



QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2002
OF THE CONDITION AND AFFAIRS OF THE

Bristol West Casualty Insurance Company

NAIC Group Code	0814	0814	NAIC Company Code	11034	Employer's ID Number	34-1893500
	(Current Period)	(Prior Period)				
Organized under the Laws of	Ohio			State of Domicile or Port of Entry	Ohio	
Country of Domicile	United States of America					
Incorporated	04/19/1999			Commenced Business	05/18/2000	
Statutory Home Office	Park Center II, 6150 Oak Tree Blvd.			Independence, OH 44131		
	(Street and Number)			(City or Town, State and Zip Code)		
Main Administrative Office	5701 Stirling Road			800-338-2560		
	Davie, FL 33314			(Area Code) (Telephone Number) (Extension)		
	(City or Town, State and Zip Code)					
Mail Address	5701 Stirling Road			Davie, FL 33314		
	(Street and Number or P.O. Box)			(City or Town, State and Zip Code)		
Primary Location of Books and Records	5701 Stirling Road			800-338-2560		
	Davie, FL 33314			(Area Code) (Telephone Number)		
	(City or Town, State and Zip Code)					
Internet Website Address	www.bristolwest.com					
Statement Contact	Randy D. Sutton			800-338-2560		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	r.sutton@bristolwest.com			954-316-5218		
	(E-mail Address)			(FAX Number)		
Policyowner Relations Contact						
	(Street and Number)					
	(City or Town, State and Zip Code)					
	(Area Code) (Telephone Number) (Extension)					

OFFICERS

President	Robert D. Sadler	Secretary	Alexis S. Oster
Treasurer	Randy D. Sutton		

VICE PRESIDENTS

Randy D. Sutton	Alexis S. Oster	Audrey E. Sylvan
Nila J. Harrison	Jeffrey J. Dailey	John L. Ondeck
Edward J. Steinman		

DIRECTORS OR TRUSTEES

Robert D. Sadler	Audrey E. Sylvan	Nila J. Harrison
Jeffrey J. Dailey	John L. Ondeck	Edward J. Steinman

State ofFlorida.....
County ofBroward.....

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures Manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

Robert D. Sadler President	Alexis S. Oster Secretary	Randy D. Sutton Treasurer
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Subscribed and sworn to before me this
_____ day of _____, 2002

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

ASSETS

	Current Statement Date			4 December 31, Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	7,067,003		7,067,003	5,926,801
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ (50,336) and short-term investments \$ 239,754)	189,418		189,418	1,301,309
6. Other invested assets				
7. Receivable for securities				3,196
8. Aggregate write-ins for invested assets				
9. Subtotals, cash and invested assets (Lines 1 to 8)	7,256,421		7,256,421	7,231,306
10. Agents' balances or uncollected premiums				
10.1 Premiums and agents' balances in course of collection				
10.2 Premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	267,885		267,885	134,247
10.3 Accrued retrospective premiums				
11. Funds held by or deposited with reinsured companies				
12. Bills receivable, taken for premiums				
13. Amounts billed and receivable under high deductible policies				
14. Reinsurance recoverables on loss and loss adjustment expense payments	412,459		412,459	257,615
15. Federal and foreign income tax recoverable and interest thereon (including \$ 11,711 net deferred tax asset).....	14,504	2,793	11,711	15,488
16. Guaranty funds receivable or on deposit.....				
17. Electronic data processing equipment and software.....				
18. Interest, dividends and real estate income due and accrued	68,734		68,734	65,417
19. Net adjustments in assets and liabilities due to foreign exchange rates				
20. Receivable from parent, subsidiaries and affiliates	0		0	184,856
21. Amounts due from /to protected cells				
22. Equities and deposits in pools and associations				
23. Amounts receivable relating to uninsured accident and health plans.....				
24. Other assets nonadmitted	0		0	
25. Aggregate write-ins for other than invested assets				111
26. Total assets excluding protected cell assets (Lines 9 through 25)	8,020,003	2,793	8,017,210	7,889,040
27. Protected cell assets				
28. TOTALS (Lines 26 and 27)	8,020,003	2,793	8,017,210	7,889,040
DETAILS OF WRITE-INS				
0801.			0	0
0802.			0	0
0803.			0	0
0898. Summary of remaining write-ins for Line 8 from overflow page				
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)				
2501. Sundry.....			0	111
2502.			0	0
2503.			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)				111

