

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 | 241 | 285 | 344 | 326 | 353 | 387 | 408 | 470 | 484 | 498 | 541 | 489 | 653 | 716 | 706 | 663 | 1847 | 219 |
| Coverage A-2 | 42 | 49 | 59 | 56 | 60 | 66 | 69 | 79 | 81 | 83 | 90 | 82 | 108 | 118 | 117 | 110 | 300 | 39 |
| Coverage PDL | 360 | 431 | 525 | 496 | 539 | 592 | 625 | 725 | 746 | 769 | 837 | 755 | 1015 | 1116 | 1099 | 1032 | 2910 | 326 |
| Coverage B | 73 | 87 | 105 | 99 | 107 | 117 | 124 | 143 | 147 | 151 | 164 | 149 | 198 | 218 | 215 | 202 | 561 | 67 |

| 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 | 5.0% | 5.7% | 6.9% | 7.0% | 8.2% | 9.7% |
| 35/80 | 4.5% | 5.2% | 6.2% | 6.3% | 7.4% | 8.8% |
| 50/100 | 4.1% | 4.7% | 5.7% | 5.8% | 6.7% | 8.0% |
| 100/300 | 3.2% | 3.7% | 4.4% | 4.5% | 5.3% | 6.3% |
| 250/500 | 2.3% | 2.7% | 3.3% | 3.3% | 3.9% | 4.6% |
| 500/500 | 1.8% | 2.1% | 2.6% | 2.6% | 3.0% | 3.6% |
| 500/1000 | 1.8% | 2.1% | 2.5% | 2.6% | 3.0% | 3.6% |
| 1000/1000 | 1.5% | 1.7% | 2.0% | 2.1% | 2.4% | 2.9% |

| ALL TERRITORIES | | |
|-----------------|------------------|---------------------|
| Limits | U-1 Uninsured | U-2 Underinsured |
| 20/40 | 7 | 0 |
| 20/50 | 8 | 1 |
| 25/50 | 9 | 4 |
| 35/80 | 10 | 14 |
| 50/100 | 11 | 23 |
| 100/300 | 12 | 49 |
| 250/500 | 13 | 129 |
| 500/500 | 16 | 330 |

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

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 | 0.296 | 0.367 | 0.463 | 0.496 | 0.530 | 0.630 | 0.786 |
| 5 - 13 | 0.384 | 0.477 | 0.601 | 0.643 | 0.688 | 0.817 | 1.019 |
| 14 - 26 | 0.473 | 0.587 | 0.740 | 0.792 | 0.848 | 1.007 | 1.255 |
| Minimum Premium per Location | 28 | 35 | 44 | 47 | 50 | 60 | 74 |

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 | 1.161 |
| \$80,000 | 1.182 |
| \$100,000 | 1.241 |
| \$200,000 | 1.565 |
| \$250,000 | 1.675 |
| \$300,000 | 1.792 |
| \$500,000 | 2.128 |
| \$750,000 | 2.435 |
| \$1,000,000 | 2.654 |
| \$2,000,000 | 2.919 |
| \$2,500,000 | 3.002 |
| \$5,000,000 | 3.276 |

The Aggregate Limit is three times the Accident Limit.

**Commercial Automobile Rates
Garages-Not Subject to the Massachusetts Compulsory Law**

Liability Rates

| Territory | Combined Single Limit of Liability (in 000's) | | | | | | |
|---------------------------------|---|-------|-------|-------|-------|-------|-------|
| | 50 | 100 | 200 | 250 | 300 | 500 | 1000 |
| 1 - 4, 27 | 1.411 | 1.751 | 2.208 | 2.363 | 2.529 | 3.003 | 3.745 |
| 5 - 13 | 2.548 | 3.162 | 3.988 | 4.268 | 4.566 | 5.422 | 6.762 |
| 14 - 26 | 2.666 | 3.309 | 4.172 | 4.466 | 4.777 | 5.673 | 7.076 |
| Minimum Premium per Location | 91 | 113 | 142 | 152 | 163 | 194 | 242 |

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 | 1.161 |
| \$80,000 | 1.182 |
| \$100,000 | 1.241 |
| \$200,000 | 1.565 |
| \$250,000 | 1.675 |
| \$300,000 | 1.792 |
| \$500,000 | 2.128 |
| \$750,000 | 2.435 |
| \$1,000,000 | 2.654 |
| \$2,000,000 | 2.919 |
| \$2,500,000 | 3.002 |
| \$5,000,000 | 3.276 |

| Medical Payments Percentage Table Garage Operations Other Than Covered Auto - Covered Auto | | | |
|--|------------------|---------|---------|
| Combined Single Limit (000) | Limit per Person | | |
| | \$1,000 | \$2,000 | \$5,000 |
| \$50 | 2.4% | 2.7% | 3.3% |
| \$100 | 1.9% | 2.2% | 2.7% |
| \$200 | 1.5% | 1.7% | 2.1% |
| \$250 | 1.4% | 1.6% | 2.0% |
| \$300 | 1.3% | 1.5% | 1.8% |
| \$500 | 1.1% | 1.3% | 1.6% |
| \$1,000 | 0.9% | 1.0% | 1.2% |

The Aggregate Limit is three times the Accident Limit.