

**Commercial Automobile Insurance Manual**

**(RULE 26) DRIVE OTHER CAR COVERAGE**

<b>Premium Per Coverage</b>	<b>Limits</b>	<b>Named Individual</b>
Bodily Injury Liability	\$20/40	\$63
Property Damage Liability	5,000	17
Medical Payments	500	14
	1,000	15
	2,000	17
	3,000	18
	4,000	19
	5,000	20
Comprehensive	\$500 Ded.	12
Collision	\$500 Ded.	39

For protection against Uninsured or Underinsured Motorists Coverage, charge the Private Passenger Type rates.

**(RULE 27) NON-OWNERSHIP LIABILITY**

Premium Development

1. All risks other than social service agency risks as defined in the Public Transportation Section.
  - a. Determine the total number of employees of the insured at all locations and select the advance premium from the following table:

<b>Class Code</b>	<b>Total Number of Employees</b>	<b>Bodily Injury Limits \$20/40</b>	<b>Property Damage Limit \$5,000</b>
66010	0-25	\$36	\$9
66020	26-100	90	35
66030	101-500	298	110
66040	501-1,000	563	213
66050	over 1,000	874	312

- b. To extend Non-Ownership Liability Coverage to cover the individual liability of employees, compute the additional premium by multiplying the premium determined in paragraph 1.a. above by .25.
2. Social Service Agency Risks
  - a. Determine the advance premium based on the number of employees in accordance with paragraph 1.a. above.
  - b. Charge an additional premium determined as follows:  
 Determine the total number of volunteers at all locations and charge \$1 per volunteer for Bodily Injury Liability and \$1 per volunteer for Property Damage Liability at basic limits. The minimum premium shall be \$36 for Bodily Injury and \$9 for Property Damage Liability at basic limits.
  - c. To extend Non-Ownership Coverage to cover the individual liability of agency employees, charge the additional premium determined in accordance with 1.b. above.

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**(RULE 27) NON-OWNERSHIP LIABILITY (Continued)**

- d. To extend coverage to cover the blanket individual liability of volunteers, charge an additional premium of \$.50 per volunteer for Bodily Injury Liability and \$.50 per volunteer for Property Damage Liability at basic limits. The minimum premium shall be \$10 for Bodily Injury Liability and \$2 for Property Damage Liability at basic limits.
- 3. For policies providing Non-Ownership Liability Coverage only, Hired Automobile Coverage only, or Non-Ownership Liability and Hired Automobile Coverage only, a minimum premium of \$95 for Bodily Injury Liability and \$44 for Property Damage Liability at basic limits applies.

**(RULE 28) HIRED AUTOMOBILES**

A. Excess Coverage

Premium Development

- 1. Estimate the total cost for the hire of automobiles for each state where the insured does business. Do not include charges for services performed by common or contract carriers subject to the insurance requirement of any public authority regulating motor carriers.
- 2. To compute the advance premium, multiply the cost of hire rate times each \$100 cost of hire.
- 3. Unless there is substantial change in exposures during the policy period, the advance premium is the earned premium.
- 4. The minimum premium shall be \$36 Bodily Injury Liability basic limits and \$9 Property Damage Liability basic limit.
- 5. For policies providing Hired Automobile Coverage only, Non-Ownership Liability Coverage only, or Hired Automobile and Non-Ownership Coverages only, a minimum premium of \$95 for Bodily Injury Liability and \$44 for Property Damage Liability at basic limits applies.

<u>Hired Automobile</u>	
Bodily Injury—20,000/40,000	Property Damage—5,000
\$0.69	\$0.55

B. Primary Coverage

- 1. If the insured is providing the primary insurance covering the auto and the term of the lease is:
  - a. 6 months or more -
    - (1) Rate as though owned by the insured; and
    - (2) If the policy is extended to cover the owner of the auto as an additional insured, multiply the otherwise applicable Bodily Injury Liability and Property Damage Liability rates by 1.04. Use the appropriate endorsement for including the owner or lessor as an additional insured.

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**(RULE 33) RENTAL REIMBURSEMENT—COVERAGE CODE 083**

Premium Development

The rate per \$100 of liability amount is \$13.18.

Compute the premium as follows:

1. the number of automobiles, multiplied by
2. the agreed maximum amount of Rental Reimbursement for each day, multiplied by
3. the maximum number of days, multiplied by
4. the rate per \$100 of the liability amount.

**Example:**

5 automobiles  
\$15 per day reimbursement limit  
30 days coverage

Rental Reimbursement limit  
\$13.18 rate per \$100 of the liability amount  
 $5 \times \$15 \times 30 = \$2,250$  (liability amount)  
 $\$2,250 \times \$13.18 \text{ per } \$100 = \$296.55$

**(RULE 45) AUDIO, VISUAL, AND ELECTRONIC EQUIPMENT**

The charge for this coverage is \$9.00 per \$100 of valuation.

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**TRUCKS, TRACTORS, TRAILERS  
Rating Procedures**

COMPULSORY BODILY INJURY LIABILITY (Coverage A-1)

Refer to rate pages.

PERSONAL INJURY PROTECTION (Coverage A-2)

Refer to rate pages.

OPTIONAL BODILY INJURY LIABILITY (Coverage B)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the following formula:

$$(B, \text{incr}) = ((A-1) + (B, \text{basic})) \times \text{ILF} - [(A-1)]$$

where

B, incr denotes the Optional Bodily Injury Liability rate,

A-1 denotes the Compulsory Bodily Injury rate,

B, basic denotes the basic limits (20/40) Optional Bodily Injury Liability rate,

ILF denotes the appropriate Increased Limits Factor.

PROTECTION AGAINST UNINSURED AND UNDERINSURED MOTORISTS (Coverages U1 & U2)

Refer to rate pages.

PROPERTY DAMAGE LIABILITY (Coverage C)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the appropriate Increased Limits Factor to the basic limits rate shown on the rate pages.

MEDICAL PAYMENTS (Coverage D)

Refer to rate pages.

**Commercial Automobile Insurance Manual**

**TRUCKS, TRACTORS, TRAILERS  
Rating Procedures  
(Continued)**

COLLISION

Collision Deductibles: \$300, \$500, \$1000, \$2000, \$3000, \$4000, \$5000  
Refer to rate pages.

Collision Waiver of Deductible Charges  
Refer to rate pages.

LIMITED COLLISION

Limited Collision Deductible: \$300 Deductible or higher  
Refer to rate pages.

Limited Collision Deductible: \$0 Deductible  
Refer to rate pages.

OTHER THAN COLLISION

Comprehensive Fire, Theft and CAC Deductibles: \$300, \$500  
Refer to rate pages.

Comprehensive Deductibles: \$1000, \$2000, \$3000, \$4000, \$5000  
Refer to rate pages.

Specific Perils  
Refer to rate pages.

Other Than Collision Stated Amount Rating  
Refer to Rule 42.

Other Than Collision \$100 Glass Deductible Premiums  
Charge 89% of the otherwise determined premium that would apply in the absence of a glass deductible.

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

FLEET PRIMARY CLASSIFICATIONS  
RATING FACTORS AND STATISTICAL CODES

SIZE CLASS	BUSINESS USE CLASS	RADIUS CLASS						
		Local Up to 50 Miles		Intermediate 51-200 Miles		Long Distance Over 200 Miles		
		BI & PD	OTC & Coll	BI & PD	OTC & Coll	BI & PD	OTC & Coll	
Light Trucks (0-10,000 lbs. GVW)	Service	Factor Code	1.00 014--	1.00 014--	1.10 015--	1.15 015--	1.30 016--	1.20 016--
	Retail	Factor Code	1.40 024--	1.15 024--	1.55 025--	1.40 025--	1.80 026--	1.45 026--
	Commercial	Factor Code	1.60 034--	1.15 034--	1.45 035--	1.25 035--	2.10 036--	1.50 036--

							ZONE RATED	
Medium Trucks (10,001- 20,000 lbs. GVW)	Service	Factor Code	1.10 214--	.75 214--	1.10 215--	1.05 215--	.95 216--	.95 216--
	Retail	Factor Code	1.55 224--	.90 224--	2.60 225--	1.05 225--	.95 226--	.95 226--
	Commercial	Factor Code	1.60 234--	.95 234--	2.20 235--	1.00 235--	.95 236--	.95 236--