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$37,317)	348,867	418,287
2. Reinsurance payable on paid losses and loss adjustment expenses	0	
3. Loss adjustment expenses	48,175	45,056
4. Commissions payable, contingent commissions and other similar charges		184,856
5. Other expenses (excluding taxes, licenses and fees)	4,399	9,595
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	70,864	96,289
7. Federal and foreign income taxes [including \$0 on realized capital gains (losses)] (including \$0 net deferred tax liability)	497,374	274,286
8. Borrowed money \$ and interest thereon \$		0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$863,226 and including warranty reserves of \$)	36,559	58,044
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	673,788	999,592
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	115,075	2,887
20. Payable for securities		
21. Liability for amounts held under uninsured accident and health plans		
22. Capital notes \$ and interest thereon \$		
23. Aggregate write-ins for liabilities		
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	1,795,101	2,088,892
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)	1,795,101	2,088,892
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	1,000,000	1,000,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus	4,250,000	4,250,000
33. Unassigned funds (surplus)	972,109	550,148
34. Less treasury stock, at cost		
34.1 shares common (value included in Line 28 \$)		
34.2 shares preferred (value included in Line 29 \$)		
35. Surplus as regards policyholders (Lines 27 to 33, less 34)	6,222,109	5,800,148
36. TOTALS	8,017,210	7,889,040
DETAILS OF WRITE-INS		
2301.		0
2302.		0
2303.		0
2398. Summary of remaining write-ins for Line 23 from overflow page		
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)		
2701.		0
2702.		0
2703.		0
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)		
3001.		0
3002.		0
3003.		0
3098. Summary of remaining write-ins for Line 30 from overflow page		
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)		

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 3,281,147)	3,230,002	2,069,037	3,185,578
1.2 Assumed (written \$)			
1.3 Ceded (written \$ 3,089,899)	3,017,280	779,449	1,897,371
1.4 Net (written \$ 191,248)	212,722	1,289,588	1,288,207
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 90,033):			
2.1 Direct	1,858,568	1,341,723	2,009,957
2.2 Assumed			
2.3 Ceded	1,751,921	499,161	1,167,730
2.4 Net	106,647	842,562	842,227
3. Loss expenses incurred	94,555	126,855	217,909
4. Other underwriting expenses incurred	(369,435)	214,827	98,865
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2.4 thru 5)	(168,233)	1,184,244	1,159,001
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1.4 minus Line 6 + Line 7)	380,955	105,344	129,206
INVESTMENT INCOME			
9. Net investment income earned	282,933	408,729	311,891
10. Net realized capital gains or (losses)	(14,911)		(6,210)
11. Net investment gain (loss) (Lines 9 + 10)	268,022	408,729	305,681
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income	(151)		
15. Total other income (Lines 12 through 14)	(151)		
16. Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15)	648,826	514,073	434,887
17. Dividends to policyholders			
18. Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17)	648,826	514,073	434,887
19. Federal and foreign income taxes incurred	223,088	128,222	157,365
20. Net income (Line 18 minus Line 19)(to Line 22)	425,738	385,851	277,522
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	5,800,148	5,507,168	5,507,168
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20)	425,738	385,851	277,522
23. Net unrealized capital gains or losses			
24. Change in net unrealized foreign exchange capital gain (loss)			
25. Change in net deferred income tax	(4,001)	32,319	5,165
26. Change in nonadmitted assets	224	(1,306)	(3,017)
27. Change in provision for reinsurance			
28. Change in surplus notes			
29. Surplus (contributed to) withdrawn from protected cells			
30. Cumulative effect of changes in accounting principles			13,310
31. Capital changes:			
31.1 Paid in			
31.2 Transferred from surplus (Stock Dividend)			
31.3 Transferred to surplus			
32. Surplus adjustments:			
32.1 Paid in			
32.2 Transferred to capital (Stock Dividend)			
32.3 Transferred from capital			
33. Net remittances from or (to) Home Office			
34. Dividends to stockholders			
35. Change in treasury stock			
36. Aggregate write-ins for gains and losses in surplus			
37. Change in surplus as regards policyholders (Lines 22 through 36)	421,961	416,864	292,980
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37)	6,222,109	5,924,032	5,800,148
DETAILS OF WRITE-INS			
0501.		0	0
0502.		0	0
0503.		0	0
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)			
1401. Other Income (Expense)	(151)	0	0
1402.		0	0
1403.		0	0
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	(151)		
3601. Equity of converted non-insurance entity		0	0
3602.		0	0
3603.		0	0
3698. Summary of remaining write-ins for Line 36 from overflow page			
3699. Totals (Lines 3601 thru 3603 plus 3698) (Line 36 above)			

