

Kentucky FAIR Plan Reinsurance Association P.O. Box 437249 Louisville, KY 40243

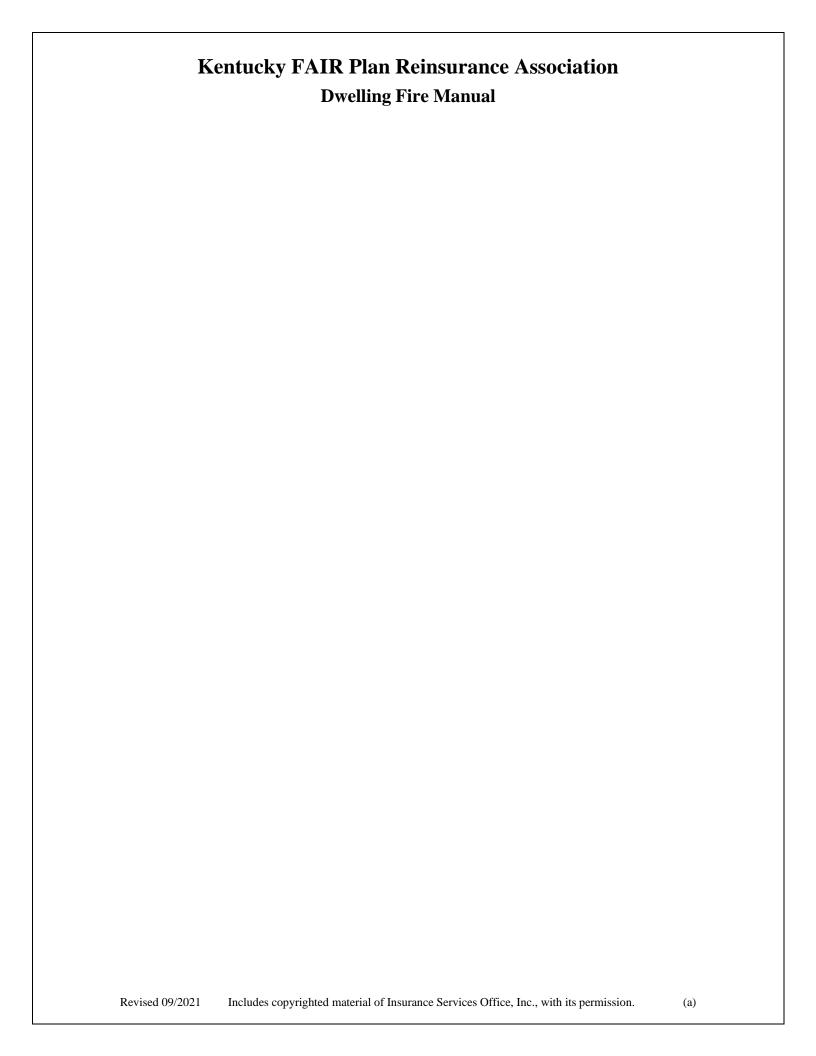
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www.kyfairplan.org

Form Numbers	Form Title	Edition Date
DP 00 01	Dwelling Property – Basic Form	12 02
DP 00 02	Dwelling Property – Broad Form	12 02
KPF 15-1	Special Provisions – (DP 00 01)	05 12
KFP-15-2	Special Provisions – (DP 00 02)	05 12
KFP 1 J	Policy Jacket	05 12
KYPACT	Privacy Act Notice	07 01
KFP 2070	Vacancy Endorsement	05 12
DP 04 22	Limited Fungi, Wet or Dry Rot, or Bacteria Coverage	12 02
DP 04 41	Additional Insured Endorsement	12 02
DP 04 69	Earthquake	12 02
DP 04 70	Premises Alarm or Fire Protection System	12 02
DP 04 76	Actual Cash Value Loss Settlement	12 02
DP 04 88	Mine Subsidence Coverage Endorsement	06 11
DP 05 38	Cap on Losses from Certified Acts of Terrorism	07 21
TER-1	TRIA Letter	01 21

Table of Contents

Subject	Rule #
General Information	A
Underwriting Guidelines	В
General Rules	C
Applications	1
No Binding Authority and Deemer Provision	2
Commission	3
Renewals	4
New Business	5
Claims Procedures	6
Minimum Written and Minimum Retained Premium	7
Changes, Cancellation or Reduction of Coverage	8
Maximum Coverage Limits	9
Determination of Maximum Coverage Limits	10
Description of Coverage and Loss Settlement Provisions	11
Eligibility	12
Seasonal Dwellings	13
Single Building Definition	14
Construction Definitions	15
Rewrite with Lapse in Coverage	16
Non-Sufficient Funds Surcharge	17
Premium Computation	18
Condition Charges	19
Woodburning or Coal Stove Surcharge	20
Deductibles	21
Vandalism and Malicious Mischief	22
Mobile Homes or Trailer Homes	23
Limited Fungi, Wet or Dry Rot, or Bacteria Coverage	24
Other Structures Coverage	25
Territory Definitions	26
Protection Class Codes	27



Subject	Rule #
Earthquake	28
Coal Mine Subsidence	29
Protective Devices	30
Policy Period and Installment Plan	31
Key Rates and Key Factors	32
Rating Worksheet	Appendix A

A. General Information

The Kentucky FAIR Plan and Reinsurance Association (FAIR Plan) is composed of all insurance companies authorized to write property and casualty insurance in Kentucky. It is authorized by and operates pursuant to KRS Chapter 304 Subtitle 35 with the approval of the Executive Director of Insurance. It is designed to provide basic property insurance for worthy applicants who are unable to secure coverage in the voluntary market. Every resident producer licensed to write property insurance in Kentucky is authorized to submit applications to the FAIR Plan even though no contractual relationship exists with the producer. This manual provides underwriting guidelines, rules and rates for the producer. The actions of a producer are deemed to be the actions of the applicant and not of the Plan. Insofar as the producer is acting as an agent of any party in connection with this or any other section of the Plan, the producer shall be deemed to be the agent of the applicant and not the agent of the FAIR Plan.

B. <u>Underwriting Guidelines for Denial, Cancellation and Non-Renewal</u>

Denial, cancellation, or non-renewal of any applicant/insured must be authorized by the Underwriting Department. The Underwriting Department shall have authority to deny, cancel, or non-renew any application or policy based on grounds in the reasonable discretion of the Underwriting Department, including, but not limited to, the existence of any one or more of the following conditions:

- 1. Anticipated owner or occupant incendiaries;
- 2. At least 65% of the rental units in the building are unoccupied, and the insured has not obtained prior approval from the Underwriting Department of a rehabilitation plan which necessitates a high degree of unoccupancy;
- **3.** Property damage exists and more than 60 days have elapsed as to indicate that the damage will not be promptly repaired;
- **4.** Following a loss, permanent repairs following satisfactory adjustment of loss have not commenced within 60 days;
- 5. Property has been apparently abandoned or there has been removal of undamaged salvageable items from the building and the insured can give no reasonable explanation for such removal;
- **6.** Utilities such as electric, gas, or water services have been disconnected and, if for non-payment of service bills, the insured has failed to pay his account for such services within 60 days, or real estate taxes have not been paid for a two-year period after the taxes have become delinquent (real estate taxes shall not be deemed to be delinquent for this purpose even if they are due and constitute a lien, so long as a grace period remains under local law during which such taxes may be paid without penalty);
- 7. Conviction or unresolved indictment of a named insured or loss payee, or any other person having a financial interest in the property, of the crime of arson or crime involving a purpose to defraud an insurance company;

