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1	Merritt David Farren (SBN 119721)			
2	26565 West Agoura Rd Suite 200			
3	Calabasas, CA 91302 (818) 474-4610			
4	merritt.farren@farrenLLP.com			
5				
6	Petitioner			
7				
8	BEFORE THE INSURANCE COMMISSIONER OF			
9	THE STATE OF CALIFORNIA			
10				
11	In the Matter Cal. Day A. 11.			
12	In the Matter of the Rate Application of State			
13	Farm General Insurance Company, Applicant.	MERRITT DAVID FARREN'S PETITION TO PARTICIPATE AND		
14 15		NOTICE OF INTENT TO SEEK COMPENSATION		
16)	[Ins. Code §§ 1861.05 and 1861.10; Cal. Code Regs, tit. 10, §§ 2653.1, 2661.2		
17)	and 2661.3]		
18)			
19				
20				
21	The Patitioner Marritt David Former have			
22		eby requests that he be granted leave to participate in		
23	the above-captioned proceeding (the "Proceeding			
24	Code) Section 1861.10, which states that "[a]ny person may initiate or intervene in any proceeding			
25	permitted or established pursuant to this chapter, challenge any action of the commissioner under thi			
26	article, and enforce any provision of this article"			
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28		Ī		
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Merritt David Farren Petition to Participate and Notice of Intent to Seek Compensation

The Petitioner, a longtime California resident and attorney, who previously served as the General Counsel of the Disneyland Resort, has deep expertise relevant to the Proceedings, including expertise in claims administration and legal matters relevant to the proceedings. Petitioner lost his family home in the Palisades fire that started on January 7, 2025 and represents the interests of consumers, including consumers who were insured by State Farm who lost their homes in the Palisades fire and in the Altadena fire that stated on the same date.

Among the many things the Palisades and Eaton Fires have done is put in stark relief one thing highly relevant to the Proceedings: all insurance companies do not conduct themselves the same way in handling claims and, accordingly, the insurance coverage they provide their insureds under the insurance policies they offer is not the same. (see Podcast: Three Homeless Guys, Episode 22, May 2, 2025 – State Farm – Like a Good Neighbor...If Your Neighbor Was a Sociopath. With Joy Chen of the Eaton Fire Survivors Network, Joy Chen: "[W[e started seeing that whether people were recovering or not, whether they were recovering or whether their trauma was only growing, depended hugely on which insurance carrier they had." "My family just moved back into our house last weekend because we're with USAA. But then other families were sinking into greater and greater despair, financial desperation when they're with other insurance carriers. And State Farm seemed to be just the worst of the worst.")¹

That being the case, it is also the case that the insurance policies they offer are not the same, even if the contractual terms of those policies are virtually identical, and, most crucially for purposes of the Proceedings, the value of the insurance policies offered by some companies differs widely

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from that offered by other companies. That value must be considered in any rate approval requested of the Commissioner and, in the Proceedings, the value of the insurance policies offered by State Farm must be investigated and understood in order to fully and properly understand whether State Farm's request to raise insurance rates in the Proceedings is appropriate and whether, if approved, the rates that State Farm will be charging will comply with the provisions of Insurance Code section 1861.05(a)'s requirement that "No rate shall be approved or remain in effect which is excessive, inadequate, unfairly discriminatory or otherwise in violation of this chapter." It is a fundamental fact of nature, and, accordingly, a matter of law, that it is impossible to determine the value of any product, insurance policies included, without understanding the nature of the benefits the purchaser of the product will receive when purchasing the product.

Yet, the current Proceedings do not properly consider the nature of the experience consumers receive from State Farm when making claims under insurance policies offered by State Farm. The Proceedings therefore fail to consider a fundamental matter they must consider in order to comply with California law.

In failing to consider the nature of the experience consumers receive from State Farm when making claims under insurance policies offered by State Farm, the Commissioner wrongly treats all insurance products offered by all insurance companies as the same, when that is simply not the case.