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
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CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance	(268,194)	2,137,857
2. Loss and loss adjustment expenses paid (net of salvage and subrogation)	422,347	911,862
3. Underwriting expenses paid	(152,044)	(186,750)
4. Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	(538,497)	1,412,745
6. Net investment income	302,216	361,470
7. Other income (expenses):		
7.1 Agents' balances charged off		
7.2 Net funds held under reinsurance treaties		
7.3 Net amount withheld or retained for account of others		
7.4 Aggregate write-ins for miscellaneous items	(151)	
7.5 Total other income (Lines 7.1 to 7.4)	(151)	
8. Dividends to policyholders on direct business , less \$ dividends on reinsurance assumed or ceded (net)		
9. Federal and foreign income taxes (paid) recovered	3,777	(15,488)
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9)	(232,655)	1,758,727
Cash from Investments		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds	1,924,639	6,096,544
11.2 Stocks		
11.3 Mortgage loans		
11.4 Real estate		
11.5 Other invested assets		
11.6 Net gains or (losses) on cash and short-term investments		209
11.7 Miscellaneous proceeds	3,196	(3,196)
11.8 Total investment proceeds (Lines 11.1 to 11.7)	1,927,835	6,093,557
12. Cost of investments acquired (long-term only):		
12.1 Bonds	3,100,438	6,785,265
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Miscellaneous applications		
12.7 Total investments acquired (Lines 12.1 to 12.6)	3,100,438	6,785,265
13. Net Cash from investments (Line 11.8 minus Line 12.7)	(1,172,603)	(691,708)
Cash from Financing and Miscellaneous Sources		
14. Cash provided:		
14.1 Surplus notes, capital and surplus paid in		
14.2 Capital notes \$ less amounts repaid \$		
14.3 Net transfers from affiliates	297,044	
14.4 Borrowed funds received		
14.5 Other cash provided	0	15,376
14.6 Total (Lines 14.1 to 14.5)	297,044	15,376
15. Cash applied:		
15.1 Dividends to stockholders paid		
15.2 Net transfers to affiliates		62,645
15.3 Borrowed funds repaid		
15.4 Other applications	3,677	
15.5 Total (Lines 15.1 to 15.4)	3,677	62,645
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5)	293,367	(47,269)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16)	(1,111,891)	1,019,750
18. Cash and short-term investments:		
18.1 Beginning of year	1,301,309	281,559
18.2 End of year (Line 17 plus Line 18.1)	189,418	1,301,309
DETAILS OF WRITE-INS		
07.401 Misc. Income (Expense)	(151)	0
07.402		0
07.403		0
07.498 Summary of remaining write-ins for Line 7.4 from overflow page		
07.499 Totals (Lines 07.401 thru 07.403 plus 07.498) (Line 7.4 above)	(151)	

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
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NOTES TO FINANCIAL STATEMENTS

INCOME TAXES

	9/30/02	12/31/01	Change
The components of the net DTA recognized on the Company's Assets, Liabilities, Surplus and Other Funds are as follows:			
Total of Gross Deferred Tax Assets	14,930	18,931	(4,001)
Total of Gross Deferred Tax Liabilities	426	426	0
Net Deferred Tax Asset	14,504	18,505	(4,001)
Deferred Tax Asset Nonadmitted	2,793	3,017	(224)
Net Admitted Deferred Tax Asset	11,711	15,488	(3,776)
(Increase) Decrease in Nonadmitted Asset			224

which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	9/30/02
Provision computed at statutory rate	227,089
Tax exempt income deduction	-
Dividend Received Deduction	-
Goodwill	-
Change in Nonadmitted Deferred Tax Assets	(224)
Other	-
Total	226,865

Reconciliation

Current Tax Provision	223,088	34.38%
Change in Deferred Tax - Admitted	4,001	0.62%
Change in Nonadmitted Deferred Tax Assets	(224)	-0.03%
Total Tax	226,865	34.97%

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
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GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements?

Yes [] No [X]
- 1.2

If yes, explain:
.....
- 2.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [] No [X]
- 2.2

If yes, has the report been filed with the domiciliary state?