- **8.** Where the building or the named insured has been subject to two or more fires, each loss amounting to at least \$500 or one percent of the insurance in force, whichever is greater, in any 12-month period; or three (3) such fires in any 24-month period, at the discretion of the underwriter.
- 9. Material misrepresentation
- 10. Non-payment of additional initial or increased hazard premium; or
- 11. Failure of the insured or his/her agent to timely furnish when due additional primary or supplemental underwriting information requested by the facility.
- **12.** Other conditions proposed by the Underwriting Department and adopted by resolution by the Underwriting Committee as established herein.
- 13. After a policy has been in effect for more than 60 days, there shall be no cancellation or refusal to renew the policy without a 30-day written notice to the insured, except that a written notice of not less than five days before the effective date of cancellation or non-renewal may be used if one or more of the specific conditions set out in Section B(1-12) above.
- **14.** Each notice of cancellation or non-renewal shall contain a statement of the reason therefore. It shall be sent to the insured at the last known address with copies sent to the mortgagee, if any, and the insured's Producer.
- **15.** Any denial, cancellation, or non-renewal notice to the insured shall be accompanied by a statement that the insured has a right of appeal.
- 16. The Underwriting Department shall reinstate, without lapse in coverage or additional charge, any policy cancelled solely because of non-payment of additional initial or increased hazard premium, if and when full and complete payment of all premiums due are received before the termination date contained in the notice of denial, cancellation or non-renewal. Such reinstatement of coverage is conditioned upon any check tendered for premium payment being honored when presented for payment.
- 17. Non-payment of any renewal premium shall result in lapse of the policy as of the renewal date and only a notice of such lapse shall be sent to the insured within 15 days following the lapse in coverage.
- **18.** No coverage will be effective if the financial institution dishonors the insured's premium remittance, which accompanies the application.

C. General Rules

1. Applications

All submissions to the FAIR Plan must be on FAIR Plan approved application forms and completed in full detail. The application is available on our website at http://www.kyfairplan.org. The application must be signed by both producer and applicant and accompanied by photographs of the front and rear of the dwelling. The full installment premium (Rule 31) must be submitted with the application.

2. No Binding Authority and Deemer Provision

Coverage cannot be bound by the producer and will be bound by the FAIR Plan only when the application has been accepted by the Underwriting Department. The FAIR Plan has a Deemer Provision which states that eligible risks on original applications for approved lines and coverages written by the Plan are automatically deemed insured after 20 calendar days from the date the application and the required initial installment premium payment is received at the FAIR Plan for a period of 30 days if through no fault of the applicant coverage has not been provided or declined.

3. Commission

Producer compensation of five (5) percent will be paid for policies on which full payment has been received. No compensation is payable on the Kentucky Premium Surcharge. If a policy is cancelled prior to the expiration date, the unearned commission will be due to the FAIR Plan.

4. Renewals

The Underwriting Department may request documentation supporting eligibility with the Plan. Renewal billings will be mailed directly to the insured forty-five (45) days in advance of renewal date with a copy made available for the producer. The company must receive payment by renewal date or coverage will expire.

5. New Business

New policies will be mailed directly to the insured with a copy made available for the producer.

6. Claims procedures

Claims may be submitted by email from the website or via mail/facsimile. The Loss Notice located on the Kentucky FAIR Plan website at www.kyfairplan.org may be completed and emailed from the website.

7. Minimum Written Premium and Minimum Retained Premium

A minimum written annual premium of \$100 plus Kentucky surcharge and installment fee if applicable shall be charged for each policy. A minimum retained premium of \$100 plus Kentucky surcharge and installment fee if applicable shall be deemed fully earned when any period of coverage is provided under the Deemer provision or by the issuance of a binder or policy. If the risk is rejected during the first 20 days following receipt of the application, the entire initial premium shall be returned.

8. Changes, Cancellation or Reduction of Coverage

Requested policy changes and endorsement requests must be submitted to the FAIR Plan for approval. The **producer does not have binding authority** to increase or bind any additional coverage or increase the amount of insurance until the request is received and approved by the Underwriting Department. The change notice or

the policy change form located on the FAIR Plan website may be used to request changes.

If insurance is increased, cancelled or reduced, the additional or return premium shall be computed on a pro-rata basis.

9. Maximum Coverage Limits

The coverage limits written by the FAIR Plan may not exceed the valuation determined in Rule 9 below subject to the following maximums:

a. Building Coverage: \$200,000 Maximum

b. Other Structures: 10% of Building Coverage (Note 1)c. Contents Coverage: 40% of Building Coverage (Note 2)

Note 1: The policy includes 10% Other Structures coverage within the policy limits. If specific additional coverage is needed, an amount not exceeding 10% of the building coverage may be written. Photos are required of other structures.

Note 2: Contents coverage is not automatic and must be specifically requested on the application.

10. <u>Determination of Maximum Coverage Limits</u>

The maximum coverage limits are included in Section 9, above and, as part of the Plan's charge to provide basic coverage, are further limited below:

- Coverage may not exceed the valuation determined by the valuation procedure included in A, below; unless,
- Proof is submitted supporting one or more of the exceptions included under B, below; however,
- The amount of coverage written is subject to the discretion of the Underwriting Department after consideration of information provided with the application or from an outside inspection or reporting sources.
- A. Base cost per square foot valuation procedure:
 - i. Select the type of dwelling by the number of stories.
 - ii. Calculate ground floor area by measuring ground floor only. The dimensions of porches and garages are not included.
 - iii. Determine the predominate construction material, i.e., frame or masonry.
 - iv. Multiply ground floor square footage times the base construction cost shown below. The amount to be insured may not exceed this limitation except as provided in B. below. (F = frame, M = masonry)

	Number of Stories											
Counties		1	1	1/2	2	2	2 1	1/2	Bi L	evel	Tri I	Level
	F	M	F	M	F	M	F	M	F	M	F	M
Jefferson/ McCracken	70	74	85	90	107	111	152	157	100	109	97	105
Pike/Fayette	74	78	87	92	110	117	154	166	100	110	97	109
Daviess	78	85	92	98	117	123	166	174	110	117	109	114
Boone/Kenton/ Campbell	81	86	97	100	122	129	169	181	114	122	111	120
Remainder of State	61	66	73	78	90	97	129	134	86	92	83	87

- B. Exceptions to the above will only be considered if the applicant submits proof of one or more of the following subject to prior approval by the Underwriting Department.
 - i. 80% of the fair market value less the land that is supported by a current independent appraisal secured within the last twelve (12) months at the applicant's expense; depreciated value of improvements less the value of the land; or
 - ii. The amount of the current tax assessment less the value of the land; or
 - iii. Purchase price, if purchased within the past twelve (12) months, less the value of the land.

11. Description of Coverage and Loss Settlement Provisions

The following is a general description of the coverage and loss settlement provisions of the Dwelling Policy. Please consult the policy forms for exact contract terms and conditions.

Perils	DP 00 01 Basic Form	DP 00 02 Broad Form
Fire or Lightning, Internal Explosion	Yes	Yes
Extended Coverage meaning Windstorm or Hail, Explosion, Riot or Civil Commotion, Aircraft, Vehicles, Smoke, Volcanic Eruption	Optional *	Yes
Vandalism or Malicious Mischief	Optional **	Yes
Damage by Burglars, Falling objects, Weight of Ice, Snow or Sleet, Accidental Discharge of Water or Steam, Sudden Cracking of a Steam or Hot Water Heating System, Freezing, Sudden Damage from Artificial Electric Currents	No	Yes

	DP 00 01	DP 00 02
Cottlement Dravisions	Dogio Form	Droad Form

Loss Settlement Provisions	Basic Form	Broad Form
Actual Cash Value	Yes	Yes***

^{*} May be written with the perils of fire or lightning, internal explosion only.

12. Eligibility

General:

Risks composed of dwelling buildings (and/or their contents) designed for use by one to four families are eligible in all protection classes (1–10) when not used for any business purpose. Dwellings and outbuildings which qualify under commercial farm property are not eligible for this program.

Contract of Sale:

Purchaser-occupant(s) who have entered into a long-term installment contract for the purchase of the dwelling and who occupy the dwelling but to whom title does not pass from the seller until all the terms of the installment contract have been satisfied are also eligible. The seller retains title until completion of the payments and in no way acts as a mortgagee. The seller's interest in the building and premises liability may be covered by naming them as an **Additional Interest**. Contract of Sale documentation is required.