It is Petitioners belief that (i) the actual experience insureds receive when making claims must, as a matter of California law, be considered in order for there to be a proper understanding of

See LA Times Today: 'They're being so stingy with everything.' State Farm criticized for claims response, Los

the value of insurance policies issued in any insurance rate approval proceedings, (ii) that the current proceedings fail to adequately and properly consider the actual experience State Farm's insureds receive when making claims and that, therefore, (iii) unless the current proceedings are changed to adequately and properly consider the actual experience State Farm's insured receive when making claims, any approval the Commissioner may grant at the end of the Proceedings cannot be valid, as a matter of law, under the provisions of Insurance Code section 1861.05(a).

Petitioner seeks to intervene in the Proceedings to assist the Commissioner in correcting this fundamental flaw and to establish procedures that would assist State Farm and other insurers to clearly articulate for consumers the key features and attributes of the coverage they provide under the insurance policies they offer. Petitioner's years of experience handling legal matters at The Walt Disney Company and at Amazon related to consumer rights, consumer disclosures and consumer consent, including proper disclosure to consumers of product terms adequate to allow consumers to assess product value as necessary to achieve consent to key terms of sale. Petitioners experience overseeing the guest claims operation at the Disneyland Resort when he served as the General Counsel of the Disneyland Resort also provides him the right kind of experience and expertise to effectively participate in the Proceedings on behalf of consumers.

Of note, Petitioner's own experience in pursuing insurance claims following his loss in the Palisades fire sits entirely apart from and has nothing to do with Petitioner's request to participate in the Proceedings. Nor does Petitioner come to the proceedings with any animus toward State Farm or any other insurance company doing business or attempting to do business in California. The widely

Angeles Times, March 21, 2025 and Some Insurers Pledge to Ease Burden on L.A. Fire Victims, but Others

reported claims of insurance companies that California law and regulations stifle insurance companies in their ability to offer appropriate coverage to consumers may well be justified.

Petitioner requests to participate only to address the shortcomings in the Commissioner's process for considering State Farm's rate increase articulated herein. Petitioner's goal is to ensure that that process is improved in a way that will allow it to be fair to both consumers and to State Farm.

Petitioner is motivated to facilitate that improvement because it is abundantly clear to Petitioner that, for the thousands who have been so traumatized by the Palisades and Eaton fires, a key to healing will be an understanding that, out of the tragedy, positive change can and will come.

I. THE PROCEEDING

Petitioner seeks to intervene in the Proceedings because the procedure currently being followed by the California Commissioner of Insurance to consider State Farm's request for emergency interim rate approvals on insurance policies referenced above is fundamentally flawed and, unless changed, cannot, if State Farm's request is approved, result in rates that comply with the provisions of Insurance Code section 1861.05(a)'s requirement that "No rate shall be approved or remain in effect which is excessive, inadequate, unfairly discriminatory or otherwise in violation of this chapter."

Residents who suffered losses in the Eaton and Palisades fires have, after emerging from the immediate shock caused by the fires, come to see that the degree to which they are supported financially in getting their lives back together – the degree to which they have sufficient financial

Say No, New York Times, March 6, 2025

resources, quickly and as needed, to get their lives back together – varies widely depending upon the insurance company from which they had opted to purchase insurance before the fires.

Those who suffered losses in the Eaton and Palisades fires who had opted, for instance, to purchase insurance products offered by the companies Pure and Chubb have, according to reports Petitioner has received, fared very well. They have found that their coverage limits, which their insurance companies helped them establish, were high enough to cover interim housing and to cover anticipated costs of rebuilding their home and replacing lost personal items, they have received payments rapidly, either in full, no questions asked, up to policy limits, or as advances close to coverage limits with little requirement for exhausting and time consuming itemization of losses, they have received rapid and respectful responses to their inquiries and have received, from their insurance adjusters, quick help to accurately estimate the real cost reconstruction of their homes is likely to cost, with fair and reasonable reconstruction estimate ranges being used by their insurance companies and proposed by their insurance companies.