Yes [] No []
- 3.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]
- 3.2

If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.
4.

Have there been any substantial changes in the organizational chart since the prior quarter end?
If yes, attach an organizational chart.

Yes [] No [X]
- 5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]
- 5.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....
.....
.....

6.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes [] No [X] NA []

If yes, attach an explanation.
- 7.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

04/14/2000
- 7.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

04/14/2000
- 7.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

05/18/2000
- 7.4

By what department or departments?
.....
- 8.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.)

Yes [] No [X]
- 8.2

If yes, give full information:
.....

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
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GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

INVESTMENT

9.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [] No [X]

9.2 If yes, explain:
.....

10.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

10.2 If yes, give full and complete information relating thereto:
.....

11. Amount of real estate and mortgages held in other invested assets in Schedule BA:\$

12. Amount of real estate and mortgages held in short-term investments:\$

13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

13.2 If yes, please complete the following:

		1	2
		Prior Year-End Statement Value	Current Quarter Statement Value
13.21	Bonds	\$	\$
13.22	Preferred Stock	\$	\$
13.23	Common Stock	\$	\$
13.24	Short-term Investments	\$	\$
13.25	Mortgages, Loans or Real Estate	\$	\$
13.26	All Other	\$	\$
13.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26).....	\$	\$
13.28	Total Investment in Parent included in Lines 13.21 to 13.26 above	\$	\$
13.29	Receivable from Parent not included in Lines 13.21 to 13.26 above	\$	\$

14.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

14.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []

If no, attach a description with this statement.

15. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1 - General, Section IV.H - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

15.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
The Bank of New York.....	1 Wall Street 25th Floor, New York, NY 10286.....

15.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

15.3 Have there been any changes, including name changes in the custodian(s) identified in 15.1 during the current year? Yes [] No [X]

15.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

15.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
110497.....	Hyperion Capital Management, Inc.....	One Liberty Plaza 165 Broadway 36th Floor New York, NY 10006.....

GENERAL INTERROGATORIES

(continued)

PART 2
PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [] NA [X]

If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]

If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]

3.2 If yes, give full and complete information thereto.

.....

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation liabilities tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
.....
.....
.....
TOTAL		

SCHEDULE A - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period	NONE			
2. Increase (decrease) by adjustment				
3. Cost of acquired				
4. Cost of additions to and permanent improvements				
5. Total profit (loss) on sales				
6. Increase (decrease) by foreign exchange adjustment				
7. Amount received on sales				
8. Book/adjusted carrying value at end of current period				
9. Total valuation allowance				
10. Subtotal (Lines 8 plus 9)				
11. Total nonadmitted amounts				
12. Statement value, current period (Page 2, real estate lines, current period)				

SCHEDULE B - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/recorded investment excluding accrued interest on mortgages owned, beginning of period	NONE			
2. Amount loaned during period:				
2.1. Actual cost at time of acquisitions				
2.2. Additional investment made after acquisitions				
3. Accrual of discount and mortgage interest points and commitment fees				
4. Increase (decrease) by adjustment				
5. Total profit (loss) on sale				
6. Amounts paid on account or in full during the period				
7. Amortization of premium				
8. Increase (decrease) by foreign exchange adjustment				
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period				
10. Total valuation allowance				
11. Subtotal (Lines 9 plus 10)				
12. Total nonadmitted amounts				
13. Statement value of mortgages owned at end of current period				

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA				
	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, beginning of period	NONE			
2. Cost of acquisitions during period:				
2.1. Actual cost at time of acquisitions				
2.2. Additional investment made after acquisitions				
3. Accrual of discount				
4. Increase (decrease) by adjustment				
5. Total profit (loss) on sale				
6. Amounts paid on account or in full during the period				
7. Amortization of premium				
8. Increase (decrease) by foreign exchange adjustment				
9. Book/adjusted carrying value of long-term invested assets at end of current period				
10. Total valuation allowance				
11. Subtotal (Lines 9 plus 10)				
12. Total nonadmitted amounts				
13. Statement value of long-term invested assets at end of current period				

