

Arbella Insurance Group – BFAIR052015

MASSACHUSETTS 2015
GROUP MARKETING NEW/RENEWAL
AFFIDAVIT

Attached is the documentation required for the application for the listed Arbella Mutual Insurance Company 2015 Group Marketing clients.

We have verified that it is the intention of each of the following clients to participate in the Group Marketing program within their organization for the year 2015 and have confirmed their participation to them in writing:

Berkshire Family & Individual Resources

You may contact any of our clients to verify information and confirm participation.

A handwritten signature in cursive script that reads "Al DeAngelis".

Al DeAngelis
Underwriting Manager

| | | | | | | | |
|--|---|---------------------|------------------|--------------|-----------------|--------------------|--------------------|
| Arbella Insurance Group - BFAIR052015 | | | | | | | |
| 193R Application Spreadsheet | | | | | | | |
| | | | | | | | PROPOSED |
| INSURANCE | | STREET | | | | AUTO (A) or | RATE |
| COMPANY | GROUP NAME | ADDRESS | CITY/TOWN | STATE | ZIP CODE | HOME (H) | DEV. (0.0%) |
| Arbella Mutual Insurance Company | Berkshire Family & Individual Resources | 771 South Church St | North Adams | MA | 01247 | (A) | 5% |

| PROPOSED | GROUP | TOTAL | ELIGIBLE | NUMBER | ORIGINAL | PRODUCER OR | EXPERIENCE | |
|------------------|---------------------|-----------------|-----------------|-------------------|-----------------|---------------------------------|----------------------------|---|
| EFFECTIVE | TYPE | NUMBER | NUMBER | OF CURRENT | PLAN | MARKETING REPRESENTATIVE | SUBMITTED | |
| DATE | (CU, E, M, U | IN GROUP | IN GROUP | INSUREDS | DATE | MARKETING REPRESENTATIVE | CONTACT INFORMATION | |
| DATE | (CU, E, M, U | IN GROUP | IN GROUP | INSUREDS | DATE | MARKETING REPRESENTATIVE | CONTACT INFORMATION | |
| 05/20/2015 | E | 240 | 240 | 0 | 05/20/2015 | Toole Insurance Agency | www.tooleinsurance.com | N |

Arbella Insurance Group - BFAIR052015

EXPENSE EXHIBIT FOR ALL AUTO & HOME 193R GROUP MARKETING RATE DEVIATIONS

Year Plan Will be Applied

2015

Insurers are required to submit the expense ratios underlying their current rates and the expense ratio or average expense per unit associated with the group marketing rate deviation.

| <u>INSURANCE</u> <u>COMPANY</u> | <u>GROUPNAME</u> | (1) Expenses Assumed In Insurer's Rates Currently On File | (2) Expenses Associated With Group Marketing Plan | (3) Reasons for Expensed Difference | (4) Requested Group Rate Deviation |
|------------------------------------|---|--|--|--|---|
| Arbella Mutual Insurance Company | Berkshire Family & Individual Resources | 35.3% | 26.6% | Commission Reduction, Payroll Deduction, More EFT, Smaller rate of cancel/reinstate, Higher Retention and Smaller Claim Volume | 5% |

Arbella Insurance Group - BFAIR052015

PREMIUM /LOSS/EXPENSE EXHIBIT FOR 193R AUTO/HOME GROUPS AT LEAST 3 YEARS OLD WITH 1,000 OR MORE INSURED UNITS

<insert year below>

Year Plan Will be Applied

2015

Insurers are required to submit a minimum three (3) full years of data, but can at their option submit additional years of data by inserting additional columns.

INSURANCE
COMPANY

GROUPNAME

| <u>Earned Premium</u> | | | <u>Incurred Loss Incl. IBNR</u> | | | <u>Incurred Loss Ratio</u> | | | |
|-----------------------|------|------|---------------------------------|------|------|----------------------------|------|------|----------------|
| 2012 | 2013 | 2014 | 2012 | 2013 | 2014 | 2012 | 2013 | 2014 | 3 Yr. Total |