On the other hand, those who suffered losses in the Eaton and Palisades fires who had opted to purchase insurance products offered by State Farm and some other insurance providers have, with limited exceptions, suffered a very different post-fire experience. They have found, with little exception, according to information provided by State Farm insureds to Petitioner, and as widely covered in the media, that the post catastrophe coverage State Farm provides is strikingly different than and strikingly inferior to that provided by Pure, Chubb and some other insurance providers. Of note, and of direct relevance to Petitioner's motivation to participate in the Proceedings, this fact came as a complete surprise to most, if not all, State Farm insureds who suffered losses in the Eaton

and Palisades fires. From that surprise, it would appear that State Farm utterly failed, at any time ahead of the fires, to provide consumers any advance warning of the actual treatment, poor in the eyes of most insureds, they would receive from State Farm on both a relative and absolute basis.

How is the nature of this treatment, judged poor by so many State Farm insureds, relevant to the procedure currently being followed in the Proceedings of the California Commissioner of Insurance to consider State Farm's requested rate approvals? It is relevant because the nature of the policies, practices and procedures that State Farm uses to determine how to handle claims made under the policies it is requesting rate hikes with respect to in the event a claim for losses due to wildfire damage determines both (i) the value of the insurance consumers receive in purchasing State Fram insurance and (ii) the costs State Farm will bear with respect to current and future claims related to wildfire losses, on both an absolute basis, and as compared to the costs other insurance companies bear in handling claims made under the insurance they sell and for which they receive rate approvals from the Commissioner – both matters of utmost importance to the Proceedings. The second of these is crucial to understanding and properly projecting costs State Farm will incur on a go forward basis related wildfire loss claims.

Why do these things matter? Because the widely reported and well documented dissatisfaction of State Farm insureds who have suffered losses in the Palisades and Eaton fires with the assistance they have received from State Farm post-fire (see e.g., Los Angeles Times, Eaton Fire Victims Call for Investigation into State Farm for Delays, Violations, April 17, 2025; and New York Times, Some Insurers Pledge to Ease Burden on L.A. Fire Victims, but Others Say No, March 6, 2025) strongly suggests that, when these things are fully and properly understood, the insurance

offered by State Farm will be shown to be poor, in terms of the benefits consumers actually receive, de facto, in the event of a loss by wildfire, and will be shown to be materially inferior as compared to that offered by some other insurance carriers. This deficiency, on an absolute and comparative basis, is highly relevant to, and indeed crucial to, the proper consideration of the fair and appropriate price for the insurance State Farm offers, as nothing can be more relevant, when considering the appropriate price for any product, then the quality of the product itself, and the post-purchase service purchasers will enjoy, on both an absolute and comparative basis.

It is incontestable that for many of those who suffered losses in the Palisades and Eaton fires who were insured by State Farm, the shock and grief of losing their homes has been equaled, if not surpassed, by the shock and grief caused by the experience they have had in pursing their claims with State Farm. This is in marked contrast to the treatment they have seen many of their friends and neighbors, who also suffered losses in the same fires, but were insured by other insurance carriers, receive as they have pursued claims with their insurance carriers. What sorts of things are State Farm's insured experiencing that go directly to the nature and quality of the insurance offered by State Farm, and the appropriate price for it?

- Insurance liability limits established with State Farm's guidance, and generally in amounts
 proposed by State Farm itself, that are well below where they need to be to cover the cost of
 recovery and reconstruction.
- State Farm's limited payout of 50% of liability limits for personal property (increased only recently to 65%) without detailed itemization, when other insurers readily and quickly paid out 100%.

- Rebuild cost "estimates" from State Farm at patently unrealistic amounts, as low as \$275 a
 square foot, in a market where the range will realistically be at least two to three times that
 and higher.
- Delays in payment and delays in each step of the claims processes that would appear to have been intentionally designed to frustrate and exhaust insureds, and ultimately to cause insureds to give up ahead of receiving all monies they are contractually entitled to under the policies they paid for.

In short, the "like a good neighbor" treatment most have received, defacto, under their State Farm policies, in their time of great need, bears, in the opinion of most, if not all of State Farm's insureds who suffered losses in the Palisades and Eaton fires, no resemblance to any treatment that a good neighbor would actually provide to anyone in a time of need.