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Statement Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Statement Value End of First Quarter	6 Statement Value End of Second Quarter	7 Statement Value End of Third Quarter	8 Statement Value December 31 Prior Year
BONDS								
1. Class 1	6,015,090	1,928,339	1,401,147	(5,649)	5,355,756	6,015,090	6,536,633	4,667,858
2. Class 2	772,603			(2,479)	1,023,565	772,603	770,124	1,274,957
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	6,787,693	1,928,339	1,401,147	(8,128)	6,379,321	6,787,693	7,306,757	5,942,815
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	6,787,693	1,928,339	1,401,147	(8,128)	6,379,321	6,787,693	7,306,757	5,942,815

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter					
	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Amount of Interest Received Current Quarter	Paid for Accrued Interest
8099999 Totals	239,754	XXX	239,754	60	

SCHEDULE DA - PART 2- Verification

Short-Term Investments Owned				
	1	2	3	4
	First Quarter Current Year	Second Quarter Current Year	Third Quarter Current Year	Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period	16,014	57,205	64,359	281,157
2. Cost of short-term investments acquired	2,702,856	754,767	1,404,199	15,850,281
3. Increase (decrease) by adjustment				
4. Increase (decrease) by foreign exchange adjustment				
5. Total profit (loss) on disposal of short-term investments				
6. Consideration received on disposal of short-term investments	2,661,665	747,613	1,228,804	16,115,424
7. Book/adjusted carrying value, current period	57,205	64,359	239,754	16,014
8. Total valuation allowance				
9. Subtotal (Lines 7 plus 8)	57,205	64,359	239,754	16,014
10. Total nonadmitted amounts				
11. Statement value (Lines 9 minus 10)	57,205	64,359	239,754	16,014
12. Income collected during period	624	49	331	9,847
13. Income earned during period	624	49	331	8,336

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

**STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)**

SCHEDULE F—CEDED REINSURANCE

Showing all new reinsurers - Current Year to Date

[illegible]

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories							
States, etc.	1 Is Insurer Licensed? (Yes or No)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama	AL	No					
2. Alaska	AK	No					
3. Arizona	AZ	No					
4. Arkansas	AR	No					
5. California	CA	No					
6. Colorado	CO	No					
7. Connecticut	CT	No					
8. Delaware	DE	No					
9. District of Columbia	DC	No					
10. Florida	FL	No					
11. Georgia	GA	No					
12. Hawaii	HI	No					
13. Idaho	ID	No					
14. Illinois	IL	No					
15. Indiana	IN	No					
16. Iowa	IA	No					
17. Kansas	KS	No					
18. Kentucky	KY	No					
19. Louisiana	LA	No					
20. Maine	ME	No					
21. Maryland	MD	No					
22. Massachusetts	MA	No					
23. Michigan	MI	No					
24. Minnesota	MN	No					
25. Mississippi	MS	No					
26. Missouri	MO	No					
27. Montana	MT	No					
28. Nebraska	NE	No					
29. Nevada	NV	No					
30. New Hampshire	NH	No					
31. New Jersey	NJ	No					
32. New Mexico	NM	No					
33. New York	NY	No					
34. North Carolina	NC	No					
35. North Dakota	ND	No					
36. Ohio	OH	Yes	3,281,147	2,905,020	1,596,906	695,555	1,055,903
37. Oklahoma	OK	No					
38. Oregon	OR	No					
39. Pennsylvania	PA	No					
40. Rhode Island	RI	No					
41. South Carolina	SC	No					
42. South Dakota	SD	No					
43. Tennessee	TN	No					
44. Texas	TX	No					
45. Utah	UT	No					
46. Vermont	VT	No					
47. Virginia	VA	No					
48. Washington	WA	No					
49. West Virginia	WV	No					
50. Wisconsin	WI	No					
51. Wyoming	WY	No					
52. American Samoa	AS	No					
53. Guam	GU	No					
54. Puerto Rico	PR	No					
55. U.S. Virgin Islands	VI	No					
56. Canada	CN	No					
57. Aggregate Other Aliens	OT	XXX					
58. Totals	(a) 1	3,281,147	2,905,020	1,596,906	695,555	1,055,903	643,425
DETAILS OF WRITE-INS							
5701.	XXX		0		0		0
5702.	XXX		0		0		0
5703.	XXX		0		0		0
5798. Summary of remaining write-ins for Line 57 from overflow page.	XXX						
5799. Totals (Lines 5701 thru 5703 plus 5798) (Line 57 above)	XXX						

(a) Insert the number of yes responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

