## Edgar Filing: CHUBB CORP - Form 4

CHUBB COR Form 4 March 08, 200 <b>FORM</b> Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b).	OMB AF OMB Number: Expires: Estimated a burden hou response	•						
(Print or Type Re	esponses)							
MOTAMED THOMAS F Symbol			r Name <b>and</b> Ticker or Trading B CORP [CB]	Issuer	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Mic		f Earliest Transaction					
(Month/Da 15 MOUNTAIN VIEW ROAD, P.O. 03/06/200 BOX 1615								
	(Street)		endment, Date Original nth/Day/Year)	<ul><li>6. Individual or Joint/Group Filing(Check Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>				
WARREN, N	NJ 070611615			Form filed by M Person	fore than One Re	porting		
(City)	(State) (Z	ip) Table	le I - Non-Derivative Securities	Acquired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8) (A) or		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON	03/06/2006		F 6,794 D <sup>\$</sup> 95	59,226.07	D			
COMMON				926	Ι	By 401(k) Trustee		
COMMON				3,253	Ι	By ESOP		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	′ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
MOTAMED THOMAS F 15 MOUNTAIN VIEW ROAD P.O. BOX 1615 WARREN, NJ 070611615			Vice Chairman & C.O.O.			
Signatures						
By: Patricia S.	03/08	/2006				

Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Tomczyk, POA

\*\*Signature of Reporting Person