP (NC)
21)	Policy Level Vehicle Liability Risk Group Adjustment - BI (NC)
22)	Policy Level Vehicle Liability Risk Group Adjustment - PD (NC)
23)	Policy Level Symbol Adjustment - CL (NC)
24)	Policy Level Symbol Adjustment - CP (NC)
25)	Model Year (NC)
26)	New Car Discount (NC)
27)	Alternative Fuel Vehicle Discount (NC)
28)	Total Policy Incident / Multi-Vehicle Adjustment (NC)
29)	Vehicle Use (NC)

(17) PROVIDE A LIST OF ALL THE INDIVIDUAL DEVIATION COMPONENTS. IDENTIFY EACH COMPONENT AS INTRODUCED AS PART OF A NEW DEVIATION (I), ADDED TO A CURRENT DEVIATION (A), CHANGED ON A CURRENT DEVIATION (C), NOT CHANGED ON A CURRENT DEVIATION (NC), OR ELIMINATED FROM A CURRENT

30)	Safe Driver Discount (NC)
31)	Good Student Discount (NC)
32)	Student Away at School Discount (NC)
33)	Driver Training Discount (NC)
34)	Affinity Discount (NC)
35)	Multicar Discount (NC)
36)	Early Quote Discount (NC)
37)	Continuous Insurance Discount (NC)
38)	Good Payer Discount (NC)
39)	Electronic Payment Discount (NC)
40)	Multi-Policy and Homeownership Discount (NC)
	Paid in Full Discount (NC)
	Insurance Score Tier (NC)
,	Installment Pay (NC)
44)	Transition Modification - New Program (NC)
45)	Transition Modification - Acquisition (NC)
46)	Intellidrive Score (NC)
47)	Intellidrive Enrollment Discount (NC)
,	Prior Carrier Classification Level (NC)
,	Automatic Emergency Braking (AEB) Discount (NC)
- /	
` '	EDIT SCORING. COMPLETE THIS QUESTION ONLY IF YOUR DEVIATION INCLUDES CREDIT SCORING. A CREDIT SCORING MODEL DEVELOPED BY: (1) COMPANY - YES NO (1) COMPANY - YES NO (2) THIRD PARTY VENDOR - YES NO (2) NO (3) IF THIRD PARTY'S MODEL, PLEASE LIST VENDOR'S NAME (4) IT IS THE COMPANY'S INDEPENDENT MODEL, HAS IT BEEN FILED WITH THE DEPARTMENT IN ACCORDANCE WITH NCGS §58-36-90(F) YES NO (1) YES NO (2) YES (3) NO (4) YES (5) YES (5) YES (6) YES (6) YES (7) YES (
B.	A NOTIFICATION FORM THAT IS IN COMPLIANCE WITH NCGS §58-36-90(C), HAS BEEN PREVIOUSLY APPROVED, OR IS ATTACHED. YES \boxtimes FILE # $\underline{\text{Trva-}130012243}$

D. **CERTIFICATION**

(19) I CERTIFY THAT THE INFORMATION CONTAINED IN THIS QUESTIONNAIRE AND THE ATTACHED EXHIBITS IS TRUE AND CORRECT AND THE FILING COMPLIES WITH STATUTORY REQUIREMENTS TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF COMPANY OFFICER/FILINGS DEPARTMENT HEAD

(20) ACTUARIAL CERTIFICATION

I, Andrew Thompson, FCAS, AM A MEMBER OF THE CASUALTY ACTUARIAL SOCIETY AND AM QUALIFIED TO RENDER AN ACTUARIAL OPINION IN THIS MATTER. I HEREBY CERTIFY THAT EACH DEVIATION COMPONENT(S) PRESENTED IN THIS FILING IS CALCULATED IN ACCORDANCE WITH SOUND ACTUARIAL PRINCIPLES AND RESULTS IN RATES WHICH ARE NOT EXCESSIVE, INADEQUATE OR UNFAIRLY DISCRIMINATORY.

SIGNATURE OF ACTUARY