NONE

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

PART 1 - LOSS EXPERIENCE

Lines of Business		Current Year to Date			4
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
1.	Fire				
2.	Allied Lines				
3.	Farmowners multiple peril				
4.	Homeowners multiple peril				
5.	Commercial multiple peril				
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine				
10.	Financial guaranty				
11.1	Medical malpractice - occurrence				
11.2	Medical malpractice - claims-made				
12.	Earthquake				
13.	Group accident and health				
14.	Credit accident and health				
15.	Other accident and health				
16.	Workers' compensation				
17.1	Other liability - occurrence				
17.2	Other liability - claims-made				
18.1	Products liability - occurrence				
18.2	Products liability - claims-made				
19.1,19.2	Private passenger auto liability	1,851,591	1,003,856	54.2	65.3
19.3,19.4	Commercial auto liability				
21.	Auto physical damage	1,378,411	854,712	62.0	64.2
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft				
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
31.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
33.	Aggregate write-ins for other lines of business				
34.	Totals	3,230,002	1,858,568	57.5	64.8
DETAILS OF WRITE-INS					
3301.	.....			0.0	0.0
3302.	.....			0.0	0.0
3303.	.....			0.0	0.0
3398.	Summary of remaining write-ins for Line 33 from overflow page				
3399.	Totals (Lines 3301 thru 3303 plus 3398) (Line 33 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			
2.	Allied Lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			
10.	Financial guaranty			
11.1	Medical malpractice - occurrence			
11.2	Medical malpractice - claims-made			
12.	Earthquake			
13.	Group accident and health			
14.	Credit accident and health			
15.	Other accident and health			
16.	Workers' compensation			
17.1	Other liability - occurrence			
17.2	Other liability - claims-made			
18.1	Products liability - occurrence			
18.2	Products liability - claims-made			
19.1,19.2	Private passenger auto liability	722,875	1,869,425	1,697,327
19.3,19.4	Commercial auto liability			
21.	Auto physical damage	558,948	1,411,721	1,207,693
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
31.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
33.	Aggregate write-ins for other lines of business			
34.	Totals	1,281,823	3,281,146	2,905,020
DETAILS OF WRITE-INS				
3301.	.....	0		0
3302.	.....	0		0
3303.	.....	0		0
3398.	Summary of remaining write-ins for Line 33 from overflow page			
3399.	Totals (Lines 3301 thru 3303 plus 3398) (Line 33 above)			

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE Bristol West Casualty Insurance Company
(formerly known as Reliant Casualty Insurance Company)

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE																						
	1	2	3	4	5	6	7	8	9	10	11	12	13									
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (a) (Cols. 1 + 2)	2002 Loss and LAE Payments on Claims Reported as of Prior Year-End	2002 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2002 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (b) (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (c) (Cols. 11 + 12)									
1. 1999 + Prior																						
2. 2000																						
3. Subtotals 2000 + Prior																						
4. 2001.....	177	286	463	127	2	129	86		249	335	36	(35)	1									
5. Subtotals 2001 + Prior	177	286	463	127	2	129	86		249	335	36	(35)	1									
6. 2002	XXX	XXX	XXX	XXX	137	137	XXX	21	41	62	XXX	XXX	XXX									
7. Totals	177	286	463	127	139	266	86	21	290	397	36	(35)	1									
8. Prior Year-End's Surplus As Regards Policyholders	5,800										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7									
											1. 20.3	2. (12.2)	3. 0.2									
											Col. 13, Line 7 As a % of Col. 1 Line 8											
											4. 0.0											

(a) Should Equal Prior Year-End Annual Statement; Page 3, Col. 1, Lines 1 + 3

(b) Should Equal Q.S. Page 3, Col. 1, Lines 1 and 3.

(c) Should Also Equal Cols. 6 + 10 less Col. 3 for Lines 1 through 5 only.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

RESPONSES

1.

Will the SVO Compliance Certification be filed with this statement?

.....Yes.....
2.

Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?

.....No.....
3.

Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement?

.....No.....

Explanations:

Bar Codes:

Trusteed Surplus Statement (Document Identifier 490) here:



Supplement A to Schedule T (Document Identifier 450) here:



OVERFLOW PAGE FOR WRITE-INS

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

NONE

Schedule B - Part 2

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

E04

E04

E04

E04

E04

SCHEDULE D - PART 4

[illegible]

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

SCHEDULE E - PART 1 - CASH

E08