



October 28, 2014

Ms. Marilyn Hamilton
Property and Casualty, Personal and Commercial Lines, Director
Texas Department of Insurance
P.O. Box 149104
MC 104-PC
Austin, TX 78714-9104

Reference: Revision to previously approved Notice of Cancellation

Dear Ms. Hamilton:

In accordance with Texas Administrative Code 5.4911, Texas Windstorm Insurance Association (TWIA or the Association) is submitting revisions to its Notice of Cancellation for commissioner approval.

Changes to this form are being made based on the following:

1. As part of TWIA's implementation of a new policy management system, the Association is reviewing all of its correspondence to ensure they are clear, consistent, and customer friendly; and
2. TWIA has identified a specific need to update the Notice of Cancellation, as the existing form has generated confusion regarding policyholders' recourse following receipt of the Notice. TWIA believes the existing language leads to a higher than necessary number of appeals to the Chief Clerk's Office. The Association has proposed changes to simplify the form and direct policyholders to first contact TWIA Underwriting to attempt to resolve issues before contacting TDI.

Attached to this cover letter please find a Property and Casualty Filing Transmittal Form, an explanatory memorandum, the existing Notice of Cancellation form, and the amended Notice.

Should you have questions or require anything further, please feel free to contact me at 512-637-4031.

Sincerely,

A handwritten signature in black ink that reads 'Jennifer Armstrong'. The signature is written in a cursive, flowing style.

Jennifer Armstrong
Director of Compliance & Communications

Texas Windstorm Insurance Association

5700 South MoPac Expressway, Building A, Austin, Texas 78749 • P.O. Box 99090, Austin, Texas 78709-9090
512-637-4031 / Fax 512-505-2198



Texas Department of Insurance

Filing & Operations Division – P&C Intake Unit, Mail Code 104-3B

333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104

512-322-3575 telephone • 512-490-1016 fax • www.tdi.texas.gov

Property and Casualty Filing Transmittal Form

TDI Use Only
TDI Link Number: _____

1. List all companies. Additional sheet attached (if necessary)

Company Name(s)	NAIC No(s).	TDI USE ONLY	
		EID No(s).	TDI File No(s).
Texas Windstorm Insurance Association	30040		

2. Company Group Name Texas Windstorm Insurance Association Group NAIC No. _____
3. Company Filing Number TWIA 2014 10 (NOC)
4. Type of Filing: New Filing Revision/Replacement: TDI File No. or Link No. _____
[If revision/replacement, provide TDI File No. or Link No. that is being revised/replaced. If reference filing, refer to Item 8.]
5. Proposed Effective Date: New 11/27/14 Renewal _____
6. Line of Insurance (Refer to Instructions, Item 6) Property
- 6.a. Dual Filing. The filing will also be used as part of a multi-peril policy.
 TDI File No(s). or Link No(s). of previously approved monoline and multi-peril policy: _____
- 6.b. Interline Filing. List applicable lines of insurance: _____
7. Contact Person Jennifer Armstrong
- Telephone No. (512) 637-4031 Fax No. (512) 505-2198
- Mailing Address P.O. Box 99090 E-Mail Address _____
- City Austin State Texas Zip 78709-9090

TDI may release my e-mail address in response to a public information request Agree Do not agree

8. Description of Filing
- Rate Filing (rates, rating manual, rating rule, supporting information, etc.)
- Initial/No Prior Experience
- Rate Change
- Rates Associated With Forms/Endorsements (endorsement filing # if filed separately _____)
- Credit Scoring Model (filing cannot be combined with any other filing type)
- Underwriting Guidelines (filing cannot be combined with any other filing type)

Policy Form

Endorsement

Manual Rules (other than rating rules)

Reference Filing

Rates: Insurance Company/Advisory Organization Name: _____
TDI File Number or Link Number/Reference Number: _____
Prospective Loss Costs: _____

Policy Forms/Endorsements: Insurance Company/Advisory Organization Name: _____
TDI File Number or Link Number/Reference Number: _____

Manual Rules: Insurance Company/Advisory Organization Name: _____
TDI File Number or Link Number/Reference Number: _____

9. If a similar filing has been made with TDI in the past by your company/group provide company name and TDI File No.(s) or TDI Link No.: _____

10. If a deemer provision applies to the filing, do you waive the deemer application? Yes No



Texas Windstorm
Insurance Association

Jennifer T. Armstrong
Director
Compliance & Communications

MEMORANDUM

DATE: October 28, 2014

TO: Marilyn Hamilton
Texas Department of Insurance

RE: Revision to previously approved Notice of Cancellation

In accordance with Texas Administrative Code 5.9320, TWIA is submitting revisions to the Notice of Cancellation for commissioner approval. This memorandum is submitted pursuant to Texas Administrative Code 5.9320(c)(1)(B)(iii).

Changes to this form are being made based on the following:

1. TWIA is in the process of implementing a new policy administration system. As part of this process, TWIA is reviewing all forms and correspondence utilized by the system. TWIA's review and updates aim to ensure all forms and correspondences are clear, consistent, and customer-friendly.
2. In regards to the Notice of Cancellation in particular, TWIA is aware that the existing form has generated confusion regarding policyholders' recourse following receipt of the Notice. TWIA believes the existing language leads to a higher than necessary number of appeals to TDI. To address these issues, the Association proposes changes to simplify the notice and direct policyholders with questions or concerns to first contact TWIA Underwriting to attempt to resolve issues before contacting TDI.