Heavy Trucks (20,001- 45,000 lbs. GVW)	Service	Factor Code	.90 314--	.60 314--	1.35 315--	.70 315--	1.00 316--	1.00 316--
	Retail	Factor Code	1.50 324--	.90 324--	2.20 325--	1.20 325--	1.00 326--	1.00 326--
	Commercial	Factor Code	1.60 334--	.80 334--	2.20 335--	1.30 335--	1.00 336--	1.00 336--

Extra-Heavy Trucks (Over 45,000 lbs. GVW)	Factor Code	1.75 404--	.90 404--	2.60 405--	1.45 405--	1.10 406--	1.10 406--
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Heavy Truck-Tractors (0-45,000 lbs. GCW)	Service	Factor Code	1.00 344--	.85 344--	1.50 345--	.95 345--	1.00 346--	1.00 346--
	Retail	Factor Code	1.80 354--	1.15 354--	2.80 355--	1.40 355--	1.00 356--	1.00 356--
	Commercial	Factor Code	1.80 364--	1.00 364--	2.30 365--	1.15 365--	1.00 366--	1.00 366--

Extra-Heavy Truck-Tractors (Over 45,000 lbs. GCW)	Factor Code	2.20 504--	1.55 504--	2.95 505--	1.35 505--	1.10 506--	1.10 506--
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TRAILER TYPES							
Semitrailers	Factor Code	.10 674--	.65 674--	.15 675--	.80 675--	.15 676--	1.00 676--
Trailers	Factor Code	.10 684--	.50 684--	.15 685--	.65 685--	.15 686--	1.00 686--
Service or Utility Trailers (0-2,000 lbs. Load Capacity)	Factor Code	0 694--	.30 694--	0 695--	.50 695--	0 696--	1.00 696--

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

NON-FLEET PRIMARY CLASSIFICATIONS  
RATING FACTORS AND STATISTICAL CODES

SIZE CLASS	BUSINESS USE CLASS	RADIUS CLASS						
		Local Up to 50 Miles		Intermediate 51-200 Miles		Long Distance Over 200 Miles		
		BI & PD	OTC & Coll	BI & PD	OTC & Coll	BI & PD	OTC & Coll	
Light Trucks (0-10,000 lbs. GVW)	Service	Factor Code	1.00 011--	1.00 011--	1.10 012--	1.15 012--	1.30 013--	1.20 013--
	Retail	Factor Code	1.40 021--	1.15 021--	1.55 022--	1.40 022--	1.80 023--	1.45 023--
	Commercial	Factor Code	1.60 031--	1.15 031--	1.45 032--	1.25 032--	2.10 033--	1.50 033--

							ZONE RATED	
Medium Trucks (10,001- 20,000 lbs. GVW)	Service	Factor Code	1.10 211--	.75 211--	1.10 212--	1.05 212--	.95 213--	.95 213--
	Retail	Factor Code	1.55 221--	.90 221--	2.60 222--	1.05 222--	.95 223--	.95 223--
	Commercial	Factor Code	1.60 231--	.95 231--	2.20 232--	1.00 232--	.95 233--	.95 233--

Heavy Trucks (20,001- 45,000 lbs. GVW)	Service	Factor Code	.90 311--	.60 311--	1.35 312--	.70 312--	1.00 313--	1.00 313--
	Retail	Factor Code	1.50 321--	.90 321--	2.20 322--	1.20 322--	1.00 323--	1.00 323--
	Commercial	Factor Code	1.60 331--	.80 331--	2.20 332--	1.30 332--	1.00 333--	1.00 333--

Extra-Heavy Trucks (Over 45,000 lbs. GVW)	Factor Code	1.75 401--	.90 401--	2.60 402--	1.45 402--	1.10 403--	1.10 403--
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Heavy Truck-Tractors (0-45,000 lbs. GCW)	Service	Factor Code	1.00 341--	.85 341--	1.50 342--	.95 342--	1.00 343--	1.00 343--
	Retail	Factor Code	1.80 351--	1.15 351--	2.80 352--	1.40 352--	1.00 353--	1.00 353--
	Commercial	Factor Code	1.80 361--	1.00 361--	2.30 362--	1.15 362--	1.00 363--	1.00 363--

Extra-Heavy Truck-Tractors (Over 45,000 lbs. GCW)	Factor Code	2.20 501--	1.55 501--	2.95 502--	1.35 502--	1.10 503--	1.10 503--
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TRAILER TYPES							
Semitrailers	Factor Code	.10 671--	.65 671--	.15 672--	.80 672--	.15 673--	1.00 673--
Trailers	Factor Code	.10 681--	.50 681--	.15 682--	.65 682--	.15 683--	1.00 683--
Service or Utility Trailers (0-2,000 lbs. Load Capacity)	Factor Code	0 691--	.30 691--	0 692--	.50 692--	0 693--	1.00 693--

**Commercial Automobile Insurance Manual**

Secondary Classification - Special Industry Class.

1. These classification and codes, but not the rating factors, apply to zone rated automobiles.
2. Where more than one secondary rating factor applies, classify the risk using the secondary classification with the largest secondary adjustment unless 80% or more of the use is in a single secondary classification with a lower secondary adjustment. In that case, classify the risk using the secondary classification associated with the smaller adjustment.

**Secondary Factor  
to be combined with  
Primary Factor**

<u>CLASSIFICATION</u>	Trailer Types, Light Trucks and Zone Rated <u>Automobiles</u>	All Other <u>Automobiles</u>	Code to be inserted in 4th and 5th Digit of <u>Classification Code</u>
<b>Manufacturers</b> —Automobiles used to transport raw materials and finished or unfinished goods manufactured, processed or constructed by the insured, except food manufacturers.			
a. Chemical Manufacturers - Those insureds manufacturing flammable, explosive, corrosive or poisonous chemicals.	0.00	-0.10	11
b. Furniture Manufacturers - Those insureds manufacturing household or office furniture and heavy appliances such as refrigerators, stoves and televisions.	0.00	-0.10	12
c. Garment Manufacturers - Those insureds in the wholesale manufacturing of outer garments, such as dresses, coats and suits.	0.00	-0.10	13
d. Machinery Manufacturers - Those insureds manufacturing machinery used for industrial purposes.	0.00	-0.10	14
e. Metal Manufacturers - Those insureds manufacturing metal products for industrial or construction utilization, other than structural iron or steel.	0.00	-0.10	15
f. Structural Iron or Steel Manufacturers.	0.00	-0.10	16
g. All Other Manufacturers Not Otherwise Classified.	0.00	-0.10	19



**Commercial Automobile Insurance Manual**

**Secondary Factor  
to be combined with  
Primary Factor**

		Trailer Types, Light Trucks and Zone Rated <u>Automobiles</u>	All Other <u>Automobiles</u>	Code to be inserted in 4th and 5th Digit of <u>Classification Code</u>
<b><u>CLASSIFICATION</u></b>				
<b>Truckers</b> —Automobiles used to haul or transport goods, materials or commodities for another, other than automobiles used in moving operations.				
a. Common Carriers	Local	0.00	+0.65	21
	Intermediate	0.00	+0.65	21
	Long Distance	0.00	+0.00	21
b. Contract Carriers (Other than Chemical, Iron and Steel or Petroleum Haulers)	Local	0.00	+0.65	22
	Intermediate	0.00	+0.65	22
	Long Distance	0.00	+0.00	22
c. Contract Carriers Hauling Chemicals	Local	0.00	+0.65	23
	Intermediate	0.00	+0.65	23
	Long Distance	0.00	+0.00	23
d. Contract Carriers Hauling Iron and Steel	Local	0.00	+0.65	24
	Intermediate	0.00	+0.65	24
	Long Distance	0.00	+0.00	24
e. Contract Carriers Hauling Petroleum or Petroleum Products	Local	0.00	+0.65	27
	Intermediate	0.00	+0.65	27
	Long Distance	0.00	+0.00	27
f. Exempt Carriers (Other Than Livestock Haulers)	Local	0.00	+0.65	25
	Intermediate	0.00	+0.65	25
	Long Distance	0.00	+0.00	25
g. Exempt Carriers Hauling Livestock	Local	0.00	+0.65	26
	Intermediate	0.00	+0.65	26
	Long Distance	0.00	+0.00	26
h. All Other	Local	0.00	+0.65	29
	Intermediate	0.00	+0.65	29
	Long Distance	0.00	+0.00	29

