

Department of Consumer & Business Services
Oregon Division of Financial Regulation – 5
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STANDARDS FOR MOTOR VEHICLE APPLICATION FILING

This checklist (product standards) has been provided as an aid to assist you in preparing your filing. Please complete this checklist and attach it to the Supporting Documentation tab where indicated. ORS 731.296, OAR 836-010-0011 (2) & (3).

This checklist includes relevant statutes, rules, bulletins, and other documented positions to enforce ORS 731.016. **The standards are summaries, and review of the entire statute or rule may be necessary.** After diligent consideration has been given to each item, mark “Yes” or the “N/A” box, or provide the page and paragraph where the information may be found. “Not applicable” may only be used if the item does not apply to the coverage being filed. Any line left blank may result in the delay or disapproval of the filing.

Changes have been made to the UM/UIM Selection Form area in response to SB 411 which is effective January 1, 2016.

TOI (type of insurance): 19.0 Personal Auto 20.0 Commercial Auto

Instructions: By each statement, check the box to verify compliance.

Review Requirement	Reference	Description of Review Standards Requirements	Check Answers
GENERAL REQUIREMENTS			
Requirements	OAR 836-010-0011 As required on SERFF or our website	<p>Filing requirements are located on SERFF or on our website at: http://dfr.oregon.gov/rates-forms/Pages/index.aspx.</p> <p>The correct information must be attached to the appropriate schedule items in order for your filing to be considered complete.</p> <p>The clean copy of the submitted form must be attached under the Form Schedule tab. Each form filed for approval must be attached to a separate Schedule Item under this tab. The form number should appear exactly as shown on the PDF document. Any edition/revision date used in the form number must be included under the Form Number column. It is not necessary to use the Edition Date column. However, if you prefer to use the Edition Date column, please do not include the edition date in the Form Number column.</p>	

Review Requirement	Reference	Description of Review Standards Requirements	Check Answers
Requirements, continued	OAR 836-010-0011 As required on SERFF or our website	The Form Type column and the Action Specific Data column must be completed correctly by providing the Oregon assigned filing number of the previous filing, and the correct form number with the edition date of the form being replaced. If a form will be used with multiple programs or products, provide an explanation of the different programs under the General Filing Description in SERFF, or in a cover letter. <ol style="list-style-type: none"> 1. A complete explanation of the purpose of the filing is provided under the General Information tab, or via a Cover letter or Filing Memorandum attached under the Supporting Documentation tab. 2. A third party filers' letter of authorization is attached if applicable. 3. The signed Certificate of Compliance, form 440-3894 is attached to the Supporting Documentation tab. 4. A comparison document (annotated, highlighted, red-lined, or side-by-side) has been provided for each previously approved form. Attach the document/s under the Supporting Documentation tab. 5. The applications and application supplements being filed for approval are attached to the Form Schedule tab. 	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Requirements		Filing new application. Replacing previously approved application form.	Yes <input type="checkbox"/> Yes <input type="checkbox"/>
Discrimination	ORS 106.300 thru ORS 106.340, Bulletin 2008-2, OAR 836-081-0010	When requesting information on a "spouse", the references must also include a domestic partner as defined by Oregon laws.	Yes <input type="checkbox"/>
	ORS 746.015, OAR 836-081-0010(1)(m)	A motor vehicle insurance applicant may not be denied coverage solely due to the absence of insurance unless the lack is in violation of law.	Yes <input type="checkbox"/>
Requirements	ORS 746.620, ORS 746.630	Privacy - Disclosure authorization is provided on the application and includes the duration of validity. If authorization and disclosures are secured on another form, state in the cover letter how they are provided.	Yes <input type="checkbox"/>
FORMS			
Requirements	ORS 742.458(1), Bulletin INS 2010-3	The application is filed for approval as part of the entire contract as required under ORS 742.003(1) and does not conflict with laws relating to the coverage. If fraud language is included in the policy, a fraud warning must be included in the application.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Cancellation	ORS 742.562, ORS 742.564	Cancellation - The application does not state coverage will be considered "null and void." It may state the coverage may be canceled or a claim may be denied.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