Additional Eligibility Requirements:

DP-1 Basic Form

- Vacant property must be written on a DP-1 form.
- Dwellings or other structures with an unrepaired or worn out roof must be written on a DP-1 form with fire peril only.
- Mobile homes must be written on DP-1 form.
- Minimum limit—\$1,000

DP-2 Broad Form

• Minimum limit—\$15,000

In addition to the above, the Underwriters discretion will also be used to determine the appropriate form and coverage to be offered after consideration of the completed application, photographs, outside inspections and other underwriting information provided.

13. Seasonal Dwellings

A seasonal dwelling is a dwelling with continuous unoccupancy of three or more consecutive months during any one-year period.

^{**} Extended Coverage must be purchased before Vandalism and Malicious Mischief can be purchased.

^{***} DP 04 76 – Actual Cash Value Loss Settlement is added to DP 00 02 to change the loss settlement provision to actual cash value (ACV).

14. Single Building Definition

All buildings or sections of buildings which communicate through unprotected openings shall be considered as a single building. Buildings which are separated by space shall be considered separate buildings. Buildings or sections of buildings which are separated by an 8-inch masonry party wall which pierces or rises to the underside of the roof and which pierces or extends to the inner-side of the exterior wall shall be considered separate buildings. Communication between buildings through independent walls or through masonry party walls described above shall be protected by at least a Class A Fire Door installed in a masonry wall section.

15. Construction Definitions

- a. **Frame**: exterior walls of wood or other combustible construction including wood, ironclad, stucco on wood or plaster on combustible supports, or aluminum or plastic siding over frame.
- b. **Masonry Veneer**: exterior walls of combustible construction veneered with brick or stone. (Rate as Masonry)
- c. **Masonry**: exterior walls constructed of masonry materials such as adobe, brick, concrete, gypsum block, hollow concrete block, stone, tile or similar materials with floors and roof of combustible construction. (Disregarding floors resting directly on the ground)
- d. **Mixed Construction**: when 33 1/3% or more of the total exterior wall area is of combustible materials, rate as Frame.

16. Reinstatement with Lapse In Coverage

At the option of the FAIR Plan, policies that have lapsed for non-payment of an installment or renewal premium for a period not exceeding thirty (30) days may be rewritten with a lapse in coverage if the premium is paid and a statement of no loss is provided.

17. Non-Sufficient Funds Service Charge

This rule is not used.

18. Premium Computation

A. Adjusted Base Premium

The adjusted base premium is determined as follows. (All steps are rounded to the nearest dollar). See Dwelling Fire Rating Worksheet at Appendix A.

a. Fire Premium

i. Building

1. Select the Territory, Protection Class, Number of Families, Construction, and Occupancy.

- 2. Multiply the Fire Building Key Rate times (X) the Fire Building Key Factor.* (See the Interpolation Example below for coverage amounts not included in the key factor table.)
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 2 above and this becomes the Fire Building Adjusted Base Premium.
- 4. Mobile Home Risks multiply **\$8.89** times the amount of Building Coverage per \$1,000 and add to the Fire Building Adjusted Base Premium.

ii. Contents

- 1. Select the Territory, Protection Class, Number of Families, Construction, and Occupancy.
- 2. Multiply the Fire Contents Key Rate times (X) the Fire Contents Key Factor.
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 2 above and this becomes the Fire Contents Adjusted Base Premium.
- 4. Mobile Home Risks -multiply **\$8.89** times the amount of Contents Coverage per \$1,000 and add to the Fire Contents Adjusted Base Premium.

b. Extended Coverage Premium

i. Building

- 1. Select the Territory, Policy Form, and Seasonal or Non-Seasonal.
- 2. Multiply the Extended Coverage Building Key Rate times (X) the Extended Coverage Building Key Factor.* (See the Interpolation Example below for coverage amounts not included in the key factor table.)
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 1 above and this becomes the EC Building Adjusted Base Premium.

ii. Contents

- 1. Select the Territory, Policy Form, and Seasonal or Non-Seasonal.
- 2. Multiply the Extended Coverage Contents Key Rate times (X) the Extended Coverage Contents Key Factor.
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 1 above and this becomes the EC Contents Adjusted Base Premium.

c. Vandalism and Malicious Mischief Premium (DP 00 01 Only)

i. Building

- 1. Determine the Occupancy of the building and Seasonal or Non-Seasonal.
- 2. Multiply the V&MM Rate times (X) the amount of Building Coverage/per \$1,000.
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 2 above and this becomes the V&MM Building Adjusted Base Premium.

ii. Contents

- 1. Determine the Occupancy of the building and Seasonal or Non-Seasonal.
- 2. Multiply the V&MM Rate times (X) the amount of Contents Coverage/per \$1,000.
- 3. If an Optional Deductible is selected, multiply the Deductible Factor times (X) the result obtained in 2 above and this becomes the V&MM Contents Adjusted Base Premium.

*Interpolation Example (\$115,000 desired limit of coverage)

When the desired limit of liability is less than the limit shown, interpolate the Key Factors using the nearest limit above and below the desired limit, for example: (\$115,000 desired limit) the nearest limits are \$110,000 and \$120,000.

Figure the difference between the two Key Factors and divide by 10. This provides a factor per \$1,000.

Multiply the factor per \$1,000 times 5, and add to the Key Factor for \$110,000.

B. Premium Prior to Surcharge

The premium prior to surcharge is determined by adding or subtracting the following to/from the adjusted base premium determined in A. above. (Please refer to the Rule for each item for premium computation.)

- a. Protective Devices credit (-) (See Rule 30)
- b. Other Structures premium (+) (See Rule 25)
- c. Earthquake (+) (See Rule 28)
- d. Mine Subsidence (+) (See Rule 29)
- e. Wood burning or coal stove surcharge (+) (See Rule 20)
- f. Conditions charges (+) (See Rule 19)

C. Total Annual Premium

The total annual premium is determined by adding the following to the Premium Prior to Surcharge determined in B. above.

Kentucky Premium Surcharge (Do not round). Multiply the Premium Prior to Surcharge times (X) the Kentucky Premium Surcharge.

D. Waiver of Premium

When a policy is endorsed subsequent to the inception date, any additional or return premium of \$3.99 or less may be waived however the waived premium will be returned if requested by the policyholder.

19. Condition Charges

Condition charges are assessed in accordance with this rule. Depending on the severity of the deficiency, dwellings with one or more of the following deficiencies may be conditionally rejected until the deficiencies are corrected or if minor, accepted with condition charge(s) added.

A. Amount of Charge

- 1. Conditions 1–5: \$1.90 per \$1,000 of coverage
- 2. Condition 6: \$9.50 per \$1,000 of coverage

Charges are added to the Adjusted Base Premium and are rounded to the nearest dollar.

B. Deficiencies

- 1. unsafe arrangement of heating equipment, including chimneys, stovepipes and gas vents;
- 2. unsafe or inadequate electrical wiring or fuse boxes, including non-standard extensions or use of non-U.L. approved equipment;
- 3. conversion or sub-division of original living space into multiple units with over-crowded occupancy, inadequate sanitary facilities, or unsafe arrangements of cooking equipment;
- 4. poor physical condition of building or need of repair, such as worn out roofing, cracked or crumbling chimneys, deteriorating or decaying wood surfaces or supports, no gutters;
- 5. poor housekeeping in yards, basements, hallways or attics which are not kept clean and free from rubbish and litter;
- 6. vacancy or unoccupancy when the entire structure is vacant or unoccupied.

20. Wood burning or Coal Stove Surcharge

Dwellings with fireplace inserts, wood burning or coal stoves or freestanding fireplaces used as heating sources are acceptable if properly installed and maintained. The wood burning stove questionnaire in the application must be completed along with photos showing the installation. A \$100.00 annual surcharge will be assessed. This is a flat charge.

21. <u>Deductibles</u>

The base deductible is \$500. A \$2,500 deductible will be required on dwellings with prior fire losses or multiple claims. Optional deductibles may be written by multiplyingthe base premium by the following factors:

Optional Deductibles	\$250	\$1,000	\$2,500
Fire	1.05	.98	.91
Extended Coverage and V&MM	1.33	.80	.67

The selected factor is used in determining the base premium. See Rule 18.

22. Vandalism & Malicious Mischief (DP 00 01 Only, V&MM is Incl. in DP 00 02)

Premium per \$1,000 of coverage:

Non Seasonal & Not Vacant	Seasonal, Not Vacant	Vacant &/or Unoccupied
\$0.23	\$1.07	\$15.11

23. Mobile Homes or Trailer Homes

A surcharge of \$9.99 per \$1,000 of coverage applies to dwelling and contents. See Premium Computation rule.

24. Limited Fungi, Wet or Dry Rot, or Bacteria Coverage

The Limited Fungi, Wet or Dry Rot, or Bacteria Endorsement (**DP 04 22**) is attached to all **DP 00 02** policies and provides \$5,000 coverage for loss to covered real or personal property owned by an insured that is damaged by fungi, wet or dry rot, or bacteria on the described location. Refer to the endorsement for coverage specifics. This coverage amount may not be increased.

25. Other Structures Coverage

A. Coverage Description

Coverage for other structures described as covered under Coverage ${\bf B}$ is automatically provided on a blanket basis for up to 10% of the Coverage ${\bf A}$ limit.

- i. Under Form **DP 00 01**, use of this option reduces the Coverage **A.** The blanket limit may not be increased.
- ii. Under Form **DP 00 02**, this limit is additional insurance. The blanket limit may not be increased.

B. Additional Other Structures Coverage

If Additional Other Structures Coverage is desired, the premium is calculated as follows:

- 1. Rates
 - i. Fire .04

ii. EC .07

2. Premium Computation

- i. Fire: Fire Building Key Rate X .04 = Other Structures Key Rate (round to nearest \$1.00) X amount of Additional Other Structures Coverage/\$1,000 = Base Premium X Deductible Factor, if applicable = Other Structures Fire Premium. (round to nearest \$1.00)
- ii. EC: EC Building Key Rate X .07 = Other Structures Key Rate (round to nearest \$1.00) X amount of Additional Other Structures Coverage/\$1,000 = Base Premium X Deductible Factor, if applicable = Other Structures EC Premium. (round to nearest \$1.00)
- iii. V&MM: Multiply the V&MM factor X the amount of Coverage/\$1,000 = Base Premium X Deductible Factor, if applicable = Other Structures V&MM Premium. (round to nearest \$1.00)

26. <u>Territory Definitions</u>

City of Louisville 30

County	Terr.	County	Terr.	County	Terr.
Adair	38	Grant	36	Mason	37
Allen	38	Graves	38	Meade	38
Anderson	36	Grayson	38	Menifee	37
Ballard	38	Green	38	Mercer	36
Barren	38	Greenup	37	Metcalfe	38
Bath	37	Hancock	38	Monroe	38
Bell	37	Hardin	38	Montgomery	36
Boone	36	Harlan	37	Morgan	37
Bourbon	36	Harrison	36	Muhlenberg	38
Boyd	37	Hart	38	Nelson	36
Boyle	36	Henderson	35	Nicholas	36
Bracken	36	Henry	36	Ohio	38
Breathitt	37	Hickman	38	Oldham	36
Breckinridge	38	Hopkins	38	Owen	36
Bullitt	36	Jackson	36	Owsley	37
Butler	38	Jefferson	31	Pendleton	36
Caldwell	38	Jessamine	36	Perry	37
Calloway	38	Johnson	37	Pike	37
Campbell	34	Kenton	33	Powell	36
Carlisle	38	Knott	37	Pulaski	38
Carroll	36	Knox	37	Robertson	36
Carter	37	Larue	38	Rockcastle	36
Casey	36	Laurel	37	Rowan	37
Christian	38	Lawrence	37	Russell	38
Clark	36	Lee	37	Scott	36

County	Terr.	County	Terr.	County	Terr.
Clay	37	Leslie	37	Shelby	36
Clinton	38	Letcher	37	Simpson	38
Crittenden	38	Lewis	37	Spencer	36
Cumberland	38	Lincoln	36	Taylor	38
Daviess	35	Livingston	38	Todd	38
Edmonson	38	Logan	38	Trigg	38
Elliott	37	Lyon	38	Trimble	36
Estill	36	McCracken	38	Union	38
Fayette	32	McCreary	38	Warren	38
Fleming	37	McLean	38	Washington	36
Floyd	37	Madison	36	Wayne	38
Franklin	36	Magoffin	37	Webster	38
Fulton	38	Marion	36	Whitley	37
Gallatin	36	Marshall	38	Wolfe	37
Garrard	36	Martin	37	Woodford	36

27. Protection Classification Codes

The Protection Class listings in the ISO Public Protection Classification manual apply.

Protection Classes and Codes						
Prot. Class	Code	Prot. Class	Code			
1	01	6	06			
2	02	7	07			
3	03	8 & 8B	08			
4	04	9	09			
5	05	10	10			

In an area where two or more classifications are shown (example 6/9), the classification is determined as follows:

Distance to Fire Station	Class
5 road miles or less with hydrant within 1,000 feet	6
5 road miles or less with hydrant beyond 1,000 feet	9
Over 5 road miles	10

28. Earthquake

A. Optional Deductibles

The base deductible is 5% and the following optional deductibles are available:

Deductible Percentage	Frame	Masonry
10%	.90	.95
15%	.80	.85
20%	.65	.70
25%	.50	.60

B. Determination of Premium

- a. Determine the Earthquake Zone.
- b. Select the rate according to construction.
- c. Determine value range. (Use Coverage A for Dwelling).
- d. The base earthquake premium is the premium shown in the rate table (D) below.
- e. If a higher deductible is selected, multiply the base earthquake premium times the deductible percentage factor obtained in B, above, (based on construction), and round to the nearest dollar.

C. Zone Definitions:

- **Zone 2** Ballard, Calloway, Caldwell, Carlisle, Christian, Crittenden, Daviess, Fulton, Graves, Henderson, Hickman, Hopkins, Livingston, Lyon, McCracken, McLean, Marshall, Trigg, Union, Webster.
- **Zone 3** Allen, Barren, Butler, Breckinridge, Edmonson, Grayson, Hancock, Hardin, Hart, Larue, Logan, Meade, Muhlenberg, Ohio, Simpson, Todd, Warren.

Zone 4 Balance of the state.

D. Rates (5% deductible rates)

Frame							
Value Range	Zone 2	Zone 3	Zone 4				
0-\$60,000	\$42.00	\$34.00	\$28.00				
\$60,001-\$100,000	\$69.00	\$55.00	\$42.00				
\$100,001-and up	\$89.00	\$76.00	\$62.00				
	Masonry *						
Value Range	Zone 2	Zone 3	Zone 4				
0-\$60,000	\$69.00	\$55.00	\$42.00				
\$60,001-\$100,000	\$103.00	\$83.00	\$62.00				
\$100,001-and up	\$124.00	\$103.00	\$89.00				

^{*} If Masonry Veneer is excluded, rate as Frame.

E. Minimum Premium

The earthquake premium is fully earned when written. The minimum annual premium is \$25.00.

29. Coal Mine Subsidence Coverage

Coverage for loss caused by Coal Mine Subsidence must be provided on real property risks in "qualified locations", unless waived in writing by the insured. The following counties are eligible to become "qualified". Coverage for Coal Mine Subsidence shall **not** be provided in eligible locations, which have not "qualified locations*". Qualification refers to certification by the fiscal courts that the

availability of Mine Subsidence Insurance has been approved in a particular eligible county. The following applies to Coverages A & B when Coal Mine Subsidence Coverage is written for all structures insured under the policy, Endorsement form **DP 04 88** will be attached. The maximum limit of liability reinsured by the Kentucky Coal Mine Subsidence Fund is \$300,000. See note (2) below regarding maximum limits. The coverage includes \$25,000 additional living expense coverage for the owner of a residence who has been temporarily displaced as a result of mine subsidence. The amount is in addition to the \$300,000 for the structure.

