

# NORTH CAROLINA RATE BUREAU

POST OFFICE BOX 176010  
RALEIGH, NORTH CAROLINA 27619-6010

RAYMOND F. EVANS, JR. CPCU  
General Manager

5401 SIX FORKS ROAD  
RALEIGH, NORTH CAROLINA 27609-4435

TELEPHONE (919) 783-9790  
FACSIMILE (919) 783-0355

JERRY G. HAMRICK  
Workers Compensation Manager

F. TIMOTHY LUCAS  
Personal Lines Manager

DAVID E. SINK, JR.  
Accounting Manager

April 15, 2002

## CIRCULAR LETTER TO ALL MEMBER COMPANIES (Home Offices Only)

Re: 2001 North Carolina Premium Writings  
Non-Fleet Private Passenger Cars

Attached hereto is a form for reporting 2001 North Carolina automobile insurance premiums for non-fleet private passenger cars.

The principal purpose of this request is to provide information necessary to reapportion 2001 automobile insurance expenses of the North Carolina Rate Bureau and to provide the basis for apportioning preliminary automobile assessments until such time as 2000 North Carolina non-fleet private passenger automobile premium writings are available for that purpose.

With respect to automobile insurance, the jurisdiction of this Bureau includes coverage for theft of or physical damage to private passenger (non-fleet) motor vehicles as well as liability insurance, automobile medical payments insurance, uninsured motorists coverage, and underinsured motorists coverage for such motor vehicles.

Under the law, a "non-fleet" motor vehicle means a motor vehicle not eligible for classification as a fleet vehicle for the reason that the motor vehicle is:

- a. One of four or fewer motor vehicles owned or hired under a long-term contract by a policy named insured; or
- b. One of five or more four-wheel private passenger autos owned by an individual or owned jointly by two or more individuals resident in the same household if the autos are not used for business use, other than farming or ranching.

A "private passenger motor vehicle" under the insurance laws governing the jurisdiction of this Bureau is:

- a. A four wheel motor vehicle, other than a truck type or van, that is owned or leased under a long-term contract by the policy named insured and that is neither used as a public or livery conveyance for passengers nor rented to others without a driver; or
- b. A motor vehicle that is a pickup truck or van that is owned by an individual or by husband and wife or individuals who are residents of the same household if it:
  1. Has a gross vehicle weight as specified by the manufacturer of less than 10,000 pounds; and
  2. Is not used for the delivery or transportation of goods or materials unless such use is (i) incidental to the insured's business of installing, maintaining, or repairing furnishings or equipment, or (ii) for farming or ranching.

Such vehicles owned by a family farm copartnership or a family farm corporation shall be considered owned by an individual for the purposes of this section; or

- c. A motorcycle, motorized scooter or other similar motorized vehicle not used for commercial purposes.

Please see that the attached form is properly completed, signed by an appropriate official, and returned to this Office **no later than June 3, 2002.**

Very truly yours,

Ellen S. Holloway

Statistical Data Technician

ESH:dp

Enclosures

A-02-H02

NORTH CAROLINA AUTOMOBILE INSURANCE WRITTEN PREMIUMS  
CALENDAR YEAR 2001

<u>Line</u>	Actual Written Premiums				Written Premiums at Manual Rates (e)	
	(1) Total From the Statutory <u>Page 14 Data</u>	(2) Non-Fleet <u>Priv. Pass.</u>	(3) Motor- <u>cycles (c)</u>	(4) <u>All Other (d)</u>	(5) Non-Fleet <u>Priv. Pass.</u>	(6) Motor- <u>cycles (c)</u>
19.2-Private Pass. Auto Liability(b)	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....
19.4-Commercial Auto Liability(b)	.....	.....	.....	.....	.....	.....
21.1-Private Pass. Auto Phys. Dam.	.....	.....	.....	.....	.....	.....
21.2-Commercial. Auto Phys. Dam.	.....	.....	.....	.....	.....	.....
 Totals (f)	 \$.....	 \$.....	 \$.....	 \$.....	 \$.....	 \$.....

Company: \_\_\_\_\_ Date: \_\_\_\_\_

Certified by: \_\_\_\_\_ Title: \_\_\_\_\_

- Notes:
- (a) Report all amounts in dollars (no cents).
  - (b) Including auto medical payments, uninsured motorists, underinsured motorists, and auto death and disability.
  - (c) Motorcycles and similar motorized vehicles not used for commercial purposes.
  - (d) Written premiums other than those included in Columns (2) and (3).
  - (e) Premiums in Columns (2) and (3) respectively, adjusted to reflect standard rates, eliminating the effect of any approved deviation and the effect of rates developed on the consent-to-rate basis. Explain adjustments on the reverse side of this form.
  - (f) The combined totals of Columns (2), (3) and (4) must equal the total of Column (1).
  - (g) Return completed form to North Carolina Rate Bureau, P. O. Box 176010, Raleigh, North Carolina 27619-6010, **no later than June 3, 2002.**

Telephone Number: \_\_\_\_\_

FAX Number: \_\_\_\_\_