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Actuarial Services Division
DataCall@ncdoi.gov

Subject: N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data
Written Period: Jan 1, 2025 - Dec 31, 2025
Due Date: April 10, 2026

According to North Carolina General Statutes §58-36-30(b2), the Commissioner shall annually collect consent-to-rate data from insurers who are members of the NC Rate Bureau, and have written homeowners policies under the Rate Bureau jurisdiction in North Carolina for residential real property with not more than four housing units.

Only companies that have data to report on Homeowners Forms HO2, HO3, HO5, HO7, or HO8 must complete this Data Call.

All individual company data in this data call will be considered proprietary and confidential; only the aggregate data will be published annually and posted on the Department of Insurance Website.

General Instructions:

1. Save this excel file into your local drive and replace "XXXXX" in this file name by the five-digit NAIC code of your company.
2. Input the information and the data only in the green highlighted areas.
3. Save this excel file after completing inputting.
4. Email the completed excel file to us via the email address DataCall@ncdoi.gov with the subject "XXXXX-2025_NC_CTR_58-36-30(b2)". Replace "XXXXX" with your company's 5 digit NAIC code.
5. If company does not write any homeowners policy: do nothing.
6. If company writes any homeowners policy on forms HO2, HO3, HO5, HO7, or HO8:
 - a. has no CTR policies: please complete Verification Form and 58-36-30(b2)_HO-Owners, columns (1), (2) and (9); save the excel file, then email it to us; **OR**
 - b. has CTR policies: please complete Verification Form and 58-36-30(b2)_HO-Owners, columns (1) through (5) and (9); save the excel file, then email it to us.

Specific Instructions to Complete the Verification Form

1. Input your company's 5-digit NAIC code (in blue), then the most recent contact info will generate.
2. When information is not available, the cells appears as blank; or, when the information needs to be updated, just type in the required info in the green highlighted areas.
3. It is required that the Contact Person and the Officer / Director / Manager sign the Form by typing the names of the Contact and the Officer as signatures in the Form.

Specific Instructions to Input Data in Worksheet 58-36-30(b2) HO-Owners

1. Input whole numbers only without any comma or decimal point.
2. Details of columns:
 - (1) Total # Policies Written: Total number of all policies that are written in the written period in the territory.
 - (2) Total Actual Premium Written: Sum of actual premiums of all policies that are written in the written period.
 - (3) Total # CTR Policies Written: Number of CTR policies that are written in the written period.
 - (4) Total Manual Premium of CTR Policies: Sum of NCRB manual premiums of CTR policies including all applicable/related factors and endorsements.
 - (5) Total Consented Premium of CTR Policies: Sum of actual premiums (manual premiums plus consented amounts above the manual premiums) that company charges CTR policyholders, including all applicable/related factors and endorsements.
 - (9) Company's 2025 Annual Statement, Statutory Page 14, Line 4, Homeowners multiple peril, Direct premiums written.

If you have any question or concern, please email to DataCall@ncdoi.gov

We greatly appreciate your cooperation in this matter.

NORTH CAROLINA DEPARTMENT OF INSURANCE

N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data

Written Period: Jan 1, 2025 - Dec 31, 2025

Due Date: April 10, 2026

Verification Form

In complying with the North Carolina General Statute §58-36-30(b2), the company acknowledges that the information and data provided in this Data Call are true and accurate to the best of the knowledge of the Contact Person and the Company Officer, Director, or Manager whose signatures appear below.

Company NAIC Code (5 digits): **99999**

Company Name: **ALL COMPANIES**

Address (line 1):

Address (line 2):

City:

State (abbreviation, 2 letters):

Zip Code:

Contact Person:

First Name M.I. Last Name

Phone Number (123-456-7890): Ext.

Email Address:

By typing my name, I indicate my consent to use an electronic signature, that acts as a traditional handwritten signature and I agree to all the terms of this Verification Form.

Contact Person's signature

Officer / Director / Manager:

First Name M.I. Last Name

Phone Number (123-456-7890): Ext.

Email Address:

By typing my name, I indicate my consent to use an electronic signature, that acts as a traditional handwritten signature and I agree to all the terms of this Verification Form.