To be clear, the facts do not suggest one or two or even a handful of instances of poor treatment on an individual basis, which might be ascribed simply to the incompetence or poor comportment of a few adjusters and estimators. No, the widespread frustration we are seeing suggests that State Farm's wildfire claims policies, set from the highest levels at State Farm, are the cause of the frustration. They define the insurance product State Farm is selling and define the treatment State Farm's insured receive in making claims and must be investigated and understood as part of the Proceedings.

What's more, the negative impact of State Farm's wildfire claims policies is not falling just on State Farm's insureds who lost homes in the Palisades and Eaton fires, it is falling on the entire

communities devastated by those fires. For these devastated communities, State Farm's wildfire claims policies are having a very real and negative effect, as they slow and inhibit recovery. The cost to these communities in terms of economic activity and value creation is certainly in the tens of millions per day, if not much higher and the cumulative effect, if not corrected promptly, cold easily run into the many billions. Looking simply at lost rental value and assuming an average rental value of \$15,000 a month for 10,000 homes lost, the monthly loss in rental value alone totals \$150 million per month. That means that for every month that State Farm's poor support of its insureds delays the full rebuild of the Palisades and Eaton communities those communities could be losing \$150 million in rental value alone per 10,000 homes lost.

As such, State Farm's wildfire claims policies raise, in addition to questions essential to the rate hike proceedings at issue, fundamentally important public policy questions for the State of California, as insurance that properly protects insureds is of the utmost importance to supporting the wellbeing of California communities and all who reside in them and engage in business in them.

Importantly, neither the nature of State Farm's wildfire claims policies nor the defacto treatment purchasers of State Farm's insurance products can expect to receive if they make a claim are articulated by State Farm for the consumer in a way that the ordinary consumer can understand, if they are articulated at all. They are not clearly or adequately explained to the consumer before the consumer first acquires insurance from State Farm and are not clearly or adequately explained at the time of policy renewal. The very shock so many State Farm insureds who lost homes in the recent fires are experiencing at the challenges they are facing in recovering from State Farm makes that abundantly clear. Certainly, State Farm's policies are not made at all clear by the written terms of the

insurance policies State Farm insists insureds accept and refuses to negotiate. Those policies are contracts of adhesion which are masterpieces of obfuscation. They are written, intentionally, one has to think, to confuse, confound and, arguably, to defraud consumers. They are not written, as they should be, and very easily could be, in clear laymen's terms that would allow the ordinary consumer to understand the treatment they can expect to receive when filing a claim if they buy insurance from State Farm. Far from it. As such, State Farm's insurance "contracts" are incapable of obtaining any clear agreement or consent by policy holders to any of State Farm's wildfire claims policies that will so profoundly impact the benefits insureds will actually receive if they have to file a claim.

Evidence of the Failure of the Current Proceedings to Take Into Account The True Nature of the Insurance Being Offered by State Farm

On Friday, April 4th, a number of State Farm's disappointed insureds from Pacific Palisades called the office of the Commissioner of Insurance to express their request that the comparatively poor treatment they were receiving – as compared to the treatment they witnesses others with other insurance providers were receiving – be taken into account in the hearing scheduled for April 8th to consider State Farm's emergency rate hike request. The response most, if not all, received to those they spoke to at the office of the Commissioner of Insurance on their calls was that the manner in which they were being treated by State Farm was not relevant to the rate setting hearing and would not be considered. Concerns about insurer practices were "complaints" that State Farm insureds were told were not relevant to the pricing of insurance policies.

But how wrong is that?

While the Insurance Commissioner's rate review and approval practices may have, to date, reflected the view that complaints regarding the conduct of insurers in handling claims and the rate adjustment approval processes are two different, unrelated things, that thinking is wrong.

Here's why.

It is impossible to determine the appropriate price of any product without understanding what the product being offered is. A Kia is not the same as a Tesla. If California law required that car makers obtain regulatory approval for the prices they charge for their cars, would we think it appropriate if the regulator refused to consider the difference in the cars made by Kia and Tesla - that it make its rate determination blind to the product consumers actually receive from the two makers? Absolutely not. The idea is absurd.

