ILLINOIS SUMMARY SHEET

FORM RF-3

LOB: **Inland Marine**

Change in Company's premium or rate level produced by rate revision effective 12/02/09 - 01/01/10

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	**16,757**	**-27.5%**
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: **N/A**

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
New loss cost multipliers only.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

RECEIVED
SEP 09 2009
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Universal Underwriters Insurance Company
Name of Company

Gabriel Coon - Actuarial Analyst II
Official - Title

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