Officer, Director, or Manager's signature

North Carolina Insurance Department
 N.C.G.S. §58-36-30(b2) - Consent-to-Rate Data
 Subject: Consent-to-Rate (CTR) Policies - Residential Property (Not More Than 4 Housing Units)
 Due Date: April 10, 2026

Company Name: ALL COMPANIES
 Company NAIC Code: 99999
 Written Period: Jan 1, 2025 - Dec 31, 2025

Owners Forms (HO2, HO3, HO5, HO7, or HO8)

Territory	(1)	(2)	(3)	(4)	(5)	(6) = (3) / (1)	(7) = (5) / (2)	(8) = [(5)-(4)] / (3)
	Total Policies		Total CTR Policies		% of CTR Policies of Total Policies		Avg Premium Difference per CTR Policy	
	# Policies Written	Actual Written Premium	# CTR Policies Written	Manual Premium	Consented Premium	% # CTR Policies		% CTR Policy Premium
110	11,132	38,718,090	5,882	26,107,676	30,382,743	52.8%	78.5%	727
120	18,765	56,353,936	10,347	39,086,849	45,339,432	55.1%	80.5%	604
130	13,432	25,266,597	4,142	8,107,273	11,050,686	30.8%	43.7%	711
140	100,564	179,520,790	32,436	70,121,022	89,735,519	32.3%	50.0%	605
150	50,939	80,690,253	16,972	25,754,175	37,315,452	33.3%	46.2%	681
160	54,270	83,439,181	19,064	27,988,785	38,247,937	35.1%	45.8%	538
170	4,930	9,648,165	3,579	5,104,732	7,472,717	72.6%	77.5%	662
180	60,433	131,283,578	37,858	63,387,525	91,992,541	62.6%	70.1%	756
190	14,892	34,697,986	9,504	17,241,823	24,036,450	63.8%	69.3%	715
200	7,043	17,514,702	4,487	8,797,205	12,116,616	63.7%	69.2%	740
210	23,429	42,970,355	14,141	20,258,377	29,388,613	60.4%	68.4%	646
220	69,172	164,962,201	46,468	81,615,287	127,089,412	67.2%	77.0%	979
230	17,325	37,278,447	10,778	17,924,937	25,217,353	62.2%	67.6%	677
240	112,505	216,975,342	65,653	98,820,754	147,003,042	58.4%	67.8%	734
250	48,468	100,886,779	28,928	47,538,885	72,157,819	59.7%	71.5%	851
260	33,725	59,363,137	23,664	29,882,276	45,091,954	70.2%	76.0%	643
270	347,934	764,787,008	226,380	375,884,161	567,089,099	65.1%	74.1%	845
280	54,810	118,532,245	35,537	57,229,355	86,536,694	64.8%	73.0%	825
290	43,905	92,155,171	28,566	45,556,114	68,506,390	65.1%	74.3%	803
300	16,156	30,545,944	10,336	14,924,158	21,451,097	64.0%	70.2%	631
310	304,583	518,250,018	209,234	261,446,769	393,036,692	68.7%	75.8%	629
320	164,862	282,916,480	100,957	135,004,852	199,103,853	61.2%	70.4%	635
330	8,312	12,392,125	5,971	6,720,468	9,507,718	71.8%	76.7%	467
340	376,095	795,345,108	261,704	395,312,074	614,761,313	69.6%	77.3%	839
350	119,912	203,459,170	77,832	99,554,279	149,143,377	64.9%	73.3%	637
360	233,711	403,094,679	159,138	204,724,128	299,522,564	68.1%	74.3%	596
370	12,711	25,375,730	8,718	13,292,863	18,542,969	68.6%	73.1%	602
380	42,545	76,831,783	29,355	40,650,819	57,923,037	69.0%	75.4%	588
390	47,983	90,376,133	31,294	46,679,287	65,453,117	65.2%	72.4%	600
Statewide	2,414,544	4,693,631,135	1,518,921	2,284,716,908	3,384,216,205	62.9%	72.1%	724

(9) Annual Statement, Statutory Page 14, Line 4, Homeowners multiple peril, Direct premiums written:

4,949,851,183

(10): Statewide(2) - (9)

-256,220,048

(11): (10) / (9)

-5%