Yet here we have the Commissioner of Insurance proceeding with a request for approval of the rate for the product State Farm sells without obtaining or considering data about the service and payouts State Farm customers actually receive when, having suffered a catastrophic loss, they make a claim under the product they have purchased from State Farm. That data, along with data on State Farm's wildfire claims policies needs to be put into evidence alongside similar data for State Farm's competitors and given careful consideration in connection with State Farm's rate increase approval request. From what has been publicly reported in the press and in online forums on the way that State Farm is treating insureds in the Palisades and Eaton fires, in terms of service, speed and payouts, compared to that of certain other insurance providers, the insurance offered by State Farm is

materially deficient as compared to the insurance offered by other insurance providers. It may well be that those deficiencies, when taken into account, mean that Sate Farm is currently overcharging its policy holders, and that a roll-back in fees is appropriate, rather than a rate hike. Or perhaps, if State Farm were to pledge, as part of its rate increase request, to reform its polices, practices and procedures so that its customers are treated better and if State Farm were to pledge to fully inform its customers and potential customers of the true nature of the policies, practices and procedures State Farm will use in handling claims on a go forward basis in simple clear layman's terms, obtaining specific consent on each of the most impactful elements of its policies, State Farm's rate increase would be appropriate, or would justify an increase even higher than that which it has requested. It's impossible to know at this point, however, as the relevant data has not been provided. That data needs to be provided. No complete and fair review of State Farm's rate increase request can be made without a consideration of the actual, de facto nature of the insurance it offers. Any approval granted without that review must be deemed improperly given and invalid, as a matter of law.

The State Farm Wildfire Loss Policies that Should Be Considered as Part of the Consideration of State Farm's Rate Hike Request.

What are State Farm's wildfire claims policies that State Farm should disclose and that must be understood if the nature of the insurance State Farm is offering is to be understood and rates approved for it? Let's start with the things causing the most anguish today for State Farm insureds suffering losses in the Palisades and Eaton fires:

- 1. State Farm's apparent policy as clearly and succinctly stated by its attorney in a recent court proceeding in front of Federal District Court Judge Chen, that State Fram has no legal responsibility zero for helping the consumer ensure that coverage limits in the consumer's policy are high enough to allow the consumer to rebuild in the event of a total loss. This position of State Farm, as stated by the attorney representing it, is, it should be noted, untrue, as the good faith obligation California law applies to contracting parties extends to all aspects of the contractual relationship. But if State Farm intends to take zero responsibility for protecting its insureds from the massive risk posed by insurance liability claim caps set too low, then State Farm should articulate this clearly, obtain a specific consumer consent to the fact, and this limitation in the service it provides should be considered in connection with its rate hike request.
- 2. Rather than being there for its insured as State Farm's marketing programs and sales agents lead consumers to believe State Farm will be in the event of a catastrophe, the State Farm adjusters and estimators insureds will re required to work with and the procedures for making and pursuing a claim that State Farm obligates its insureds to follow, will put them in a state of distress as they encounter:
 - Adjusters and estimators whose conduct suggests that they are poorly trained and demonstrably unfamiliar with rebuild local market conditions;
 - Adjusters and estimators who are slow to respond to insureds inquiries, if they respond at all;
 - c. Adjusters and estimators who are assigned to insureds and then replaced, seemingly at random, requiring insureds to start over with the complicated and emotionally tolling

- task of explaining what was lost and what assistance is needed for temporary housing, rebuild assistance, etc.
- d. Estimators who, as reported by one State Farm estimator to a State Farm insured, believe that, if they provide accurate rebuild cost estimates to State Farm, State Farm will punish them for providing estimates that are "too high" and not hire them again;
- e. What appears to be a State Farm practice and policy to systematically reduce rebuild cost projections created in good faith by estimators before they are communicated to insureds.
- f. State Farm employees who are, by report, financially incented by State Farm's remuneration programs to create as big a gap as possible between coverage limits and actual payouts rather than financially incented, as they should be, to do right by insureds, giving the interests of insureds equal or greater weight and consideration to those of State Farm;
- g. State Farm adjusters and estimators who take months to provide insureds with a single rebuild estimate, which could have been provided within days using readily available rebuild cost data, while neighbors who also lost their homes who are insured by other insurance companies have quickly been given accurate and fair rebuild estimates and quickly been paid out to policy limits;
- h. Adjusters and estimators who provide rebuild estimates in preposterously low ranges, that can only be the result of implementation of policies dictated from the top, as no competent adjuster or estimator working diligently and in good faith could possibly come up with rebuild estimates as low and those regularly being put out by State Farm today;