**Food Delivery**—Automobiles used by food manufacturers to transport raw and finished products or used in wholesale distribution of food.

a. Canneries and Packing Plants		0.00	+0.50	31
b. Fish and Seafood		0.00	+0.50	32
c. Frozen Food		0.00	+0.50	33
d. Fruit and Vegetable		0.00	+0.50	34
e. Meat or Poultry		0.00	+0.50	35
f. All Other		0.00	+0.50	39

Commercial Automobile Insurance Manual

Secondary Factor  
to be combined with  
Primary Factor

	Trailer Types, Light Service Trucks and Zone Rated <u>Automobiles</u>	All Other <u>Automobiles</u>	Code to be inserted in 4th and 5th Digit of <u>Classification Code</u>
<b>CLASSIFICATION</b>			
<b>Specialized Delivery</b> —Automobiles used in deliveries subject to time and similar constraints.			
a. Armored Cars	0.00	+0.40	41
b. Film Delivery	0.00	+0.40	42
c. Magazines or Newspapers	0.00	+0.40	43
d. Mail and Parcel Post	0.00	+0.40	44
e. All Other	0.00	+0.40	49

**Waste Disposal**—Automobiles transporting salvage and waste material for disposal or resale.

a. Automobile Dismantlers	0.00	0.00	51
b. Building Wrecking Operators	0.00	0.00	52
c. Garbage	0.00	0.00	53
d. Junk Dealers	0.00	0.00	54
e. All Other	0.00	0.00	59

	Trailer Types and Zone Rated <u>Automobiles</u>	All Other <u>Automobiles</u>	Code to be inserted in 4th and 5th Digit of <u>Classification Code</u>
<b>Farmers</b> —Automobiles owned by a farmer, used in connection with the operation of his own farm occasionally used to haul commodities for other farmers.			
a. Individually Owned or Family Corp. (Other Than Livestock Hauling)	0.00	-0.50	61
b. Livestock Hauling	0.00	-0.50	62
c. All Other	0.00	-0.50	69

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**Secondary Factor  
to be combined with  
Primary Factor**

Trailer Types, Light Service Trucks and Zone Rated <u>Automobiles</u>	All Other <u>Automobiles</u>	Code to be inserted in 4th and 5th Digit of <u>Classification Code</u>
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**CLASSIFICATION**

**Dump and Transit Mix Trucks and Trailers** (Use these factors and codes only when no other secondary classification applies.)

a. Excavating	0.00	-0.20	71
b. Sand and Gravel (Other Than Quarrying)	0.00	-0.20	72
c. Mining	0.00	-0.20	73
d. Quarrying	0.00	-0.20	74
e. All Other	0.00	-0.20	79

All Automobiles

**Contractors (Other Than Dump Trucks)**

a. Building - Commercial	0.00	81
b. Building - Private Dwellings	0.00	82
c. Electrical, Plumbing, Masonry, Plastering and Other Repair or Service	0.00	83
d. Excavating	0.00	84
e. Street and Road	0.00	85
f. All Other	0.00	89

**Not Otherwise Specified**

a. Logging and Lumbering	0.00	91
b. Petroleum Business - automobiles used to transport petroleum and petroleum products such as gasoline and fuel oil.	0.00	92
c. All Other	0.00	99

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**TRUCKS, TRACTORS, & TRAILERS**  
**Liability Rates - Light and Medium Trucks**

**FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
11	319	23	40	54	87	144	202	320	478	607	614	704	366	476	525	536	540	544
12	376	27	47	64	102	170	237	377	563	715	724	830	433	563	621	634	639	644
13	377	27	48	65	103	171	239	380	567	720	728	834	436	567	625	638	643	648
14	416	30	53	72	114	189	264	419	625	794	803	921	482	627	691	706	711	717
15	420	30	53	72	114	190	266	422	630	800	810	928	486	632	697	712	717	723
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	694	766	782	788	794
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	789	870	889	895	903
18	535	38	68	92	146	243	339	538	804	1021	1033	1184	623	810	893	912	919	926
19	606	43	76	103	165	274	383	608	908	1154	1167	1338	706	918	1012	1034	1041	1050
20	655	47	83	113	179	297	415	659	983	1249	1264	1448	765	995	1097	1120	1128	1138

**NON - FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1524	1681	1716	1729	1743
11	319	23	40	54	87	144	202	320	478	607	614	704	366	476	525	536	540	544
12	376	27	47	64	102	170	237	377	563	715	724	830	433	563	621	634	639	644
13	377	27	48	65	103	171	239	380	567	720	728	834	436	567	625	638	643	648
14	418	30	53	72	114	190	265	420	628	797	807	924	484	629	694	709	714	720
15	420	30	53	72	114	190	266	422	630	800	810	928	486	632	697	712	717	723
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	694	766	782	788	794
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	789	870	889	895	903
18	559	40	71	96	153	254	355	562	840	1066	1079	1237	652	848	935	955	962	970
19	640	46	81	110	175	290	405	643	961	1220	1235	1415	748	972	1073	1095	1103	1112
20	708	51	89	121	193	320	448	711	1061	1348	1364	1563	828	1076	1187	1212	1221	1231

All Territories				
Medical Payments		U-1		U-2
		Limit	Uninsured	Underinsured
5000	\$25			
10000	\$27			
		20/40	5	0
		20/50	6	0
		25/50	7	0
		35/80	8	4
		50/100	9	8
		100/300	10	25
		250/500	11	92
		500/500	15	249

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**TRUCKS, TRACTORS, & TRAILERS**  
**Liability Rates - Heavy Trucks and Heavy Truck Tractors**

**FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
11	319	23	40	54	87	144	202	320	478	607	614	704	366	481	549	576	600	674
12	376	27	47	64	102	170	237	377	563	715	724	830	433	569	650	681	709	797
13	377	27	48	65	103	171	239	380	567	720	728	834	436	572	654	686	714	803
14	416	30	53	72	114	189	264	419	625	794	803	921	482	633	723	758	790	887
15	420	30	53	72	114	190	266	422	630	800	810	928	486	638	729	764	796	895
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	701	802	840	875	983
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	797	911	955	994	1117
18	535	38	68	92	146	243	339	538	804	1021	1033	1184	623	818	935	980	1020	1147
19	606	43	76	103	165	274	383	608	908	1154	1167	1338	706	927	1060	1111	1156	1300
20	655	47	83	113	179	297	415	659	983	1249	1264	1448	765	1004	1148	1203	1253	1408

**NON - FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1539	1759	1844	1920	2158
11	319	23	40	54	87	144	202	320	478	607	614	704	366	481	549	576	600	674
12	376	27	47	64	102	170	237	377	563	715	724	830	433	569	650	681	709	797
13	377	27	48	65	103	171	239	380	567	720	728	834	436	572	654	686	714	803
14	418	30	53	72	114	190	265	420	628	797	807	924	484	635	726	761	793	891
15	420	30	53	72	114	190	266	422	630	800	810	928	486	638	729	764	796	895
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	701	802	840	875	983
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	797	911	955	994	1117
18	559	40	71	96	153	254	355	562	840	1066	1079	1237	652	856	979	1026	1068	1200
19	640	46	81	110	175	290	405	643	961	1220	1235	1415	748	982	1123	1177	1225	1377
20	708	51	89	121	193	320	448	711	1061	1348	1364	1563	828	1087	1243	1302	1356	1524

All Territories		
Medical Payments	U-1 Uninsured	U-2 Underinsured
5000 \$25	20/40 5	0
10000 \$27	20/50 6	0
	25/50 7	0
	35/80 8	4
	50/100 9	8
	100/300 10	25
	250/500 11	92
	500/500 15	249

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**TRUCKS, TRACTORS, & TRAILERS**  
**Liability Rates - Extra Heavy Trucks, Extra-Heavy Truck-Tractors,**  
**Trailers, and Semi-Trailers**

**FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
11	319	23	40	54	87	144	202	320	478	607	614	704	366	505	597	641	671	711
12	376	27	47	64	102	170	237	377	563	715	724	830	433	597	706	758	794	841
13	377	27	48	65	103	171	239	380	567	720	728	834	436	601	711	763	799	847
14	416	30	53	72	114	189	264	419	625	794	803	921	482	665	786	844	884	936
15	420	30	53	72	114	190	266	422	630	800	810	928	486	670	793	851	891	944
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	736	871	935	979	1037
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	837	990	1063	1113	1179
18	535	38	68	92	146	243	339	538	804	1021	1033	1184	623	859	1016	1091	1142	1210
19	606	43	76	103	165	274	383	608	908	1154	1167	1338	706	974	1151	1236	1294	1371
20	655	47	83	113	179	297	415	659	983	1249	1264	1448	765	1055	1248	1340	1402	1486

