



TEXAS DEPARTMENT OF INSURANCE

Regulatory Policy Division - P&C Filings Intake and Open Records (104-3B)
 333 Guadalupe, Austin, Texas 78701 ★ PO Box 149104, Austin, Texas 78714-9104
 (512) 676-6710 | F: (512) 490-1016 | (800) 578-4677 | TDI.texas.gov | @TexasTDI



Property and Casualty Filing Transmittal Form

TDI Use Only
TDI File Number: _____

1. List all companies. Additional sheet attached.

Company Names	NAIC Numbers

2. Company Group Name _____ Group NAIC No. _____

3. Company Filing Number _____

4. Type of Filing: New Filing Revision/Replacement TDI File Number _____
[If revision/replacement, provide TDI File Number that is being revised/replaced. If reference filing, refer to Item 9.]

5. Proposed Effective Date: New _____ Renewal _____

6. Line of Insurance (Refer to Instructions, Item 6) _____

6.a. Dual Filing. The filing will also be used as part of a multi-peril policy.
 TDI File Numbers of previously approved monoline and multi-peril policy: _____

6.b. Interline Filing. List applicable lines of insurance: _____

7. Contact Person _____

Telephone No. _____ Fax No. _____

Mailing Address _____

City _____ State _____ Zip _____

E-Mail Address _____

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

Does this filing contain any personally identifiable information (PII)? Yes No

8. Description of Filing (Check only one filing type.)

- Rate/Rule Filing (RT/RU)**
 - Initial/No Prior Experience
 - Rate Change
 - Rates Associated with Forms/Endorsements (endorsement filing # if filed separately _____)

Credit Scoring Model (CS)

- Underwriting Guidelines (UG)**
- Policy Form (PF)**
- Endorsement (EN)**

9. Reference Filing

Rates/Rules (RT/RU): Insurance Company/Advisory Organization Name: _____
 TDI File Number /Reference Number: _____
 Prospective Loss Costs: _____

Policy Forms (PF) /Endorsements (EN): Insurance Company/Advisory Organization Name: _____
 TDI File Number /Reference Number: _____

Rates (RT): Insurance Company/Advisory Organization Name: _____
 TDI File Number /Reference Number: _____
 Prospective Loss Costs: _____

Manual Rules (MR): Insurance Company/Advisory Organization Name: _____
 TDI File Number /Reference Number: _____

10. If similar filings have been made with TDI in the past by your company/group, provide company name and TDI File Numbers:

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