- i. Policies that hold back policy payouts unless and until the insured demonstrates, through a costly and time-consuming process, that the consumer has incurred or will incur costs to rebuild higher than those estimated by State Farm. This policy serves to make it impossible for many insureds to realize the full value of their policies, for instance, if they elect to sell the lot their home was on and not to rebuild, as many elderly will and many of the underinsured will, of necessity.
- j. Contents coverage payout requirements requiring detailed itemization other insurance companies don't require and that radically reduce replacement cost estimates based on "depreciation" unless lost articles are repurchased, a hurdle to full and proper payout that is patently absurd, given the fact that insureds have lost their homes and will generally have no place in which to put newly purchased replacement items until years later when reconstruction of their homes will finally be complete.
- k. Interim housing reimbursement policies that penalize those who opt to house in less expensive interim housing in contrast to policies of other insurance companies that, appropriately, pay insureds based on the fair rental value of the home they have lost without regard to rental charges incurred by the insured.
- Shocking underestimates of the work required to remediate damage to homes still standing from smoke and toxic particles.
- m. Other policies, procedures and practices that make no sense except as a means for State Farm to reduce its exposure by frustrating insureds to a point of surrender.

State Farm's wildfire claims policies dictate key features of the relief consumers will actually obtain, de facto, when they make a claim under the policies with respect to which State Farm is

requesting rate increases. They must be articulated and understood in order for the Commissioner of Insurance to properly address and approve any State Farm rate increase.

II. PETITIONER

The Petitioner, a longtime California resident and attorney, who previously served as the General Counsel of The Disneyland Resort, and as the Associate General Counsel for Media and New Technologies at Amazon has deep experience and expertise relevant to the rate setting proceedings, including, specifically to policies, practices and procedures for handling consumer issues and claims and obtaining consumer consent and approval of terms of sale. His experience and expertise includes legal experience setting consumer claims handling processes and administering those processes, experience in the establishment of polices, practices and procedures within large companies that work to appropriately protect customers and inform customers, prior to purchase, about the nature of the product and services they can expect to receive, and methods to obtain specific consent to key product features likely to significantly impact customer experience. This experience and expertise was acquired in senior legal and business roles, including during petitioner's 10 plus year tenure at The Walt Disney Company and 10 plus year tenure at Amazon.

At Disney, the company ethos, which Petitioner put into practice in his work, was to deliver a magical experience for all guests (Disneyland Resort customers are referred to within The Walt

Disney Company as "guests", not customers). While serving as the General Counsel of the Disneyland Resort, Petitioner had responsibility for the Guest Claims division, which handled all guest claims at the Resort. As such, his responsibility was to extend that magical experience into the Guest Claims operations, policies and practices, to the greatest degree practicable.

At Amazon, the company ethos, which Petitioner put into practice in his work, was to strive to make the company the "most customer centric company in the world". The principal means Amazon used in its effort to achieve that goal was the provision to customers of very clear and detailed guidance as to what they could expect if they buy, with, frequently, options for buying different levels of service at different prices and the like.

For instance, Amazon customers shopping online might see a notice stating "Standard delivery will be tomorrow with no delivery charge. Want it faster? Pay \$2.99 more and get it today by 10PM." Then, once information is shared and customer expectations are set, the company works to deliver on the promises made, without fail.

Petitioner's experience has taught him that good customer service, which consistently meets and exceeds customer expectations, can only be achieved through the establishment, documentation and methodical roll-out, from the top, of policies, practices and procedures that support it.