Qualified Locations*								
Bath	Estill	Lee*	Perry*					
Bell*	Floyd*	Leslie*	Pike					
Boyd*	Grayson	Letcher*	Powell					
Breathitt*	Greenup*	McCreary*	Pulaski					
Butler*	Hancock*	McLean*	Rockcastle					
Caldwell	Harlan*	Madison	Rowan					
Carter*	Henderson*	Magoffin	Union*					
Christian*	Hopkins*	Martin*	Warren					
Clay*	Jackson*	Menifee	Wayne					
Clinton	Johnson*	Montgomery	Webster*					
Crittenden	Knott*	Morgan*	Whitley*					
Daviess*	Knox*	Muhlenberg*	Wolfe*					
Edmonson*	Laurel*	Ohio*						
Elliott*	Lawrence*	Owsley*						

Mine Subsidence Rates							
Amount of Coverage	Dwelling Rates	Non-Dwelling					
Up to \$50,000	\$10.00	\$15.00					
\$50,001 to \$60,000	\$12.00	\$17.00					
\$60,001 to \$70,000	\$14.00	\$19.00					
\$70,001 to \$80,000	\$16.00	\$21.00					
80,001 to \$90,000	\$18.00	\$23.00					
\$90,001 to \$100,000	\$20.00	\$25.00					
Amounts exceeding \$100,000	\$2.00 per \$10,000	\$2.00 per \$10,000					

- (1) A non-dwelling structure is defined for rating purposes as a building that is not principally used for residential purposes or houses more than four familyunits.
- (2) \$300,000 is the maximum total insured value, per structure, reinsured by the Kentucky Coal Mine Subsidence Fund; however, the maximum coverage available is limited in accordance with Rule 9 of this manual. The coverage includes \$25,000 additional living expense coverage for the owner of a residence who has been temporarily displaced as a result of mine subsidence. The amount is in addition to the \$300,000 for the structure.

30. Protective Devices

Approved and properly maintained installations of automatic sprinklers in the dwelling may be recognized for a reduced premium that is computed by multiplying the Base Premium by the factor from the following table:

Type of Installation	Factor
Automatic Sprinklers in all areas including attics, bathrooms, closets, attached structures	.80
Automatic Sprinklers in all areas except attic, bathroom, closet and attached structure areas that are protected by a fire detector.	.90

Use Premises Alarm or Fire Protection System Endorsement **DP 04 70**.

31. Policy Period and Installment Plan

a. **Policy Period**:

All policies are written for a period of one year and may be extended for successive policy periods by renewal certificate based upon the premiums, forms and endorsements then in effect.

b. Minimum Deposit:

If the installment plan results in the payment less than \$100, the initial minimum deposit will be \$100 (+) plus Kentucky Surcharge.

c. Installment Plans:

- 1. **One payment option**—No billing service fee shall apply. The annual premium must be submitted with the application.
- 2. **Two-payment option**—A \$4.00 billing service fee will be added to each direct bill payment. 50% of the premium must be billed with the application.
- 3. **Four-payment option**—A **\$4.00** billing service fee will be added to each direct bill payment. **25%** of the annual premium must be submitted with the application.
- 4. **Five-payment option**—A \$4.00 billing service fee will be added to each direct bill payment. 20% of the annual premium must be submitted with the application.
- 5. **Mortgagee Bill** Full annual premium is required with the application or 25% down payment submitted by the insured.

KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 30 - OWNER OCCUPIED

		NUMBER OF FAMILIES					
		,	1	2	2	3 O	R 4
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	113	19	119	19	176	26
	F	153	25	161	25	238	36
2	М	115	19	121	19	178	27
	F	155	26	163	26	240	36
3	М	117	19	122	19	181	27
	F	156	26	164	26	243	36
4	М	118	20	124	20	183	27
	F	158	26	166	26	245	37
5	М	120	20	126	20	186	28
	F	160	26	168	26	248	37
6	М	121	20	127	20	188	28
	F	161	27	169	27	250	37
7	М	123	20	129	20	191	29
	F	224	37	235	37	347	52
8	М	144	24	151	24	223	33
	F	224	37	235	37	347	52
8B	М	201	33	211	33	312	47
	F	319	53	335	53	495	74
9	М	240	40	251	40	371	56
	F	383	64	402	64	594	89
10	М	287	48	302	48	446	67
	F	599	99	629	99	928	139

TERRITORY 30 - NON-OWNER OCCUPIED

		NUMBER OF FAMILIES					
		•	1	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	119	19	125	19	185	26
	F	161	25	169	25	249	36
2	М	121	19	127	19	187	27
	F	163	26	171	26	252	36
3	М	122	19	129	19	190	27
	F	164	26	173	26	255	36
4	М	124	20	130	20	192	27
	F	166	26	174	26	257	37
5	М	126	20	132	20	195	28
	F	168	26	176	26	260	37
6	М	127	20	134	20	198	28
	F	169	27	178	27	262	37
7	М	129	20	136	20	200	29
	F	235	37	246	37	364	52
8	М	151	24	158	24	234	33
	F	235	37	246	37	364	52
8B	М	211	33	222	33	327	47
	F	335	53	352	53	520	74
9	М	251	40	264	40	390	56
	F	402	64	423	64	624	89
10	М	302	48	317	48	468	67
	F	629	99	660	99	975	139

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KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 31 - OWNER OCCUPIED

		NUMBER OF FAMILIES					
		,	•	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	M	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	M	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	M	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	M	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	M	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 31 - NON-OWNER OCCUPIED

		NUMBER OF FAMILIES					
		,	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	131	21	137	21	203	30
	F	177	29	186	29	274	40
2	М	133	21	139	21	206	30
	F	179	29	188	29	277	40
3	М	135	22	141	22	209	30
	F	181	29	190	29	280	41
4	М	136	22	143	22	211	31
	F	182	29	192	29	283	41
5	М	138	22	145	22	214	31
	F	184	30	194	30	286	42
6	М	140	23	147	23	217	32
	F	186	30	195	30	289	42
7	М	142	23	149	23	220	32
	F	258	42	271	42	400	58
8	М	166	27	174	27	257	38
	F	258	42	271	42	400	58
8B	М	232	38	244	38	360	53
	F	369	60	387	60	571	83
9	М	276	45	290	45	428	63
	F	442	71	464	71	686	100
10	М	332	54	348	54	514	75
	F	691	112	726	112	1,071	156

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KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 32 - OWNER OCCUPIED

		NUMBER OF FAMILIES					
		,	1	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	М	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	М	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	М	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	М	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 32 - NON-OWNER OCCUPIED

		NUMBER OF FAMILIES					
		,	1	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	131	21	137	21	203	30
	F	177	29	186	29	274	40
2	М	133	21	139	21	206	30
	F	179	29	188	29	277	40
3	М	135	22	141	22	209	30
	F	181	29	190	29	280	41
4	М	136	22	143	22	211	31
	F	182	29	192	29	283	41
5	М	138	22	145	22	214	31
	F	184	30	194	30	286	42
6	М	140	23	147	23	217	32
	F	186	30	195	30	289	42
7	М	142	23	149	23	220	32
	F	258	42	271	42	400	58
8	М	166	27	174	27	257	38
	F	258	42	271	42	400	58
8B	М	232	38	244	38	360	53
	F	369	60	387	60	571	83
9	М	276	45	290	45	428	63
	F	442	71	464	71	686	100
10	М	332	54	348	54	514	75
	F	691	112	726	112	1,071	156

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KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 33 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	S	
		,		2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVERAGE	
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	M	81	13	85	13	125	19
	F	109	18	114	18	169	25
2	M	82	14	86	14	127	19
	F	110	18	116	18	171	26
3	M	83	14	87	14	128	19
	F	111	19	117	19	172	26
4	M	84	14	88	14	130	20
	F	112	19	118	19	174	26
5	M	85	14	89	14	132	20
	F	113	19	119	19	176	26
6	M	86	14	91	14	134	20
	F	115	19	120	19	178	27
7	M	87	15	92	15	135	20
	F	159	26	167	26	246	37
8	M	102	17	107	17	158	24
	F	159	26	167	26	246	37
8B	M	143	24	150	24	222	33
	F	227	38	238	38	352	53
9	M	170	28	179	28	264	40
	F	272	45	286	45	422	64
10	M	204	34	214	34	316	48
	F	425	71	447	71	659	99