**NON - FLEET**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
2	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
3	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
4	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
5	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
6	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
7	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
8	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
9	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
10	997	71	126	171	272	452	631	1002	1496	1900	1923	2204	1172	1616	1912	2052	2148	2276
11	319	23	40	54	87	144	202	320	478	607	614	704	366	505	597	641	671	711
12	376	27	47	64	102	170	237	377	563	715	724	830	433	597	706	758	794	841
13	377	27	48	65	103	171	239	380	567	720	728	834	436	601	711	763	799	847
14	418	30	53	72	114	190	265	420	628	797	807	924	484	667	789	847	887	940
15	420	30	53	72	114	190	266	422	630	800	810	928	486	670	793	851	891	944
16	460	33	58	79	125	208	291	462	690	876	887	1016	534	736	871	935	979	1037
17	521	37	66	89	142	236	330	524	782	993	1005	1152	607	837	990	1063	1113	1179
18	559	40	71	96	153	254	355	562	840	1066	1079	1237	652	899	1063	1142	1195	1266
19	640	46	81	110	175	290	405	643	961	1220	1235	1415	748	1031	1220	1310	1371	1453
20	708	51	89	121	193	320	448	711	1061	1348	1364	1563	828	1142	1350	1450	1518	1608

All Territories			
Medical Payments	Limit	U-1	
		Uninsured	U-2 Underinsured
5000	\$25	20/40	5
10000	\$27	20/50	6
		25/50	7
		35/80	8
		50/100	9
		100/300	10
		250/500	11
		500/500	15









**TRUCKS, TRACTORS, TRAILERS**

**Physical Damage Coverages**

**Territory 4 - FLEET**

Original Cost (Complete Automobile Chassis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	99	94	152	147	500	476	433	362	309	271	243	625	595	541	453	386	339	304
	2,3		99	94	152	147	479	456	415	347	296	260	233	599	570	519	434	370	325	291
	4,5 6-9		99	94	152	147	461	439	399	334	285	250	224	576	549	499	418	356	313	280
4,501 - 6,000	1	2	105	100	161	156	521	496	451	377	322	283	253	651	620	564	471	403	354	316
	2,3		105	100	161	156	498	474	431	360	308	270	242	623	593	539	450	385	338	303
	4,5 6-9		105	100	161	156	479	456	415	347	296	260	233	599	570	519	434	370	325	291
6,001 - 8,000	1	3	105	100	161	156	592	564	513	429	367	321	288	740	705	641	536	459	401	360
	2,3		105	100	161	156	565	538	490	409	350	307	274	706	673	613	511	438	384	343
	4,5 6-9		105	100	161	156	541	515	469	391	335	294	263	676	644	586	489	419	368	329
8,001 - 10,000	1	4	142	137	220	214	845	805	733	612	523	459	411	1056	1006	916	765	654	574	514
	2,3		142	137	220	214	801	763	694	580	496	435	389	1001	954	868	725	620	544	486
	4,5 6-9		142	137	220	214	763	727	662	553	473	414	371	954	909	828	691	591	518	464
10,001 - 15,000	1	5	195	189	305	296	1191	1134	1032	862	737	646	578	1489	1418	1290	1078	921	808	723
	2,3		195	189	305	296	1124	1070	974	813	696	610	546	1405	1338	1218	1016	870	763	683
	4,5 6-9		195	189	305	296	1067	1016	925	772	660	579	518	1334	1270	1156	965	825	724	648
15,001 - 20,000	1	6	259	251	404	392	1881	1791	1630	1361	1164	1021	913	2351	2239	2038	1701	1455	1276	1141
	2,3		259	251	404	392	1769	1685	1533	1281	1095	960	859	2211	2106	1916	1601	1369	1200	1074
	4,5 6-9		259	251	404	392	1673	1593	1450	1211	1035	908	812	2091	1991	1813	1514	1294	1135	1015
20,001 - 25,000	1	7	279	271	437	424	2296	2187	1990	1662	1422	1247	1115	2870	2734	2488	2078	1778	1559	1394
	2,3		279	271	437	424	2158	2055	1870	1562	1336	1171	1048	2698	2569	2338	1953	1670	1464	1310
	4,5 6-9		279	271	437	424	2039	1942	1767	1476	1262	1107	990	2549	2428	2209	1845	1578	1384	1238
25,001 - 40,000	1	8	312	303	488	474	2611	2487	2263	1890	1617	1418	1268	3264	3109	2829	2363	2021	1773	1585
	2,3		312	303	488	474	2452	2335	2125	1775	1518	1331	1191	3065	2919	2656	2219	1898	1664	1489
	4,5 6-9		312	303	488	474	2315	2205	2007	1676	1433	1257	1125	2894	2756	2509	2095	1791	1571	1406
40,001 - 65,000	1	10	367	356	573	556	3373	3212	2923	2441	2088	1831	1638	4216	4015	3654	3051	2610	2289	2048
	2,3		367	356	573	556	3163	3012	2741	2289	1958	1717	1536	3954	3765	3426	2861	2448	2146	1920
	4,5 6-9		367	356	573	556	2984	2842	2586	2160	1847	1620	1449	3730	3553	3233	2700	2309	2025	1811
65,001 - 90,000	1	11	400	388	624	606	3677	3502	3187	2662	2276	1996	1786	4596	4378	3984	3328	2845	2495	2233
	2,3		400	388	624	606	3447	3283	2988	2495	2134	1871	1674	4309	4104	3735	3119	2668	2339	2093
	4,5 6-9		400	388	624	606	3251	3096	2817	2353	2012	1765	1579	4064	3870	3521	2941	2515	2206	1974
Charge per \$1000 over \$90,000	1	12	1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	2,3		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	4,5 6-9		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

**COLLISION - WAIVER OF DEDUCTIBLE**

\$ 300 Deductible	\$ 30
\$ 500 Deductible	\$ 37
\$1000 Deductible	\$ 66
\$2000 Deductible	\$104
\$3000 Deductible	\$130
\$4000 Deductible	\$149
\$5000 Deductible	\$164

**Higher Deductibles for Comprehensive & Fire, Theft, and CAC.**

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

**LIMITED COLLISION**

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$30  
to the \$300 Ded Limited Collision Rate.