Petitioner would like to bring his expertise to bear to ensure that rates approved for insurance in the State of California reflect the actual experience consumers will have in making claims on the insurance they buy.

 including §2661.2, which states, in part, that "[a]ny person shall be permitted to intervene in any proceeding on any rate application or any proceeding subject to Chapter 9 of Part 2 of Division 1 of the California Insurance Code if the issues to be raised by the intervenor or participant are relevant to the issues of the proceeding." This is a proceeding subject to Chapter 9 of Part 2 of Division 1 of the California Insurance Code. The Petitioner's legal and business expertise and contributions to the State Farm rate approval process will help ensure an appropriate outcome in the proceedings that is fair to consumers, taking all of their interests into account, while also ensuring a rate adequate to State Farm as an insurer.

The right of the Petitioner to participate is authorized pursuant to 10 CCR §2661.1 et seq,

Pursuant to the requirement in California Code of Regulations, Title 10, section 2661.3(b), the Petitioner asserts that he has and will assert the following positions on behalf of consumers: that the rate approval process of the Commissioner must take into account data on the key elements of the actual experience consumers will receive, de facto, from State Farm, if they make a claim with respect to the insurance that State Farm is requesting an emergency rate hike for.

The Petitioner's name, address and phone number are listed in the caption of this pleading.

The Petitioner verifies that he has and will be able to attend and participate in the proceeding without delaying the proceeding or any other proceedings before the Commissioner.

III. Intent to Seek Compensation

Pursuant to Ins. Code section 1861.10 and 10 CCR §2661.4, the Petitioner intends to seek compensation in this proceeding in accordance with the estimated Budget set forth in Exhibit A, at \$650 per hour, a rate reasonable given Petitioner's legal, business and technical expertise relevant to the Proceedings and with an initial budget as detailed in Exhibit A.

The Petitioner reserves the right to amend the budget, with adequate notice of any modifications provided as soon as practicable and in compliance with 10 CCR §2661.3. The estimated budget is a reasonable reflection of the required work for a proceeding such as this.

WHEREFORE, the Petitioner requests that the Insurance Commissioner grant his petition to participate in the proceeding.

Dated May 22, 2025

Respectfully submitted,



Merritt David Farren

Petitioner

Merritt David Farren Petition to Participate and Notice of Intent to Seek Compensation

Executed on May 22, 2025, at Los Angeles, California

Merritt David Farren

1	
2	EXHIBIT A
3	
4	PRELIMINARY BUDGET
5	TREELIMINARY BODGET
6	ATTEMAC DOCTANA ATTEM COCT
7	ITEMS ESTIMATED COST
8	
10	Merritt David Farren: \$650 per hour, 100 hours anticipated
11	Participate in State Farm Emergency Rate Hike Request Review. Help formulate the data State Farm
12	must provide to demonstrate the de facto nature of the polices, practices and procedures State Farm
13	utilizes in handling claims made under its insurance policies which service to define the key
14	characteristics of those policies and the price that can be appropriately charged for those policies and
15	the nature of the disclosures State Farm must make to obtain consumer agreement and consent to
16	State Farm's utilization of those policies, practices and procedures in handling claims the consumer
17 18	may make under the insurance policies the consumer purchases from State Farm.
19	
20	Merritt David Farren: \$650 per hour, 8 hours
21	Prepare Request for Finding of Eligibility to Seek Compensation, Petition to
22	Participate and Petition for a Hearing and Request for Award of
23	Compensation.
24	
25	
26	Total Estimated Budget\$70,200
27	
20	23