TERRITORY 33 - NON-OWNER OCCUPIED

			1	NUMBER O	F FAMILIES	3	
		•	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	85	13	89	13	131	19
	F	114	18	120	18	177	25
2	М	86	14	90	14	133	19
	F	116	18	121	18	179	26
3	М	87	14	91	14	135	19
	F	117	19	123	19	181	26
4	М	88	14	93	14	137	20
	F	118	19	124	19	183	26
5	М	89	14	94	14	138	20
	F	119	19	125	19	185	26
6	М	91	14	95	14	140	20
	F	120	19	126	19	186	27
7	М	92	15	96	15	142	20
	F	167	26	175	26	258	37
8	М	107	17	113	17	166	24
	F	167	26	175	26	258	37
8B	М	150	24	158	24	233	33
	F	238	38	250	38	369	53
9	М	179	28	188	28	277	40
	F	286	45	300	45	443	64
10	М	214	34	225	34	332	48
	F	447	71	469	71	692	99

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KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 34 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,		2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	81	13	85	13	125	19
	F	109	18	114	18	169	25
2	М	82	14	86	14	127	19
	F	110	18	116	18	171	26
3	М	83	14	87	14	128	19
	F	111	19	117	19	172	26
4	М	84	14	88	14	130	20
	F	112	19	118	19	174	26
5	М	85	14	89	14	132	20
	F	113	19	119	19	176	26
6	М	86	14	91	14	134	20
	F	115	19	120	19	178	27
7	М	87	15	92	15	135	20
	F	159	26	167	26	246	37
8	М	102	17	107	17	158	24
	F	159	26	167	26	246	37
8B	М	143	24	150	24	222	33
	F	227	38	238	38	352	53
9	М	170	28	179	28	264	40
	F	272	45	286	45	422	64
10	М	204	34	214	34	316	48
	F	425	71	447	71	659	99

TERRITORY 34 - NON-OWNER OCCUPIED

			1	NUMBER O	F FAMILIES	3	
		•	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	85	13	89	13	131	19
	F	114	18	120	18	177	25
2	М	86	14	90	14	133	19
	F	116	18	121	18	179	26
3	М	87	14	91	14	135	19
	F	117	19	123	19	181	26
4	М	88	14	93	14	137	20
	F	118	19	124	19	183	26
5	М	89	14	94	14	138	20
	F	119	19	125	19	185	26
6	М	91	14	95	14	140	20
	F	120	19	126	19	186	27
7	М	92	15	96	15	142	20
	F	167	26	175	26	258	37
8	М	107	17	113	17	166	24
	F	167	26	175	26	258	37
8B	М	150	24	158	24	233	33
	F	238	38	250	38	369	53
9	М	179	28	188	28	277	40
	F	286	45	300	45	443	64
10	М	214	34	225	34	332	48
	F	447	71	469	71	692	99

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TERRITORY 35 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE		COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	М	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	М	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	М	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	М	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 35 - NON-OWNER OCCUPIED

			NUMBER OF FAMILIES						
		,	-		2		3 OR 4		
PROT.		COVE	RAGE	COVE	RAGE	COVERAGE			
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.		
1	М	131	21	137	21	203	30		
	F	177	29	186	29	274	40		
2	М	133	21	139	21	206	30		
	F	179	29	188	29	277	40		
3	М	135	22	141	22	209	30		
	F	181	29	190	29	280	41		
4	М	136	22	143	22	211	31		
	F	182	29	192	29	283	41		
5	М	138	22	145	22	214	31		
	F	184	30	194	30	286	42		
6	М	140	23	147	23	217	32		
	F	186	30	195	30	289	42		
7	M	142	23	149	23	220	32		
	F	258	42	271	42	400	58		
8	М	166	27	174	27	257	38		
	F	258	42	271	42	400	58		
8B	M	232	38	244	38	360	53		
	F	369	60	387	60	571	83		
9	М	276	45	290	45	428	63		
	F	442	71	464	71	686	100		
10	М	332	54	348	54	514	75		
	F	691	112	726	112	1,071	156		

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TERRITORY 36 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE		COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	М	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	М	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	М	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	М	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 36 - NON-OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	131	21	137	21	203	30
	F	177	29	186	29	274	40
2	М	133	21	139	21	206	30
	F	179	29	188	29	277	40
3	М	135	22	141	22	209	30
	F	181	29	190	29	280	41
4	М	136	22	143	22	211	31
	F	182	29	192	29	283	41
5	М	138	22	145	22	214	31
	F	184	30	194	30	286	42
6	М	140	23	147	23	217	32
	F	186	30	195	30	289	42
7	М	142	23	149	23	220	32
	F	258	42	271	42	400	58
8	М	166	27	174	27	257	38
	F	258	42	271	42	400	58
8B	М	232	38	244	38	360	53
	F	369	60	387	60	571	83
9	М	276	45	290	45	428	63
	F	442	71	464	71	686	100
10	М	332	54	348	54	514	75
	F	691	112	726	112	1,071	156

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TERRITORY 37 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	•	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	M	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	M	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	M	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	M	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	M	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 37 - NON-OWNER OCCUPIED

			1	NUMBER O	F FAMILIES	3	
		,	1	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVERAGE	
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	131	21	137	21	203	30
	F	177	29	186	29	274	40
2	М	133	21	139	21	206	30
	F	179	29	188	29	277	40
3	М	135	22	141	22	209	30
	F	181	29	190	29	280	41
4	М	136	22	143	22	211	31
	F	182	29	192	29	283	41
5	М	138	22	145	22	214	31
	F	184	30	194	30	286	42
6	М	140	23	147	23	217	32
	F	186	30	195	30	289	42
7	М	142	23	149	23	220	32
	F	258	42	271	42	400	58
8	М	166	27	174	27	257	38
	F	258	42	271	42	400	58
8B	М	232	38	244	38	360	53
	F	369	60	387	60	571	83
9	М	276	45	290	45	428	63
	F	442	71	464	71	686	100
10	М	332	54	348	54	514	75
	F	691	112	726	112	1,071	156

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KEY RATE X KEY FACTOR = BASE PREMIUM

TERRITORY 38 - OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	•	2	2	3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	M	125	21	131	21	193	30
	F	168	29	177	29	261	40
2	M	126	21	133	21	196	30
	F	170	29	179	29	264	40
3	M	128	22	135	22	199	30
	F	172	29	181	29	267	41
4	M	130	22	136	22	201	31
	F	174	29	182	29	269	41
5	М	132	22	138	22	204	31
	F	176	30	184	30	272	42
6	М	133	23	140	23	207	32
	F	177	30	186	30	275	42
7	М	135	23	142	23	209	32
	F	246	42	258	42	381	58
8	М	158	27	166	27	245	38
	F	246	42	258	42	381	58
8B	M	221	38	232	38	343	53
	F	351	60	369	60	544	83
9	М	263	45	276	45	408	63
	F	421	71	442	71	653	100
10	М	316	54	332	54	490	75
	F	658	112	691	112	1,020	156

TERRITORY 38 - NON-OWNER OCCUPIED

			١	NUMBER O	F FAMILIES	3	
		,	1	2		3 OR 4	
PROT.		COVE	RAGE	COVE	RAGE	COVE	RAGE
CLASS	CONST.	BLDG.	CONT.	BLDG.	CONT.	BLDG.	CONT.
1	М	131	21	137	21	203	30
	F	177	29	186	29	274	40
2	М	133	21	139	21	206	30
	F	179	29	188	29	277	40
3	М	135	22	141	22	209	30
	F	181	29	190	29	280	41
4	М	136	22	143	22	211	31
	F	182	29	192	29	283	41
5	М	138	22	145	22	214	31
	F	184	30	194	30	286	42
6	М	140	23	147	23	217	32
	F	186	30	195	30	289	42
7	М	142	23	149	23	220	32
	F	258	42	271	42	400	58
8	М	166	27	174	27	257	38
	F	258	42	271	42	400	58
8B	М	232	38	244	38	360	53
	F	369	60	387	60	571	83
9	М	276	45	290	45	428	63
	F	442	71	464	71	686	100
10	М	332	54	348	54	514	75
	F	691	112	726	112	1,071	156