**TRUCKS, TRACTORS, TRAILERS**

**Physical Damage Coverages**

**Territory 5 - FLEET**

Original Cost (Complete Automobile Chassis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	99	94	152	147	500	476	433	362	309	271	243	625	595	541	453	386	339	304
	2,3		99	94	152	147	479	456	415	347	296	260	233	599	570	519	434	370	325	291
	4,5 6-9		99	94	152	147	461	439	399	334	285	250	224	576	549	499	418	356	313	280
4,501 - 6,000	1	2	105	100	161	156	521	496	451	377	322	283	253	651	620	564	471	403	354	316
	2,3		105	100	161	156	498	474	431	360	308	270	242	623	593	539	450	385	338	303
	4,5 6-9		105	100	161	156	479	456	415	347	296	260	233	599	570	519	434	370	325	291
6,001 - 8,000	1	3	105	100	161	156	592	564	513	429	367	321	288	740	705	641	536	459	401	360
	2,3		105	100	161	156	565	538	490	409	350	307	274	706	673	613	511	438	384	343
	4,5 6-9		105	100	161	156	541	515	469	391	335	294	263	676	644	586	489	419	368	329
8,001 - 10,000	1	4	142	137	220	214	845	805	733	612	523	459	411	1056	1006	916	765	654	574	514
	2,3		142	137	220	214	801	763	694	580	496	435	389	1001	954	868	725	620	544	486
	4,5 6-9		142	137	220	214	763	727	662	553	473	414	371	954	909	828	691	591	518	464
10,001 - 15,000	1	5	195	189	305	296	1191	1134	1032	862	737	646	578	1489	1418	1290	1078	921	808	723
	2,3		195	189	305	296	1124	1070	974	813	696	610	546	1405	1338	1218	1016	870	763	683
	4,5 6-9		195	189	305	296	1067	1016	925	772	660	579	518	1334	1270	1156	965	825	724	648
15,001 - 20,000	1	6	259	251	404	392	1881	1791	1630	1361	1164	1021	913	2351	2239	2038	1701	1455	1276	1141
	2,3		259	251	404	392	1769	1685	1533	1281	1095	960	859	2211	2106	1916	1601	1369	1200	1074
	4,5 6-9		259	251	404	392	1673	1593	1450	1211	1035	908	812	2091	1991	1813	1514	1294	1135	1015
20,001 - 25,000	1	7	279	271	437	424	2296	2187	1990	1662	1422	1247	1115	2870	2734	2488	2078	1778	1559	1394
	2,3		279	271	437	424	2158	2055	1870	1562	1336	1171	1048	2698	2569	2338	1953	1670	1464	1310
	4,5 6-9		279	271	437	424	2039	1942	1767	1476	1262	1107	990	2549	2428	2209	1845	1578	1384	1238
25,001 - 40,000	1	8	312	303	488	474	2611	2487	2263	1890	1617	1418	1268	3264	3109	2829	2363	2021	1773	1585
	2,3		312	303	488	474	2452	2335	2125	1775	1518	1331	1191	3065	2919	2656	2219	1898	1664	1489
	4,5 6-9		312	303	488	474	2315	2205	2007	1676	1433	1257	1125	2894	2756	2509	2095	1791	1571	1406
40,001 - 65,000	1	10	367	356	573	556	3373	3212	2923	2441	2088	1831	1638	4216	4015	3654	3051	2610	2289	2048
	2,3		367	356	573	556	3163	3012	2741	2289	1958	1717	1536	3954	3765	3426	2861	2448	2146	1920
	4,5 6-9		367	356	573	556	2984	2842	2586	2160	1847	1620	1449	3730	3553	3233	2700	2309	2025	1811
65,001 - 90,000	1	11	400	388	624	606	3677	3502	3187	2662	2276	1996	1786	4596	4378	3984	3328	2845	2495	2233
	2,3		400	388	624	606	3447	3283	2988	2495	2134	1871	1674	4309	4104	3735	3119	2668	2339	2093
	4,5 6-9		400	388	624	606	3251	3096	2817	2353	2012	1765	1579	4064	3870	3521	2941	2515	2206	1974
Charge per \$1000 over \$90,000	1	12	1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	2,3		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	4,5 6-9		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

\$ 300 Deductible	\$ 30
\$ 500 Deductible	\$ 37
\$1000 Deductible	\$ 66
\$2000 Deductible	\$104
\$3000 Deductible	\$130
\$4000 Deductible	\$149
\$5000 Deductible	\$164

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

LIMITED COLLISION

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$30  
to the \$300 Ded Limited Collision Rate.

**TRUCKS, TRACTORS, TRAILERS  
Physical Damage Coverages**

**Territory 6 - FLEET**

Original Cost (Complete Automobile Chassis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS						TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS							
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES						DEDUCTIBLES							
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	99	94	152	147	500	476	433	362	309	271	243	625	595	541	453	386	339	304
	2,3		99	94	152	147	479	456	415	347	296	260	233	599	570	519	434	370	325	291
	4,5 6-9		99	94	152	147	461	439	399	334	285	250	224	576	549	499	418	356	313	280
4,501 - 6,000	1	2	105	100	161	156	521	496	451	377	322	283	253	651	620	564	471	403	354	316
	2,3		105	100	161	156	498	474	431	360	308	270	242	623	593	539	450	385	338	303
	4,5 6-9		105	100	161	156	479	456	415	347	296	260	233	599	570	519	434	370	325	291
6,001 - 8,000	1	3	105	100	161	156	592	564	513	429	367	321	288	740	705	641	536	459	401	360
	2,3		105	100	161	156	565	538	490	409	350	307	274	706	673	613	511	438	384	343
	4,5 6-9		105	100	161	156	541	515	469	391	335	294	263	676	644	586	489	419	368	329
8,001 - 10,000	1	4	142	137	220	214	845	805	733	612	523	459	411	1056	1006	916	765	654	574	514
	2,3		142	137	220	214	801	763	694	580	496	435	389	1001	954	868	725	620	544	486
	4,5 6-9		142	137	220	214	763	727	662	553	473	414	371	954	909	828	691	591	518	464
10,001 - 15,000	1	5	195	189	305	296	1191	1134	1032	862	737	646	578	1489	1418	1290	1078	921	808	723
	2,3		195	189	305	296	1124	1070	974	813	696	610	546	1405	1338	1218	1016	870	763	683
	4,5 6-9		195	189	305	296	1067	1016	925	772	660	579	518	1334	1270	1156	965	825	724	648
15,001 - 20,000	1	6	259	251	404	392	1881	1791	1630	1361	1164	1021	913	2351	2239	2038	1701	1455	1276	1141
	2,3		259	251	404	392	1769	1685	1533	1281	1095	960	859	2211	2106	1916	1601	1369	1200	1074
	4,5 6-9		259	251	404	392	1673	1593	1450	1211	1035	908	812	2091	1991	1813	1514	1294	1135	1015
20,001 - 25,000	1	7	279	271	437	424	2296	2187	1990	1662	1422	1247	1115	2870	2734	2488	2078	1778	1559	1394
	2,3		279	271	437	424	2158	2055	1870	1562	1336	1171	1048	2698	2569	2338	1953	1670	1464	1310
	4,5 6-9		279	271	437	424	2039	1942	1767	1476	1262	1107	990	2549	2428	2209	1845	1578	1384	1238
25,001 - 40,000	1	8	312	303	488	474	2611	2487	2263	1890	1617	1418	1268	3264	3109	2829	2363	2021	1773	1585
	2,3		312	303	488	474	2452	2335	2125	1775	1518	1331	1191	3065	2919	2656	2219	1898	1664	1489
	4,5 6-9		312	303	488	474	2315	2205	2007	1676	1433	1257	1125	2894	2756	2509	2095	1791	1571	1406
40,001 - 65,000	1	10	367	356	573	556	3373	3212	2923	2441	2088	1831	1638	4216	4015	3654	3051	2610	2289	2048
	2,3		367	356	573	556	3163	3012	2741	2289	1958	1717	1536	3954	3765	3426	2861	2448	2146	1920
	4,5 6-9		367	356	573	556	2984	2842	2586	2160	1847	1620	1449	3730	3553	3233	2700	2309	2025	1811
65,001 - 90,000	1	11	400	388	624	606	3677	3502	3187	2662	2276	1996	1786	4596	4378	3984	3328	2845	2495	2233
	2,3		400	388	624	606	3447	3283	2988	2495	2134	1871	1674	4309	4104	3735	3119	2668	2339	2093
	4,5 6-9		400	388	624	606	3251	3096	2817	2353	2012	1765	1579	4064	3870	3521	2941	2515	2206	1974
Charge per \$1000 over \$90,000	1	12	1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	2,3		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	4,5 6-9		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

\$ 300 Deductible	\$ 30
\$ 500 Deductible	\$ 37
\$1000 Deductible	\$ 66
\$2000 Deductible	\$104
\$3000 Deductible	\$130
\$4000 Deductible	\$149
\$5000 Deductible	\$164

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

LIMITED COLLISION

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$30  
to the \$300 Ded Limited Collision Rate.

TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 7 - FLEET

Table with columns: Original Cost (Complete Automobile Chassis & Body), Age Group (Code), Original Cost New (Code), OTHER THAN COLLISION (ALL VEHICLES, TRUCKS, DEDUCTIBLES), COLLISION (TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS, DEDUCTIBLES).

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

Table mapping Deductible amounts to charges: \$ 300 Deductible \$ 30, \$ 500 Deductible \$ 37, \$1000 Deductible \$ 66, \$2000 Deductible \$104, \$3000 Deductible \$130, \$4000 Deductible \$149, \$5000 Deductible \$164.

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

Table mapping Deductible amounts to Charge this % of \$500 Ded. Premium: \$1000 Ded. - 95%, \$2000 Ded. - 89%, \$3000 Ded. - 85%, \$4000 Ded. - 82%, \$5000 Ded. - 80%.

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$30 to the \$300 Ded Limited Collision Rate.



