

January 20, 1988

SUBJECT: INSURANCE

WITHDRAWN

Circular Letter No. 4 (1988)

TO: CHIEF UNDERWRITING OFFICER

OF: ALL AUTHORIZED PROPERTY/CASUALTY INSURERS IN NEW YORK STATE

RE: INSURANCE SURVEY ON NEW YORK STATE PUBLIC HOUSING AUTHORITIES

In order to ascertain changing insurance availability and costs for public housing authorities in New York state, the Insurance Department is conducting a special survey of all property/casualty insurers that write insurance for' this market. In view of the plight of the homeless and other housing problems facing the nation, public housing authorities, and meaningful insurance coverage for their activities, are crucial.

Accordingly, please complete the attached questionnaire for each state or federal public housing authority that 'your company insures in New York State. It is essential that it be completed and returned to the Department no later than February 8, 1988. Please direct any questions and your reply, together with the name and telephone number of the person responsible for your company's response, to:

Mr. Anthony DiPaola (212-602-0380)

Principal Insurance Examiner

Property & Casualty Insurance Bureau

New York State Insurance Department

New York, New York 10013

Your reply should also indicate the total numbers of public housing authorities in this State currently insured by your company, compared with the preceding two year period.

Very truly yours,

[SIGNATURE]

JAMES P. CORCORAN

SUPERINTENDENT OF INSURANCE

INSURANCE SURVEY ON NYS PUBLIC HOUSING AUTHORITIES

(To be filled out for each Insured)

Name of Insurance Company:

Name of Public Housing Authority:

PHA Address: Total Units:

Total Yrs. Insured:

Current	Year	2 Yrs.
Policy	Before	Before

(If Renewal Situation)

Property Coverages

Effective Date:

Property Value:

Deductible:

Annual Premium:

Liability (Other than Auto) Coverages

Effective Date:

Primary Limits:

Deductible:

Rate (Cost per Unit):

Other Exposure Base:

Total Prim. Premium:

Auto Liability Coverages

Effective Date:

Primary Limits:

Deductible:

Rate (Cost per Unit):

Other Exposure Base:

Total Prim. Premium:

Excess [] or Umbrella [] Coverages

Effective Date:

Liability Limits:

Rate (Cost per Unit):

Other Exposure Base:

Total Ex/Um Premium: