COMMONWEALTH AUTOMOBILE REINSURERS

Massachusetts Commercial Automobile

GARAGES

							GARA	GES SUB	JECT TO T	HE MASSA	CHUSETTS	S COMPUL	SORY LAW							
	Territories																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
RATES PER PLAT	TE																			
Coverage A-1	1231	1231	1231	1231	1231	1231	1231	1231	1231	1231	320	369	368	445	392	432	532	578	658	695
Coverage A-2	156	156	156	156	156	156	156	156	156	156	47	53	53	62	56	61	73	78	88	92
Coverage PDL	1180	1180	1180	1180	1180	1180	1180	1180	1180	1180	310	357	355	429	379	417	512	557	633	668
Coverage B	135	135	135	135	135	135	135	135	135	135	35	41	40	49	43	48	58	64	72	76

	GARAGES	MEDICAL	PAYMENT TAB	LES				
				Garage /	Automobile	and		
	Garage Autom	nobile Medic	al Payments	Other Tha	n Covered	Autos		
Bodily Injury	Limi	t per Person		Limit	Limit per Person			
Liability Limits	<u>1,000</u>	2,000	<u>5,000</u>	<u>1,000</u>	2,000	5,000		
20/40	5.1%	5.9%	7.1%	7.2%	8.4%	10.0%		
25/50	4.5%	5.2%	6.3%	6.4%	7.4%	8.8%		
35/80	4.0%	4.6%	5.5%	5.6%	6.4%	7.7%		
50/100	3.5%	4.1%	4.9%	5.0%	5.8%	6.9%		
100/300	2.9%	3.3%	4.0%	4.1%	4.7%	5.6%		
250/500	2.3%	2.6%	3.2%	3.2%	3.8%	4.5%		
500/500	2.0%	2.3%	2.8%	2.8%	3.3%	3.9%		
500/1000	2.0%	2.3%	2.8%	2.8%	3.3%	3.9%		
1000/1000	1.8%	2.0%	2.4%	2.5%	2.9%	3.4%		

ALL TERRITORIES							
	U-1	U-2					
<u>Limits</u>	<u>Uninsured</u>	<u>Underinsured</u>					
20/40	4	0					
20/50	5	0					
25/50	6	2					
35/80	7	8					
50/100	8	14					
100/300	9	34					
250/500	10	114					
500/500	11	279					

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

	Combined	Single Lim	it of Liabilit	y (in 000's)	- Rate is p	er \$100 of	Payroll
	50	100	200	250	300	500	1000
All Territories	0.417	0.503	0.598	0.628	0.653	0.720	0.816
Minimum Premium per Location		34	40	42	44	48	55

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	1.123
\$80,000	1.141
\$100,000	1.206
\$200,000	1.434
\$250,000	1.507
\$300,000	1.565
\$500,000	1.727
\$750,000	1.861
\$1,000,000	1.956
\$2,000,000	2.151
\$2,500,000	2.212
\$5,000,000	2.412

The Aggregate Limit is three times the Accident Limit.