

COMMONWEALTH AUTOMOBILE REINSURERS  
Massachusetts Commercial Automobile

GARAGES

GARAGES SUBJECT TO THE MASSACHUSETTS COMPULSORY LAW																		
	Territories																	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17-26	27
RATES PER PLATE																		
Coverage A-1	230	258	294	292	300	328	375	422	427	420	510	458	559	595	611	523	1424	210
Coverage A-2	37	41	46	46	47	52	59	65	66	65	79	71	86	92	94	81	216	34
Coverage PDL	334	379	435	431	444	489	562	635	644	632	774	693	850	907	931	793	2206	303
Coverage B	58	66	75	74	76	84	96	107	109	107	130	117	142	152	155	133	363	53

GARAGES MEDICAL PAYMENT TABLES						
Bodily Injury Liability Limits	Garage Automobile Medical Payments Limit per Person			Garage Automobile and Other Than Covered Autos Limit per Person		
	1,000	2,000	5,000	1,000	2,000	5,000
20/40	5.1%	5.9%	7.1%	7.2%	8.4%	10.0%
25/50	4.7%	5.4%	6.5%	6.6%	7.7%	9.2%
35/80	4.1%	4.8%	5.8%	5.9%	6.8%	8.1%
50/100	3.7%	4.3%	5.2%	5.3%	6.1%	7.3%
100/300	2.9%	3.4%	4.1%	4.2%	4.9%	5.8%
250/500	2.3%	2.7%	3.2%	3.2%	3.8%	4.5%
500/500	1.9%	2.2%	2.7%	2.7%	3.2%	3.8%
500/1000	1.9%	2.2%	2.7%	2.7%	3.2%	3.8%
1000/1000	1.6%	1.8%	2.2%	2.2%	2.6%	3.0%

ALL TERRITORIES		
Limits	U-1 Uninsured	U-2 Underinsured
20/40	8	0
20/50	9	1
25/50	10	4
35/80	11	14
50/100	12	24
100/300	13	49
250/500	14	127
500/500	20	317

The foregoing tables are based on Table 4 increased limits factors. For other limits, the policy factor for medical payments shall be determined as follows:

Medical Payments Percentage for Basic Bodily Injury Limits / Table Percentage for Increased Limits

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C.A.R.  
10/1/2002

**Commercial Automobile Rates  
Garages Subject to the Massachusetts Compulsory Law**

**Garage Operations - Other Than Covered Autos**

**Liability Rates**

Territory	Combined Single Limit of Liability (in 000's)						
	50	100	200	250	300	500	1000
1 - 4, 27	0.321	0.394	0.477	0.503	0.529	0.598	0.736
5 - 13	0.418	0.513	0.621	0.655	0.688	0.779	0.958
14 - 26	0.515	0.632	0.765	0.806	0.848	0.959	1.181
Minimum Premium per Location	28	34	42	44	46	52	64

These rates reflect an aggregate limit, applicable to other than auto losses, of three times the otherwise applicable per accident liability limit.

For aggregate limits other than three times the per accident limit, multiply the rates by the following factors:

1 x Accident Limit	0.950
2 x Accident Limit	0.980
5 x Accident Limit	1.030
7 x Accident Limit	1.050

**Increased Limit Factors**

<u>CSL</u>	<u>Factor</u>
\$50,000	1.000
\$75,000	1.146
\$80,000	1.166
\$100,000	1.228
\$200,000	1.485
\$250,000	1.566
\$300,000	1.647
\$500,000	1.863
\$750,000	2.112
\$1,000,000	2.293
\$2,000,000	2.516
\$2,500,000	2.591
\$5,000,000	2.808

The Aggregate Limit is three times the Accident Limit.

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**Commercial Automobile Rates  
Garages-Not Subject to the Massachusetts Compulsory Law  
Dealer or Repair Plate Not Issued  
Garage Operations - Other than Covered Autos**

**Liability Rates**

Territory	Combined Single Limit of Liability (in 000's)						
	50	100	200	250	300	500	1000
1 - 4, 27	1.511	1.856	2.244	2.366	2.489	2.815	3.465
5 - 13	2.745	3.371	4.076	4.299	4.521	5.114	6.294
14 - 26	2.875	3.531	4.269	4.502	4.735	5.356	6.592
Minimum Premium per Location	91	112	135	143	150	170	209

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For aggregate limits other than three times the per accident limit, multiply the rates by the following factors:

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**Increased Limit Factors**

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\$1,000,000	2.293
\$2,000,000	2.516
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<b>Medical Payments Percentage Table Garage Operations - Other Than Covered Auto - Covered Auto</b>			
<u>Combined Single Limit (000)</u>	<u>Limit per Person</u>		
	\$1,000	\$2,000	\$5,000
\$50	2.4%	2.7%	3.3%
\$100	2.0%	2.2%	2.7%
\$200	1.6%	1.8%	2.2%
\$250	1.5%	1.7%	2.1%
\$300	1.5%	1.6%	2.0%
\$500	1.3%	1.4%	1.8%
\$1,000	1.0%	1.2%	1.4%

The Aggregate Limit is three times the Accident Limit.