For the above reasons, the Notice has been revised and reformatted in the following ways:

- TWIA header switched to footer
- Updated letterhead logo and moved from right to left
- Rearranged and renamed data fields
- Added "Dear [Policyholder Name]"
- Added a link to a policyholder experience survey

In addition, the language has been simplified as indicated below. New language is underlined, while deleted language is in brackets with a strikethrough.

"We will cancel your policy on <Effective Date of Cancellation>, 12:01 AM Central Time for the following reason: [You are hereby notified in accordance with the terms and conditions of the policy identified above that this policy will



be terminated on the EFFECTIVE DATE OF CANCELLATION shown hereon, and after that date no further protection will be provided thereunder.]

TWIA will not pay any claims for losses incurred after this date.

If you believe this Notice of Item Cancellation is in error, call TWIA at 1-800-788-8247.

[REASON FOR CANCELLATION: Non-payment of amount due to TWIA.]

~~[If the reason for cancellation states Non-Payment of Premium, then this notice results from the failure of the insured to discharge their obligation in the payment of this policy or any installment thereof, whether payable directly to this company or indirectly under any premium finance plan or extension of credit.]~~

~~[No claim for loss occurring after the effective date of cancellation as shown above will be paid by this Association. The unearned premium will be mailed to the insured or agent or mortgagor or premium financier as appropriate.]~~

~~If you want [Should you desire-] to formally appeal TWIA's [the company's-] decision [on this cancellation], please refer to your policy, Condition 14, Appeals Other Than Claims Disputes [the Dispute Resolution contained in the policy].~~

Any appeal to the Commissioner of Insurance should be mailed to the Texas Department of Insurance, General Counsel, P.O. Box 149104, Austin Texas 78714-9104, Mail Code: 113-2A within 30 days from the date of this notice.

We value your feedback! Tell us about your experience with TWIA by completing our policyholder survey located at <https://www.surveymonkey.com/s/TWIAPolicy>.

Sincerely,

Texas Windstorm Insurance Association

Copy: [Copies mailed to:]"

Pursuant to 5.9320(c)(2)(B)(ii), please find attached a copy of the previously approved TWIA Notice of Cancellation and the filed Notice.

If you have any additional questions or need more information, please feel free to contact me at 512-637-4031 or

Texas Windstorm Insurance Association

5700 South MoPac Expressway, Building A, Austin, Texas 78749
P.O. Box 99090, Austin, Texas 78709-9090
(512) 899- 4900 / Fax (512) 899- 4950



[REDACTED]
[REDACTED]
[REDACTED]

Notice of Cancellation

Named Insured and Address:

[REDACTED]
[REDACTED]
[REDACTED]

Type of Policy: Windstorm & Hail Policy Number: [REDACTED]
Date Notice Mailed: October 24, 2014 Effective Date of Cancellation: November 8, 2014
(12:01 A.M. Standard Time)

You are hereby notified in accordance with the terms and conditions of the policy identified above that this policy will be terminated on the EFFECTIVE DATE OF CANCELLATION shown hereon, and after that date no further protection will be provided thereunder.

REASON FOR CANCELLATION: Non-payment of amount due to TWIA.

If the reason for cancellation states Non-Payment of Premium, then this notice results from the failure of the insured to discharge their obligation in the payment of this policy or any installment thereof, whether payable directly to this company or indirectly under any premium finance plan or extension of credit.

No claim for loss occurring after the effective date of cancellation as shown above will be paid by this Association. The unearned premium will be mailed to the insured or agent or mortgagor or premium financier as appropriate.

Should you desire to appeal the company's decision on this cancellation, please refer to the Dispute Resolution contained in the policy.

Any appeal to the Commissioner of Insurance should be mailed to the Texas Department of Insurance, General Counsel, P.O. Box 149104, Austin Texas 78714-9104, Mail Code: 113-2A within 30 days from the date of this notice.

Copies mailed to: Insured, Insured's Agent

Insured

Texas Windstorm Insurance Association
5700 South MoPac Expressway, Building A, Austin, Texas 78749
P.O. Box 99090, Austin, Texas 78709-9090
512-899-4900 / Fax 512-899-4950



<Policyholder Name(s)>
<Policyholder Mailing Address>

Notice of Cancellation

Date: <Date Notice Mailed>
Policy Number: <Policy Number>
Insured: <Policyholder Name(s)>
Property Location: <Insured Property Address>
Cancellation Date: <Effective Date of Cancellation> 12:01 AM Central Time

Dear <Policyholder Name>,

We will cancel your policy on <Effective Date of Cancellation>, 12:01 AM Central Time for the following reason:

<Activity Description in PolicyCenter>

TWIA will not pay any claims for losses incurred after this date.

If you believe this Notice of Cancellation is in error, call TWIA at 1-800-788-8247.

If you want to formally appeal TWIA's decision, please refer to your policy, Condition 14, Appeals Other Than Claims Disputes. Any appeal to the Commissioner of Insurance should be mailed to the Texas Department of Insurance, General Counsel, P.O. Box 149104, Austin Texas 78714-9104, Mail Code: 113-2A within 30 days from the date of this notice.

We value your feedback! Tell us about your experience with TWIA by completing our policyholder survey located at <https://www.surveymonkey.com/s/TWIAPolicy>.

Sincerely,

Texas Windstorm Insurance Association

Copy: <Primary Carrier, Mortgage Co., Premium Finance Co. as appropriate>

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800-788-8247 / Fax 512-899-4950