1	Verification of MERRITT DAVID FARREN			
2				
3				
4				
5	PROOF OF SERVICE			
6				
7	[BY OVERNIGHT OR U.S. MAIL, FAX TRANSMISSION,			
8	EMAIL TRANSMISSION AND/OR PERSONAL SERVICE]			
9	State of California, City and County of Los Angeles			
10	I am employed in the City and County of Los Angeles, State of California. I am			
12	over the age of 18 years. My business address 26565 West Agoura Rd, Suite 200, Calabasas, CA			
13	91302, and I am employed in the city and county where this			
14	service is occurring. On May 22, 2025, I caused service of true and correct			
15	copies of the document entitled: MERRITT DAVID FARREN'S PETITION TO			
16 17	PARTICIPATE AND NOTICE OF INTENT TO SEEK COMPENSATION In the Matter of the			
18	Rate Application of State Farm General Insurance Company, Applicant, upon the persons named in			
19	the attached service list, in the following manner:			
20	1. If marked FAX SERVICE, by facsimile transmission this date to the FAX number			
21	stated to the person(s) named.			
22	2. If marked EMAIL, by electronic mail transmission this date to the email address			
23	stated.			
24	3. If marked U.S. MAIL or OVERNIGHT or HAND DELIVERED, by placing this			
25				
26	date for collection for regular or overnight mailing true copies of the within			
27	document in sealed envelopes, addressed to each of the persons so listed. I am			
8.8	74			

readily familiar with the regular practice of collection and processing of correspondence for mailing of U.S. Mail and for sending of Overnight mail. If mailed by U.S. Mail, these envelopes would be deposited this day in the ordinary course of business with the U.S. Postal Service. If mailed Overnight, these envelopes would be deposited this day in a box or other facility regularly maintained by the express service carrier or delivered this day to an authorized courier or driver authorized by the express service carrier to receive documents, in the ordinary course of business, fully prepaid.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 22, 2025, at Los Angeles, California.

Merritt David Farren



SERVICE LIST 1 2 3 Nikki McKennedy Rate Enforcement Bureau 5 California Department of Insurance 1901 Harrison Street, 6th Floor 6 Oakland, CA 94612 Tel. (415) 538-4500 Fax (510) 238-7830 8 Nikki.McKennedy@insurance.ca.gov 9 FAX U.S. MAIL 10 **OVERNIGHT MAIL** 11 HAND DELIVERED X EMAIL 12 13 14 Jon Phenix 15 Public Advisor Edward Wu 16 Acting Public Advisor 17 Tina Warren Office of the Public Advisor 18 California Department of Insurance 300 Capitol Mall, 17th Floor 19 Sacramento, CA 95814 Tel. (916) 492-3705 20 Fax (510) 238-7830 21 Jon.Phenix@insurance.ca.gov Edward. Wu@insurance.ca.gov 22 Tina. Warren@insurance.ca.gov 23 24 FAX U.S. MAIL 25 **OVERNIGHT MAIL** HAND DELIVERED 26 X EMAIL 27 28 26

Merritt David Farren Petition to Participate and Notice of Intent to Seek Compensation

Nicole Pettis Pricing Manager State Farm One State Farm Plaza Bloomington, IL 61710 Tel. 309-766-2265 nicole.pettis.m3ht@statefarm.com **FAX** U.S. MAIL **OVERNIGHT MAIL** HAND DELIVERED X EMAIL

1		
2	EXHIBIT A	
3		
4	PRELIMINARY BUDGET	
5	TREELIVIN VIRT DODGET	
6	YERDMO POTEMA TED COOT	1
7	ITEMS ESTIMATED COST	
8		
10	Merritt David Farren: \$650 per hour, 100 hours anticipated	
11	Participate in State Farm Emergency Rate Hike Request Review. Help formulate the data State Farm	m
12	must provide to demonstrate the de facto nature of the polices, practices and procedures State Farm	
13	utilizes in handling claims made under its insurance policies which service to define the key	
14	characteristics of those policies and the price that can be appropriately charged for those policies and	
15	the nature of the disclosures State Farm must make to obtain consumer agreement and consent to	
16	State Farm's utilization of those policies, practices and procedures in handling claims the consumer	
17	may make under the insurance policies the consumer purchases from State Farm.	
19		
20	Merritt David Farren: \$650 per hour, 8 hours	
21	Prepare Request for Finding of Eligibility to Seek Compensation, Petition to	
22	Participate and Petition for a Hearing and Request for Award of	
23	Compensation.	
24		
25		
26	Total Estimated Budget\$70,200	
27		
20	23	
		1