

**NEW YORK STATE DEPARTMENT OF FINANCIAL SERVICES
COMMERCIAL AUTOMOBILE INSURANCE
2016 VOLUNTARY PUBLIC AUTO CLASSIFICATIONS DATA CALL**

INSTRUCTIONS

- 1** The "REPORT.xls" file you will be working with contains various tables for entering the information on Commercial Auto policies and premiums required to complete this Data Call.
- 2** It is strongly recommended that you immediately save the "REPORT.xls" file to your hard drive before inputting any data.
- 3** Please rename the "REPORT.xls" file, by resaving it with the five-digit NAIC number of the reporting insurer. For example, if your NAIC number is 12345, you should save the file as "12345.xls." Please note that if your company is part of a group of companies, there will be a separate survey sent for each individual company. There needs to be a separate submission made for each company; accordingly please make as many separate files as necessary, to report on all the entities in the group.
- 4** After naming the file(s), and before entering any other data, complete the INSURER and CONTACT information section. In the highlighted yellow cells enter the company's name, NAIC and group number, etc. Information should only be entered in the cells highlighted in yellow, all other cells in the file are protected, and no entries may be made into them.
- 5 DO NOT CHANGE THE POSITION OR CONTENT OF ANY CELLS IN THE "REPORT.xls" FILE !!**
- 6** In Section II "Number of Policies issued and Direct Premium Written in NY State for Calendar year 2015", Your Company Name, NAIC and Group # (in line 30) will be filled-in automatically if you have completed "Step 4" above.

Please note: The data being reported should ONLY reflect VOLUNTARY business written, not business written through the New York Automobile Insurance Plan (NYAIP).

- 7** Line 2 "TAXICAB - OTHER THAN MEDALLION", line 15 "PUBLIC AUTO NOT OTHERWISE CLASSIFIED", line 17 "TOTAL VOLUNTARY PUBLIC AUTO", line 19 "SUBTOTAL - ALL PUBLIC AUTO", and line 22 "TOTAL ALL COMMERCIAL AUTO" contain formulas which total the amount from the various lines. These areas are protected and no entries should be made into them. These areas will, initially, display a "0" value, and will automatically total the figures as you fill in information in the appropriate cells.

"Commuter Van" is an auto that:

- (1) carries passengers for hire on a prearranged regular daily basis, over a non-specified or irregular route, between a zone in a residential neighborhood and a location which shall be a work related central location, a mass transit or mass transportation facility, a shopping center, recreation facility, or airport;
- (2) has a seating capacity of at least nine passengers, but not more than twenty passengers;
- (3) is not permitted to accept hails from prospective passengers in the street; and
- (4) must be licensed as a commuter van by the New York City Taxi and Limousine Commission (TLC).

PLEASE NOTE:

A) TAXICAB - MEDALLION (line #1) has separate sub-lines for the classifications "STREET HAIL LIVERY-NYC (Yellow Cabs)" and "STREET HAIL LIVERY - NYC (Green Cabs)"

B) PUBLIC AUTO NOT OTHERWISE CLASSIFIED (line 15) is separated into separate categories for COMMUTER VAN, AMBULETTE (for-profit wheelchair accessible) and OTHER WHEELCHAIR ACCESSIBLE VEHICLE.

- 8 Section III** requests data for the first three quarters of "Calendar Year 2016"; the format is identical to that of Section II.

- 9 Section IV** requests that you enter an "X" in the appropriate spaces to indicate if the company plans to increase, decrease, or leave unchanged their rates or the level of their writings. PLEASE NOTE that there should be a response in each line of the yellow areas for both the "rates" and "writings" questions (total of 44 responses).
- 10** Also attached to this survey is an AFFIRMATION form ("Livery 308_Affirmation.doc"). The name and signature of the Senior Underwriting Officer and the date of the affirmation should be entered in the spaces provided. A separate affirmation form must be submitted for each reporting company. The affirmation form(s) should be scanned and submitted with the report.
- 11** The table below contains the range names which will allow you to print the various parts of your submission, for your records. Use the appropriate range name to select the desired print items, then print as you normally would.

To Print	Hit	Select Range
Section I Insurer/Contact Information	F5 (GoTo)	Info
Section II Calendar year 2015	F5 (GoTo)	SectII
Section III First Three Quarters of Calendar year 2016	F5 (GoTo)	SectIII
Section IV Prospective Rates and Writings for 2017	F5 (GoTo)	SectIV

- 12** Please e-mail your completed report(s), including the completed Excel file, saved using your five-digit NAIC number as discussed in step (3) above, and scanned Affirmation form, to Mr. Fredric Tinkelman at: 308PublicAuto@dfs.ny.gov
Note that the Department does not require a printed copy of the report.

The subject line of the email containing the submissions should contain the Company's name (abbreviated is acceptable), NAIC code, and "Public Auto Classification Report".

- 13** If you experience technical difficulties in using the Report file, please contact Mr. Goren (212-480-5587) or Mr. Tinkelman (212-480-5478) by phone, or by e-mail (at the submission address above).
- 14** If there are difficulties submitting the report by e-mail, you may submit the completed file(s) on a blank CD-R and mail it in a CD mailer to the following address:
- New York State Department of Financial Services
Property Bureau - 6th Floor
1 State Street
New York, NY 10004
Attn: MARS Unit - Public Auto Classifications Survey

Label the CD-R as follows:
NYSDFS - Public Auto Classifications Survey
Company Name
Company NAIC Number
Group Number

- 15 Due Date: 12/16/2016**