



GEORGE E. PATAKI
Governor

STATE OF NEW YORK
INSURANCE DEPARTMENT
160 WEST BROADWAY
NEW YORK, NEW YORK 10013-3393

EDWARD J. MUHL
Superintendent of Insurance

Circular Letter No. 17 (1996)
December 9, 1996

TO: ALL INSURERS LICENSED TO WRITE PRIVATE PASSENGER AUTOMOBILE, FIRE, OR FIRE AND EXTENDED COVERAGE INSURANCE POLICIES WHICH ARE SUBJECT TO THE REPORTING REQUIREMENTS OF INSURANCE DEPARTMENT REGULATION NO. 90 (11 NYCRR 218) "PROHIBITION OF GEOGRAPHICAL REDLINING."

RE: REPORTS AND DATA SPECIFICATIONS

The purpose of this Circular Letter is to set forth streamlined and automated standards for the completion of reports filed with this Department in accordance with Section 218.7 of Department Regulation No. 90, entitled "Prohibition of Geographical Redlining in Writing Private Passenger Automobile and Fire or Fire and Extended Coverage Insurance Policies."

The regulation requires insurers to report information relative to private passenger automobile, fire or fire and extended coverage insurance policies, on an annual basis, in a format prescribed by the Superintendent. Section 218.7 requires that insurers maintain records, by US postal ZIP code of their agents and brokers in the State and those agents and brokers whose contracts have been terminated. In addition Section 218.7 requires insurers to maintain records, by US postal ZIP code of ... "all policies subject to this regulation issued, renewed, cancelled (other than for nonpayment of premium) or nonrenewed"...

In order to minimize difficulties and discrepancies in the submission and interpretation of this data, the Department has developed various standard PC based specifications to facilitate data capture using either Lotus 1-2-3 or Microsoft Excel. Only submissions of diskettes will be required. No hardcopy submissions will be necessary. These new format changes are being required for all insurers submitting data on policies written in 1996 and reported on in 1997, under Regulation No. 90.

Additionally, the guidelines for the reporting and maintenance of Regulation 90 data, which were established in 1983 (see Circular Letter No. 8 of 1983), are restated to coincide with the streamlined reporting format as follows:

- A. General Information for Private Passenger Automobile and Personal and Commercial Fire or Fire and Extended Coverage Insurance Policies.
- 1 Figures should include only direct business, not reinsurance.
 - 2 Figures reported to the Department for Cancellations by the Insurer should not include Cancellations for Nonpayment of Premium nor Cancellations Within 60 Days of Issue.

B. Private Passenger Automobile

Assigned Risk business and motorcycle policies should be excluded from the policy count.

C. Personal Lines - Fire or Fire and Extended Coverage

- 1 Figures should reflect only Fire or Fire and Extended Coverage.
- 2 Homeowners' policies should be excluded.

D. Commercial Fire

- 1 Figures should include only Fire or Fire and Extended Coverage.
- 2 Fire portions of SMP or other package policies should be excluded.

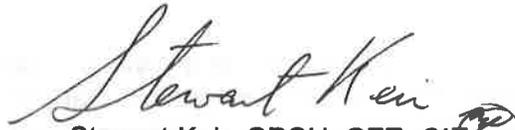
All insurers who expect to report written premiums in New York State for private passenger automobile, or fire, or fire and extended coverage in their 1996 Annual Statement should complete and return the attached order form no later than January 15, 1997 to obtain a reporting package containing the necessary diskettes and instructions.

In addition, this Circular Letter should be acknowledged by all recipients, in writing, no later than January 15, 1997 to:

Mr. Vincent E. Mazarella, Insurance Examiner
Property/Casualty Insurance Bureau
160 West Broadway
New York, NY 10013

Please direct any questions concerning this Circular Letter to Mr. Mazarella (Fax 212-602-8825, Voice 212-602-8738).

Very truly yours,



Stewart Keir, CPCU, CFE, CIE
Assistant Deputy Superintendent and Chief
Property/Casualty Insurance Bureau

REGULATION NO. 90, 11 NYCRR 218
REPORT PACKAGE ORDER FORM

MAIL COMPLETED FORM TO ARRIVE NO LATER THAN JANUARY 15, 1997, TO:

New York State Insurance Department
Market Analysis Regulatory Services Unit
Property/Casualty Insurance Bureau
160 W. Broadway
New York, NY 10013

NOTE: Consolidated group submissions are not permitted. A separate diskette must be submitted for each individual insurer.

Company:

Name: _____

Address: _____

Contact:

Name: _____

Telephone: _____

Fax Number: _____

Please check one of the following diskette formats:

/ / Lotus 1-2-3 WK1 file extension

/ / Lotus 1-2-3 WK3 file extension

/ / Lotus 1-2-3 WK4 file extension

/ / Microsoft Excel XLS file extension

Please check one of the following operating systems:

/ / Windows

/ / DOS