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KEY RATE X KEY FACTOR = BASE PREMIUM

BUILDING	GS						
Cov. A		Cov. A		Cov. A		Cov. A	
Amount	Factor	Amount	Factor	Amount	Factor	Amount	Factor
		·					
1,000	0.310	17,000	0.891	33,000	1.213	49,000	1.474
2,000	0.346	18,000	0.927	34,000	1.229	50,000	1.490
3,000	0.382	19,000	0.964	35,000	1.245	60,000	1.650
4,000	0.419	20,000	1.000	36,000	1.261	70,000	1.810
5,000	0.455	21,000	1.017	37,000	1.278	80,000	1.970
6,000	0.491	22,000	1.033	38,000	1.294	90,000	2.130
7,000	0.528	23,000	1.049	39,000	1.311	100,000	2.290
8,000	0.564	24,000	1.065	40,000	1.327	110,000	2.450
9,000	0.600	25,000	1.082	41,000	1.343	120,000	2.610
10,000	0.637	26,000	1.098	42,000	1.359	130,000	2.770
11,000	0.673	27,000	1.115	43,000	1.376	140,000	2.930
12,000	0.709	28,000	1.131	44,000	1.392	150,000	3.090
13,000	0.746	29,000	1.147 1.163	45,000 46,000	1.409	160,000	3.250 3.410
14,000 15,000	0.782 0.818	30,000 31,000	1.180	46,000 47,000	1.425 1.441	170,000 180,000	3.410
16,000	0.855	32,000	1.196	48,000	1.441	190,000	3.730
10,000	0.000	32,000	1.130	40,000	1.437	200,000	3.890
						200,000	0.000
CONTEN	TS						
Cov. C		Cov. C		Cov. C		Cov. C	
<u>Amount</u>	Factor	Amount	Factor	Amount	Factor	<u>Amount</u>	Factor
4.000		40.000				10.000	
1,000	0.35	16,000	2.30	31,000	4.25	46,000	6.20
2,000	0.48	17,000	2.43	32,000	4.38	47,000	6.33
3,000	0.61	18,000	2.56	33,000	4.51	48,000	6.46
4,000 5,000	0.74 0.87	19,000 20,000	2.69 2.82	34,000 35,000	4.64 4.77	49,000 50,000	6.59 6.72
6,000	1.00	20,000	2.02 2.95	36,000	4.77	51,000	6.85
7,000	1.13	22,000	3.08	37,000	5.03	52,000	6.98
8,000	1.13	23,000	3.21	38,000	5.16	53,000	7.11
9,000	1.39	24,000	3.34	39,000	5.10	54,000	7.11
10,000	1.52	25,000	3.47	40,000	5.42	55,000	7.24
11,000	1.65	26,000	3.60	41,000	5.55	56,000	7.50
12,000	1.78	27,000	3.73	42,000	5.68	57,000	7.63
13,000	1.91	28,000	3.86	43,000	5.81	58,000	7.76
14,000	2.04	29,000	3.99	44,000	5.94	59,000	7.89
15,000	2.17	30,000	4.12	45,000	6.07	60,000	8.02
•						e/a 1,000	0.130

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KENTUCKY FAIR PLAN REINSURANCE ASSOCIATION EXTENDED COVERAGE RULE 32. KEY RATES AND KEY FACTORS

KEY RATE X KEY FACTOR = BASE PREMIUM

	Form DP-1	Form DP-2	Form DP-2	Form DP-1	Form DP-2	Form DP-2
	Buildings	Buildings	Buildings	Contents	Contents	Contents
	Non-Seasonal			Non-Seasonal		
Territory	and Seasonal	Non-Seasonal	Seasonal	and Seasonal	Non-Seasonal	Seasonal
30	\$130	\$234	\$293	\$12	\$34	\$49
31	130	234	293	12	34	49
32	137	247	308	13	36	53
33	99	178	223	9	25	36
34	99	178	223	9	25	36
35	137	247	308	13	36	53
36	137	247	308	13	36	53
37	137	247	308	13	36	53
38	137	247	308	13	36	53

BUIL	DINGS						
0 1		O A		0 4		O A	
Cov. A	C4	Cov. A	C4	Cov. A		Cov. A	C4
Amount 4 000	Factor	Amount	Factor	Amount	Factor	Amount	Factor
1,000	0.566	17,000	0.931	33,000	1.297	49,000	1.662
2,000	0.588	18,000	0.953	34,000	1.320	50,000	1.685
3,000	0.611	19,000	0.977	35,000	1.343	60,000	1.915
4,000	0.634	20,000	1.000	36,000	1.365	70,000	2.145
5,000	0.657	21,000	1.023	37,000	1.388	80,000	2.375
6,000	0.680	22,000	1.046	38,000	1.411	90,000	2.605
7,000	0.703	23,000	1.069	39,000	1.434	100,000	2.835
8,000	0.726	24,000	1.091	40,000	1.456	110,000	3.065
9,000	0.749	25,000	1.114	41,000	1.479	120,000	3.295
10,000	0.771	26,000	1.137	42,000	1.502	130,000	3.525
11,000	0.794	27,000	1.160	43,000	1.525	140,000	3.755
12,000	0.817	28,000	1.182	44,000	1.547	150,000	3.985
13,000	0.840	29,000	1.205	45,000	1.570	160,000	4.215
14,000	0.862	30,000	1.228	46,000	1.593	170,000	4.445
15,000	0.885	31,000	1.251	47,000	1.616	180,000	4.675
16,000	0.908	32,000	1.273	48,000	1.639	190,000	4.905
						200,000	5.135
0.01							
CON	TENTS						
CON'	TENTS	Cov. C		Cov. C		Cov. C	
Cov. C			Factor		Factor		Factor
Cov. C Amount	Factor 0.17	<u>Amount</u>	<u>Factor</u> 2.67	<u>Amount</u>	<u>Factor</u> 5.19	<u>Amount</u>	<u>Factor</u> 7.74
Cov. C Amount 1,000	Factor 0.17	<u>Amount</u> 16,000	2.67	<u>Amount</u> 31,000	5.19	<u>Amount</u> 46,000	7.74
Cov. C <u>Amount</u> 1,000 2,000	<u>Factor</u> 0.17 0.33	<u>Amount</u> 16,000 17,000	2.67 2.84	<u>Amount</u> 31,000 32,000	5.19 5.36	Amount 46,000 47,000	7.74 7.91
Cov. C <u>Amount</u> 1,000 2,000 3,000	<u>Factor</u> 0.17 0.33 0.50	<u>Amount</u> 16,000 17,000 18,000	2.67 2.84 3.00	Amount 31,000 32,000 33,000	5.19 5.36 5.53	Amount 46,000 47,000 48,000	7.74 7.91 8.08
Cov. C <u>Amount</u> 1,000 2,000 3,000 4,000	Factor 0.17 0.33 0.50 0.67	Amount 16,000 17,000 18,000 19,000	2.67 2.84 3.00 3.17	Amount 31,000 32,000 33,000 34,000	5.19 5.36 5.53 5.70	Amount 46,000 47,000 48,000 49,000	7.74 7.91 8.08 8.25
Cov. C <u>Amount</u> 1,000 2,000 3,000 4,000 5,000	Factor 0.17 0.33 0.50 0.67 0.83	Amount 16,000 17,000 18,000 19,000 20,000	2.67 2.84 3.00 3.17 3.34	Amount 31,000 32,000 33,000 34,000 35,000	5.19 5.36 5.53 5.70 5.87	Amount 46,000 47,000 48,000 49,000 50,000	7.74 7.91 8.08 8.25 8.42
Cov. C <u>Amount</u> 1,000 2,000 3,000 4,000 5,000 6,000	Factor 0.17 0.33 0.50 0.67	Amount 16,000 17,000 18,000 19,000	2.67 2.84 3.00 3.17	Amount 31,000 32,000 33,000 34,000 35,000 36,000	5.19 5.36 5.53 5.70	Amount 46,000 47,000 48,000 49,000 50,000 51,000	7.74 7.91 8.08 8.25
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76
Cov. C <u>Amount</u> 1,000 2,000 3,000 4,000 5,000 6,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00	Amount 16,000 17,000 18,000 19,000 20,000 21,000	2.67 2.84 3.00 3.17 3.34 3.51	Amount 31,000 32,000 33,000 34,000 35,000 36,000	5.19 5.36 5.53 5.70 5.87 6.04	Amount 46,000 47,000 48,000 49,000 50,000 51,000	7.74 7.91 8.08 8.25 8.42 8.59
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 39,000 40,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000 11,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50 1.67 1.84	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000 26,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00 4.17 4.34	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 40,000 41,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55 6.72 6.89	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000 56,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10 9.27 9.44
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000 11,000 12,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50 1.67 1.84 2.00	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000 26,000 27,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00 4.17 4.34 4.51	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 40,000 41,000 42,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55 6.72 6.89 7.06	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000 56,000 57,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10 9.27 9.44 9.61
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000 11,000 12,000 13,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50 1.67 1.84 2.00 2.17	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000 26,000 27,000 28,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00 4.17 4.34 4.51 4.68	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 40,000 41,000 42,000 43,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55 6.72 6.89 7.06 7.23	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000 56,000 57,000 58,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10 9.27 9.44 9.61 9.78
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000 11,000 12,000 13,000 14,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50 1.67 1.84 2.00 2.17 2.33	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000 26,000 27,000 28,000 29,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00 4.17 4.34 4.51 4.68 4.85	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 40,000 41,000 42,000 43,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55 6.72 6.89 7.06 7.23 7.40	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000 56,000 57,000 58,000 59,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10 9.27 9.44 9.61 9.78 9.95
Cov. C Amount 1,000 2,000 3,000 4,000 5,000 6,000 7,000 8,000 9,000 10,000 11,000 12,000 13,000	Factor 0.17 0.33 0.50 0.67 0.83 1.00 1.17 1.34 1.50 1.67 1.84 2.00 2.17	Amount 16,000 17,000 18,000 19,000 20,000 21,000 22,000 23,000 24,000 25,000 26,000 27,000 28,000	2.67 2.84 3.00 3.17 3.34 3.51 3.67 3.84 4.00 4.17 4.34 4.51 4.68	Amount 31,000 32,000 33,000 34,000 35,000 36,000 37,000 38,000 40,000 41,000 42,000 43,000	5.19 5.36 5.53 5.70 5.87 6.04 6.21 6.38 6.55 6.72 6.89 7.06 7.23	Amount 46,000 47,000 48,000 49,000 50,000 51,000 52,000 53,000 54,000 55,000 56,000 57,000 58,000	7.74 7.91 8.08 8.25 8.42 8.59 8.76 8.93 9.10 9.27 9.44 9.61 9.78