**TRUCKS, TRACTORS, TRAILERS**

**Physical Damage Coverages**

**Territory 9 - FLEET**

Original Cost (Complete Automobile Chassis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	99	94	152	147	500	476	433	362	309	271	243	625	595	541	453	386	339	304
	2,3		99	94	152	147	479	456	415	347	296	260	233	599	570	519	434	370	325	291
	4,5 6-9		99	94	152	147	461	439	399	334	285	250	224	576	549	499	418	356	313	280
4,501 - 6,000	1	2	105	100	161	156	521	496	451	377	322	283	253	651	620	564	471	403	354	316
	2,3		105	100	161	156	498	474	431	360	308	270	242	623	593	539	450	385	338	303
	4,5 6-9		105	100	161	156	479	456	415	347	296	260	233	599	570	519	434	370	325	291
6,001 - 8,000	1	3	105	100	161	156	592	564	513	429	367	321	288	740	705	641	536	459	401	360
	2,3		105	100	161	156	565	538	490	409	350	307	274	706	673	613	511	438	384	343
	4,5 6-9		105	100	161	156	541	515	469	391	335	294	263	676	644	586	489	419	368	329
8,001 - 10,000	1	4	142	137	220	214	845	805	733	612	523	459	411	1056	1006	916	765	654	574	514
	2,3		142	137	220	214	801	763	694	580	496	435	389	1001	954	868	725	620	544	486
	4,5 6-9		142	137	220	214	763	727	662	553	473	414	371	954	909	828	691	591	518	464
10,001 - 15,000	1	5	195	189	305	296	1191	1134	1032	862	737	646	578	1489	1418	1290	1078	921	808	723
	2,3		195	189	305	296	1124	1070	974	813	696	610	546	1405	1338	1218	1016	870	763	683
	4,5 6-9		195	189	305	296	1067	1016	925	772	660	579	518	1334	1270	1156	965	825	724	648
15,001 - 20,000	1	6	259	251	404	392	1881	1791	1630	1361	1164	1021	913	2351	2239	2038	1701	1455	1276	1141
	2,3		259	251	404	392	1769	1685	1533	1281	1095	960	859	2211	2106	1916	1601	1369	1200	1074
	4,5 6-9		259	251	404	392	1673	1593	1450	1211	1035	908	812	2091	1991	1813	1514	1294	1135	1015
20,001 - 25,000	1	7	279	271	437	424	2296	2187	1990	1662	1422	1247	1115	2870	2734	2488	2078	1778	1559	1394
	2,3		279	271	437	424	2158	2055	1870	1562	1336	1171	1048	2698	2569	2338	1953	1670	1464	1310
	4,5 6-9		279	271	437	424	2039	1942	1767	1476	1262	1107	990	2549	2428	2209	1845	1578	1384	1238
25,001 - 40,000	1	8	312	303	488	474	2611	2487	2263	1890	1617	1418	1268	3264	3109	2829	2363	2021	1773	1585
	2,3		312	303	488	474	2452	2335	2125	1775	1518	1331	1191	3065	2919	2656	2219	1898	1664	1489
	4,5 6-9		312	303	488	474	2315	2205	2007	1676	1433	1257	1125	2894	2756	2509	2095	1791	1571	1406
40,001 - 65,000	1	10	367	356	573	556	3373	3212	2923	2441	2088	1831	1638	4216	4015	3654	3051	2610	2289	2048
	2,3		367	356	573	556	3163	3012	2741	2289	1958	1717	1536	3954	3765	3426	2861	2448	2146	1920
	4,5 6-9		367	356	573	556	2984	2842	2586	2160	1847	1620	1449	3730	3553	3233	2700	2309	2025	1811
65,001 - 90,000	1	11	400	388	624	606	3677	3502	3187	2662	2276	1996	1786	4596	4378	3984	3328	2845	2495	2233
	2,3		400	388	624	606	3447	3283	2988	2495	2134	1871	1674	4309	4104	3735	3119	2668	2339	2093
	4,5 6-9		400	388	624	606	3251	3096	2817	2353	2012	1765	1579	4064	3870	3521	2941	2515	2206	1974
Charge per \$1000 over \$90,000	1	12	1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	2,3		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40
	4,5 6-9		1.11	1.08	1.73	1.68	23.71	22.58	20.55	17.16	14.68	11.71	11.52	29.64	28.23	25.69	21.45	18.35	14.64	14.40

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

\$ 300 Deductible	\$ 30
\$ 500 Deductible	\$ 37
\$1000 Deductible	\$ 66
\$2000 Deductible	\$104
\$3000 Deductible	\$130
\$4000 Deductible	\$149
\$5000 Deductible	\$164

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

LIMITED COLLISION

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$30  
to the \$300 Ded Limited Collision Rate.





TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 11 - FLEET

Table with columns for Original Cost, Age Group, Original Cost New, and various coverage categories (OTHER THAN COLLISION, COLLISION, TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS) with sub-columns for deductibles.

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

- \$ 300 Deductible \$ 10
\$ 500 Deductible \$ 12
\$1000 Deductible \$ 21
\$2000 Deductible \$ 34
\$3000 Deductible \$ 42
\$4000 Deductible \$ 48
\$5000 Deductible \$ 53

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

- \$1000 Ded. - Charge this % of \$500 Ded. Premium: 95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium: 89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium: 85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium: 82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium: 80%

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$10 to the \$300 Ded Limited Collision Rate.



**TRUCKS, TRACTORS, TRAILERS**

**Physical Damage Coverages**

**Territory 13 - FLEET**

Original Cost (Complete Automobile Chassis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	74	69	113	108	297	283	258	215	184	161	144	371	354	323	269	230	201	180
	2,3		74	69	113	108	289	275	250	209	179	157	140	361	344	313	261	224	196	175
	4,5		74	69	113	108	282	269	245	204	175	153	137	353	336	306	255	219	191	171
	6-9		65	60	98	93	239	228	207	173	148	130	116	299	285	259	216	185	163	145
4,501 - 6,000	1	2	78	73	119	114	305	290	264	220	189	165	148	381	363	330	275	236	206	185
	2,3		78	73	119	114	296	282	257	214	183	161	144	370	353	321	268	229	201	180
	4,5		78	73	119	114	289	275	250	209	179	157	140	361	344	313	261	224	196	175
	6-9		67	62	102	97	243	231	210	176	150	132	118	304	289	263	220	188	165	148
6,001 - 8,000	1	3	78	73	119	114	331	315	287	239	205	180	161	414	394	359	299	256	225	201
	2,3		78	73	119	114	320	305	278	232	198	174	156	400	381	348	290	248	218	195
	4,5		78	73	119	114	312	297	270	226	193	169	151	390	371	338	283	241	211	189
	6-9		67	62	102	97	257	245	223	186	159	140	125	321	306	279	233	199	175	156
8,001 - 10,000	1	4	99	94	152	147	425	405	369	308	263	231	207	531	506	461	385	329	289	259
	2,3		99	94	152	147	410	390	355	296	254	222	199	513	488	444	370	318	278	249
	4,5		99	94	152	147	395	376	342	286	244	214	192	494	470	428	358	305	268	240
	6-9		82	77	126	121	307	292	266	222	190	166	149	384	365	333	278	238	208	186
10,001 - 15,000	1	5	129	124	200	194	554	528	480	401	343	301	269	693	660	600	501	429	376	336
	2,3		129	124	200	194	530	505	460	384	328	288	258	663	631	575	480	410	360	323
	4,5		129	124	200	194	508	484	440	368	315	276	247	635	605	550	460	394	345	309
	6-9		104	99	159	154	374	356	324	271	231	203	182	468	445	405	339	289	254	228
15,001 - 20,000	1	6	165	160	258	250	813	774	704	588	503	441	395	1016	968	880	735	629	551	494
	2,3		165	160	258	250	771	734	668	558	477	418	374	964	918	835	698	596	523	468
	4,5		165	160	258	250	735	700	637	532	455	399	357	919	875	796	665	569	499	446
	6-9		129	124	200	194	509	485	441	369	315	276	247	636	606	551	461	394	345	309
20,001 - 25,000	1	7	177	172	276	268	968	922	839	701	599	526	470	1210	1153	1049	876	749	658	588
	2,3		177	172	276	268	916	872	794	663	567	497	445	1145	1090	993	829	709	621	556
	4,5		177	172	276	268	872	830	755	631	540	473	423	1090	1038	944	789	675	591	529
	6-9		137	132	212	206	590	562	511	427	365	320	287	738	703	639	534	456	400	359
25,001 - 40,000	1	8	196	190	306	297	1086	1034	941	786	672	589	527	1358	1293	1176	983	840	736	659
	2,3		196	190	306	297	1026	977	889	743	635	557	498	1283	1221	1111	929	794	696	623
	4,5		196	190	306	297	974	928	844	705	603	529	473	1218	1160	1055	881	754	661	591
	6-9		150	145	234	227	652	621	565	472	404	354	317	815	776	706	590	505	443	396
40,001 - 65,000	1	10	228	221	355	345	1369	1304	1187	991	848	743	665	1711	1630	1484	1239	1060	929	831
	2,3		228	221	355	345	1292	1230	1119	935	800	701	627	1615	1538	1399	1169	1000	876	784
	4,5		228	221	355	345	1224	1166	1061	886	758	665	595	1530	1458	1326	1108	948	831	744
	6-9		172	167	269	261	800	762	693	579	495	434	389	1000	953	866	724	619	543	486
65,001 - 90,000	1	11	246	239	385	374	1484	1413	1286	1074	918	805	721	1855	1766	1608	1343	1148	1006	901
	2,3		246	239	385	374	1398	1331	1211	1012	865	759	679	1748	1664	1514	1265	1081	949	849
	4,5		246	239	385	374	1324	1261	1148	958	820	719	643	1655	1576	1435	1198	1025	899	804
	6-9		185	180	289	281	860	819	745	622	532	467	418	1075	1024	931	778	665	584	523
Charge per \$1000 over \$90,000	1	12	0.64	0.62	1.00	0.97	8.86	8.43	7.68	6.41	5.48	4.37	4.30	11.07	10.54	9.59	8.01	6.85	5.47	5.38
	2,3		0.64	0.62	1.00	0.97	8.86	8.43	7.68	6.41	5.48	4.37	4.30	11.07	10.54	9.59	8.01	6.85	5.47	5.38
	4,5		0.64	0.62	1.00	0.97	8.86	8.43	7.68	6.41	5.48	4.37	4.30	11.07	10.54	9.59	8.01	6.85	5.47	5.38
	6-9		0.64	0.62	1.00	0.97	8.86	8.43	7.68	6.41	5.48	4.37	4.30	11.07	10.54	9.59	8.01	6.85	5.47	5.38