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Credit Report Scoring	ORS 746.661, OAR 836-080-0425 thru OAR 836-080-0440	Credit Scoring for Personal Lines -Credit history may be used as a factor in underwriting and rating new business. The Use of Personal Information Disclosure portion of a personal lines application may indicate that credit will be checked for new business. Once an account has been underwritten and rated that score may not be reviewed or changed unless the policyholder requests it. The renewal score may only be changed if it results in a lower rate/premium.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Requirements	ORS 746.265(2)(a)	Conviction for Violations – The application asks for convictions of violations and not just violations_The application should not use non-specific terminology, such as; tickets, citations, occurrences, incidents, etc.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 746.260, ORS 746.265(3)	Personal Auto Driving Record - The application does not ask for convictions or accidents beyond three years immediately preceding the application for new or renewal coverage unless the question is specifically asked to provide a discount. The application should not use non-specific terminology, such as; tickets, citations, occurrences, incidents, etc.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 742.260(2), ORS 802.200(9)	Commercial Auto/Garage Driving Record - The insurer may ask for information regarding accidents and convictions for violations as outlined in ORS 802.200 (9). The application should not use non-specific terminology, such as; tickets, citations, occurrences, incidents, etc.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 746.265(2)(c)	Non-driving Offense Prohibited – The application does not ask for records of violations or driver-license suspensions that are non-driving offenses.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Requirements Not Part of a Listed Category	ORS 742.005, ORS 746.015	In order to use “have you ever” questions, the insurer needs to show a clear connection or link between the information being requested and the risk being assumed. The information requested must be material to the acceptance of the risk. Any federal or state statutory limitations on how far back an insurer may require information should be considered when crafting these questions. A reasonable explanation as to why the question is being asked is acceptable.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Exclusions	ORS 742.450(6), OAR 836-058-0010, OAR 836-085-0115	Named Drivers Exclusion –A named insured cannot be an excluded driver. Any excluded driver must be named on an approved Named Driver Exclusion endorsement that is signed by all named insureds on the policy. The driver exclusion may NOT apply to uninsured motorist, underinsured motorist, or automobile personal injury protection.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>

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Fraud	ORS 742.458(3), Bulletin INS 2010-3	<p>Fraud warning - If the policy has fraud, concealment, misrepresentation language, then the application is required to include a fraud warning. If one is included, it is general in nature and does not state that the applicant is “guilty” of fraud, but that he or she “may be” guilty of fraud. Fraud or misstatement warnings that mention criminal or civil penalties must avoid definite statements of the criminal nature of an act, guilt, or possible penalties. A warning that specifies that knowingly providing false information “may be” a crime, which “may be” grounds for criminal or civil penalties is appropriate.</p> <p>A fraud or misstatement warning cannot mention voiding or rescission of a policy as possible consequences of an omission, concealment, misstatement or misrepresentation. Insurers should review Bulletin INS 2010-3 and the Insurance Code to determine whether their statements comply.</p> <p>A bound application is the equivalent to a policy.</p>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Uninsured/ underinsured motorists	ORS 742.502(2)(b)(c), OAR 836-054-0000	<p>Statement Electing Lower Limits - The company meets one of the following to satisfy the approval requirement:</p> <p>A Selection Form effective Prior to 1/1/2016 may use the existing Exhibit 1. A Selection Form effective 1/1/2016 or later will use Exhibit 1 (9.2015) which is also posted on the DCBS, Rates and Forms website.</p> <p>Approval option 1 – Use the selection Exhibit provided for OAR 836-054-0000 as found on the DCBS, Rates and Forms website.</p> <p>Approval option 2 - The statement used is in substantial compliance and includes the following:</p> <ul style="list-style-type: none"> (a) An acknowledgment by the named insured that the named insured was offered uninsured-motorist coverage with limits equal to those for bodily injury liability. (b) A brief summary, not part of the insurance contract, of uninsured- and underinsured-motorist coverages. (c) A statement of the price for coverage per insured vehicle, with limits equal to the named insured’s bodily injury-liability limits and the price for coverage per insured vehicle with the lower limits requested by the named insured. <p>(continued on next page)</p>	Yes <input type="checkbox"/> N/A <input type="checkbox"/> Choose one below <input type="checkbox"/> <input type="checkbox"/>

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Uninsured/ underinsured motorists, continued	ORS 742.502(2)(b)(c), OAR 836-054-0000	<p>(continued from previous page)</p> <p>(d) A notice to the effect that the statement shall remain in force until rescinded in writing by a named insured or until such time as motor-vehicle-bodily injury-liability limits are changed.</p> <p>(e) Signed, dated, and submitted within 60 days from the time insured elects lower limits.</p> <p>Approval option 3 - The statement is included in this filing for prior approval, or has been previously approved and complies with ORS 742.502 (2)(b)</p>	<input type="checkbox"/>
Warranties	ORS 742.013	All statements and descriptions in the application made by or on behalf of the insured are representations and not warranties. Misrepresentations do not prevent coverage unless fraudulent or material to the acceptance of the risk.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>