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		, i	(entii	cky FAIR Plan	Dwell	ling Fire Rating Worksheet			
Rating Territory	,			DP-1 or DP-2	DWCII	The Ruling Worksheet	Name	of Insured	
Protection Clas				onal or Non-Sea	sonal		Policy Number		
Construction				per of Families	Jona		Occup		
00			1		Fii	re	100001		
Building (If mo	bile ho	ome, see Note 3 be	low)						
									Building
				Base				Adjusted E	Base Premium
Key Rate	Х	Key Factor	(=)	Premium (1)	Х	Deductible Factor	(=)	(Note	1 and 3)
	Χ		(=)		Χ		а		
Contents (If m	obile h	ome, see Note 3 be	elow)						
				_					Contents
				Base				_	Base Premium
Key Rate	X	Key Factor	(=)	Premium (1)	X	Deductible Factor	(=)	(Note	1 and 3)
	X		(=)		X		b		
D				Exte	ended	Coverage			
Building		1					1 1	EC I	Duilding
				Base					Building Base Premium
Koy Boto	Х	Koy Footor	(-)	Premium (1)	_	Deductible Factor	(-)	_	ote 1)
Key Rate	X	Key Factor	(=)	Premium (1)	X	Deductible Factor	(=)	(1)	ole I)
Contents	^		(=)	<u> </u>	^		С		
Contents								EC C	ontents
				Base					Base Premium
Key Rate	X	Key Factor	(=)	Premium (1)	Х	Deductible Factor	(=)	-	ote 1)
itey itale	X	Ney i actor	(=)	i ieiliidiii (i)	X	Deductible Factor	(<u>-)</u>	(1)	ote i)
			(-)		V&I	MM	_ u		
Building					10.				
<u>Januani</u>								V&MN	l Building
V&MM		Amount of		Base					Base Premium
Rate	Х	Coverage/\$1,000	(=)	Premium (1)	Х	Deductible Factor	(=)	_	ote 1)
	X	g - , , , , , , , , , , , , , , , , , ,	(=)	(1)	Х		e	(**	
Contents	1	<u> </u>	\ /						
								V&MM	Contents
V&MM		Amount of		Base					Base Premium
Rate	Х	Coverage/\$1,000	(=)	Premium (1)	Х	Deductible Factor	(=)	_	ote 1)
	Х		(=)	` '	Х		f	,	,
			<u>`</u>	sted Base Prem	ium (a	+b+c+d+e+f)	g		
			_	ctive Device Cre	•		h		
					_ , ,	e 2) (See rating steps below)	i		
				ition Charges (se	•	, <u> </u>	+ <u>;</u>		
						ge (\$100.00 flat charge)	k		
						0 Minimum Premium)	l		
				Subsidence Prei	•	o wiiiiiiidiii Fieiliidiii)	m		
						(I- ::::::::::::::::::::::::::::::	+		
						je (g-h+i+j+k+l+m)	n		
				rem. Surcharge (`	<u>'</u>	0		
			Total	Annual Premiu	ım (n+c	o)			
		Condition Charges					Notes:		
•	, ,	1.90 X Amt of bldg. +		•		1. Round to nearest \$1.00	a limita aa	this is addl as	va if pooded
Johnson Charge	ss. (0) 9	.50 X Amt of bldg. + c	oni. CO	vg. / φι,υυυ		 Policy includes 10% cov'g withir Mobile Home - see below. 	i iiiiits sc	o uno io auui. CO	vg.ii needed
		Oth	er Stri	uctures (Additio	onal) C	overage Rating Steps: (Note	2)		
	Fire B					te (round to \$1.00) X Amt of Cov		= Base Premiu	ım
Fire	X Ded	luctible Factor = Oth	er Stru	ctures Fire Prem	ium (ro	ound to \$1.00)			
						e (round to \$1.00) X Amt of Covg	/\$1,000 =	Base Premiu	m
EC V 2 M M	X Deductible Factor = Other Structures EC Premium (round to \$1.00) V&MM factor X Amt of Covg/\$1,000 = Base Prem X Ded factor = Other Structures V&MM Premium (round to \$1.00)								
V&MM	VOIVIIV	i lactor A Amit of Cov					rreinium	i (i ouiiu to \$1.0	יסי
	_	1	N(ULE 3: IT WIODIIE	nome,	the following is added		labila II 5	allalina di e e di
A		Makila Hawa		B			M	lobile Home Bu	

						and remember to account	
							Mobile Home Building Load:
Amt of Building		Mobile Home		Premium:			Round to \$1.00 and add to
Coverage/\$1,000	X	Charge	(=)	Round to \$1.00	X	Deductible Factor	Fire Building Adjusted Base Premium
	Х	\$9.99	(=)		Х		
							Mobile Home Contents Load:
Amt of Contents		Mobile Home		Premium:			Round to \$1.00 and add to
Coverage/\$1,000	X	Charge	(=)	Round to \$1.00	X	Deductible Factor	Fire Contents Adjusted Base Premium
	Х	\$9.99	(=)		Х		