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

**COLLISION - WAIVER OF DEDUCTIBLE**

- \$ 300 Deductible \$ 11
- \$ 500 Deductible \$ 14
- \$1000 Deductible \$ 24
- \$2000 Deductible \$ 39
- \$3000 Deductible \$ 48
- \$4000 Deductible \$ 56
- \$5000 Deductible \$ 61

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

- \$1000 Ded. - Charge this % of \$500 Ded. Premium: 95%
- \$2000 Ded. - Charge this % of \$500 Ded. Premium: 89%
- \$3000 Ded. - Charge this % of \$500 Ded. Premium: 85%
- \$4000 Ded. - Charge this % of \$500 Ded. Premium: 82%
- \$5000 Ded. - Charge this % of \$500 Ded. Premium: 80%

**LIMITED COLLISION**

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$11  
to the \$300 Ded Limited Collision Rate.



TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 15 - FLEET

Table with columns for Original Cost, Age Group, Original Cost New, OTHER THAN COLLISION (ALL VEHICLES, TRUCKS), and COLLISION (TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS). Rows represent cost brackets from \$0 to \$90,000 plus a charge per \$1000 over \$90,000.

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

Table listing deductible amounts and their corresponding charges: \$ 300 Deductible \$ 11, \$ 500 Deductible \$ 14, \$1000 Deductible \$ 25, \$2000 Deductible \$ 40, \$3000 Deductible \$ 49, \$4000 Deductible \$ 56, \$5000 Deductible \$ 62.

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

Table showing premium percentages for higher deductibles: \$1000 Ded. - Charge this % of \$500 Ded. Premium: 95%, \$2000 Ded. - Charge this % of \$500 Ded. Premium: 89%, \$3000 Ded. - Charge this % of \$500 Ded. Premium: 85%, \$4000 Ded. - Charge this % of \$500 Ded. Premium: 82%, \$5000 Ded. - Charge this % of \$500 Ded. Premium: 80%.

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$11 to the \$300 Ded Limited Collision Rate.















TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 2 - NON-FLEET

Table with columns for Original Cost, Age Group, Original Cost New, OTHER THAN COLLISION (ALL VEHICLES, TRUCKS), and COLLISION (TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS). Rows represent cost ranges from \$0-4,500 to Charge per \$1000 over \$90,000.

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

Table listing deductible amounts and their corresponding charges: \$300 Deductible \$30, \$500 Deductible \$37, \$1000 Deductible \$66, \$2000 Deductible \$104, \$3000 Deductible \$130, \$4000 Deductible \$149, \$5000 Deductible \$164.

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

Table showing premium percentages for various deductible amounts: \$1000 Ded. - 95%, \$2000 Ded. - 89%, \$3000 Ded. - 85%, \$4000 Ded. - 82%, \$5000 Ded. - 80%.

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$30 to the \$300 Ded Limited Collision Rate.

















TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 10 - NON-FLEET

Table with columns for Original Cost, Age Group, Original Cost New, OTHER THAN COLLISION (ALL VEHICLES, TRUCKS), and COLLISION (TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS). Rows represent various cost brackets from \$0 to \$90,000.

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

Table showing deductible amounts and corresponding charges: \$300 Deductible (\$30), \$500 Deductible (\$37), \$1000 Deductible (\$66), \$2000 Deductible (\$104), \$3000 Deductible (\$130), \$4000 Deductible (\$149), \$5000 Deductible (\$164).

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

Table showing premium percentages for higher deductibles: \$1000 Ded. (95%), \$2000 Ded. (89%), \$3000 Ded. (85%), \$4000 Ded. (82%), \$5000 Ded. (80%).

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$30 to the \$300 Ded Limited Collision Rate.





**TRUCKS, TRACTORS, TRAILERS**  
**Physical Damage Coverages**

**Territory 13 - NON-FLEET**

Original Cost (Complete Automobile Chasis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS &VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1	1	74	69	113	108	297	283	258	215	184	161	144	371	354	323	269	230	201	180
	2,3		74	69	113	108	290	276	251	210	179	157	141	363	345	314	263	224	196	176
	4,5		74	69	113	108	282	269	245	204	175	153	137	353	336	306	255	219	191	171
	6-9		65	60	98	93	239	228	207	173	148	130	116	299	285	259	216	185	163	145
4,501 - 6,000	1	2	78	73	119	114	306	291	265	221	189	166	148	383	364	331	276	236	208	185
	2,3		78	73	119	114	297	283	258	215	184	161	144	371	354	323	269	230	201	180
	4,5		78	73	119	114	290	276	251	210	179	157	141	363	345	314	263	224	196	176
	6-9		67	62	102	97	244	232	211	176	151	132	118	305	290	264	220	189	165	148
6,001 - 8,000	1	3	78	73	119	114	332	316	288	240	205	180	161	415	395	360	300	256	225	201
	2,3		78	73	119	114	321	306	278	233	199	174	156	401	383	348	291	249	218	195
	4,5		78	73	119	114	313	298	271	226	194	170	152	391	373	339	283	243	213	190
	6-9		67	62	102	97	257	245	223	186	159	140	125	321	306	279	233	199	175	156
8,001 - 10,000	1	4	99	94	152	147	427	407	370	309	265	232	208	534	509	463	386	331	290	260
	2,3		99	94	152	147	411	391	356	297	254	223	199	514	489	445	371	318	279	249
	4,5		99	94	152	147	397	378	344	287	246	215	193	496	473	430	359	308	269	241
	6-9		82	77	126	121	308	293	267	223	190	167	149	385	366	334	279	238	209	186
10,001 - 15,000	1	5	129	124	200	194	558	531	483	404	345	303	271	698	664	604	505	431	379	339
	2,3		129	124	200	194	532	507	461	385	330	289	259	665	634	576	481	413	361	324
	4,5		129	124	200	194	511	487	443	370	317	278	248	639	609	554	463	396	348	310
	6-9		104	99	159	154	375	357	325	271	232	203	182	469	446	406	339	290	254	228
15,001 - 20,000	1	6	165	160	258	250	817	778	708	591	506	443	397	1021	973	885	739	633	554	496
	2,3		165	160	258	250	775	738	672	561	480	421	376	969	923	840	701	600	526	470
	4,5		165	160	258	250	739	704	641	535	458	401	359	924	880	801	669	573	501	449
	6-9		129	124	200	194	511	487	443	370	317	278	248	639	609	554	463	396	348	310
20,001 - 25,000	1	7	177	172	276	268	973	927	844	705	603	528	473	1216	1159	1055	881	754	660	591
	2,3		177	172	276	268	921	877	798	667	570	500	447	1151	1096	998	834	713	625	559
	4,5		177	172	276	268	877	835	760	635	543	476	426	1096	1044	950	794	679	595	533
	6-9		137	132	212	206	593	565	514	429	367	322	288	741	706	643	536	459	403	360
25,001 - 40,000	1	8	196	190	306	297	1092	1040	946	790	676	593	530	1365	1300	1183	988	845	741	663
	2,3		196	190	306	297	1032	983	895	747	639	560	501	1290	1229	1119	934	799	700	626
	4,5		196	190	306	297	981	934	850	710	607	532	476	1226	1168	1063	888	759	665	595
	6-9		150	145	234	227	655	624	568	474	406	356	318	819	780	710	593	508	445	398
40,001 - 65,000	1	10	228	221	355	345	1379	1313	1195	998	853	748	670	1724	1641	1494	1248	1066	935	838
	2,3		228	221	355	345	1299	1237	1126	940	804	705	631	1624	1546	1408	1175	1005	881	789
	4,5		228	221	355	345	1232	1173	1067	891	762	669	598	1540	1466	1334	1114	953	836	748
	6-9		172	167	269	261	805	767	698	583	499	437	391	1006	959	873	729	624	546	489
65,001 - 90,000	1	11	246	239	385	374	1493	1422	1294	1081	924	811	725	1866	1778	1618	1351	1155	1014	906
	2,3		246	239	385	374	1406	1339	1218	1018	870	763	683	1758	1674	1523	1273	1088	954	854
	4,5		246	239	385	374	1332	1269	1155	964	825	723	647	1665	1586	1444	1205	1031	904	809
	6-9		185	180	289	281	865	824	750	626	536	470	420	1081	1030	938	783	670	588	525
Charge per \$1000 over \$90,000	1	12	0.64	0.62	1.00	0.97	8.92	8.49	7.73	6.46	5.52	4.84	4.33	11.15	10.62	9.66	8.07	6.90	6.05	5.42
	2,3		0.64	0.62	1.00	0.97	8.92	8.49	7.73	6.46	5.52	4.84	4.33	11.15	10.62	9.66	8.07	6.90	6.05	5.42
	4,5		0.64	0.62	1.00	0.97	8.92	8.49	7.73	6.46	5.52	4.84	4.33	11.15	10.62	9.66	8.07	6.90	6.05	5.42
	6-9		0.64	0.62	1.00	0.97	8.92	8.49	7.73	6.46	5.52	4.84	4.33	11.15	10.62	9.66	8.07	6.90	6.05	5.42

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

**COLLISION - WAIVER OF DEDUCTIBLE**

\$ 300 Deductible	\$ 11
\$ 500 Deductible	\$ 14
\$1000 Deductible	\$ 25
\$2000 Deductible	\$ 39
\$3000 Deductible	\$ 49
\$4000 Deductible	\$ 56
\$5000 Deductible	\$ 62

**Higher Deductibles for Comprehensive & Fire, Theft, and CAC.**

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

**LIMITED COLLISION**

Any Deductible - Charge 10.0%  
of Comparable Collision Rate  
(after primary and secondary rating factors),  
subject to a \$5 minimum.

No Deductible - Add \$11  
to the \$300 Ded Limited Collision Rate.

TRUCKS, TRACTORS, TRAILERS

Physical Damage Coverages

Territory 14 - NON-FLEET

Table with columns: Original Cost (Complete Automobile Chassis & Body), Age Group (Code), Original Cost New (Code), OTHER THAN COLLISION (ALL VEHICLES, TRUCKS), COLLISION (TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS), and various deductible amounts (300, 500, 1000, 2000, 3000, 4000, 5000).

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

COLLISION - WAIVER OF DEDUCTIBLE

Table listing deductible amounts and corresponding charges: \$ 300 Deductible \$ 13, \$ 500 Deductible \$ 16, \$1000 Deductible \$ 28, \$2000 Deductible \$ 45, \$3000 Deductible \$ 56, \$4000 Deductible \$ 64, \$5000 Deductible \$ 71.

Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

Table listing deductible amounts and corresponding charges: \$1000 Ded. - Charge this % of \$500 Ded. Premium: 95%, \$2000 Ded. - Charge this % of \$500 Ded. Premium: 89%, \$3000 Ded. - Charge this % of \$500 Ded. Premium: 85%, \$4000 Ded. - Charge this % of \$500 Ded. Premium: 82%, \$5000 Ded. - Charge this % of \$500 Ded. Premium: 80%.

LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$13 to the \$300 Ded Limited Collision Rate.











### TRUCKS, TRACTORS, TRAILERS

#### Physical Damage Coverages

#### Territory 19 - NON-FLEET

Original Cost (Complete Automobile Chasis & Body)	Age Group (Code)	Original Cost New (Code)	OTHER THAN COLLISION				COLLISION													
			ALL VEHICLES				TRUCKS					TRUCK-TRACTORS & VEHICLES USED IN DUMPING OPERATIONS								
			Fire, Theft & CAC		Comprehensive		DEDUCTIBLES					DEDUCTIBLES								
			300	500	300	500	300	500	1000	2000	3000	4000	5000	300	500	1000	2000	3000	4000	5000
\$ 0 - 4,500	1 2,3 4,5 6-9	1	81 81 81 69	76 76 76 64	123 123 123 105	118 118 118 100	350 339 329 267	333 323 313 254	303 294 285 231	253 245 238 193	216 210 203 165	190 184 178 145	170 165 160 130	438 424 411 334	416 404 391 318	379 368 356 289	316 306 298 241	270 263 254 206	238 230 223 181	213 206 200 163
4,501 - 6,000	1 2,3 4,5 6-9	2	84 84 84 72	79 79 79 67	129 129 129 109	124 124 124 104	361 349 339 273	344 332 323 260	313 302 294 237	261 252 245 198	224 216 210 169	196 189 184 148	175 169 165 133	451 436 424 341	430 415 404 325	391 378 368 296	326 315 306 248	280 270 263 211	245 236 230 185	219 211 206 166
6,001 - 8,000	1 2,3 4,5 6-9	3	84 84 84 72	79 79 79 67	129 129 129 109	124 124 124 104	400 384 372 293	381 366 354 279	347 337 322 254	290 278 269 212	248 238 230 181	217 209 202 159	194 187 181 142	500 480 465 366	476 458 443 349	434 416 403 318	363 348 336 265	310 298 288 226	271 261 253 199	243 234 226 178
8,001 - 10,000	1 2,3 4,5 6-9	4	110 110 110 90	105 105 105 85	169 169 169 138	164 164 164 133	536 512 492 364	510 488 469 347	464 444 427 316	388 371 356 264	332 317 305 226	291 278 267 198	260 249 239 177	670 640 615 455	638 610 586 434	580 555 534 395	485 464 445 330	415 396 381 283	364 348 334 248	325 311 299 221
10,001 - 15,000	1 2,3 4,5 6-9	5	146 146 146 115	141 141 141 110	227 227 227 177	220 220 220 172	721 686 655 461	687 653 624 439	625 594 568 399	522 496 474 334	447 424 406 285	392 372 356 250	350 333 318 224	901 858 819 576	859 816 780 549	781 743 710 499	653 620 593 418	559 465 445 356	490 451 398 313	438 416 398 280
15,001 - 20,000	1 2,3 4,5 6-9	6	188 188 188 145	183 183 183 140	295 295 295 226	286 286 286 219	1093 1033 982 656	1041 984 935 625	947 895 851 569	791 748 711 475	677 640 608 406	593 561 533 356	531 502 477 319	1366 1291 1228 820	1301 1230 1169 781	1184 1119 1064 711	989 935 889 594	846 800 760 508	741 701 666 445	664 628 596 399
20,001 - 25,000	1 2,3 4,5 6-9	7	202 202 202 155	196 196 196 150	316 316 316 241	307 307 307 234	1317 1242 1178 773	1254 1183 1122 736	1141 1077 1021 670	953 899 853 559	815 769 729 478	715 674 640 420	640 603 572 375	1646 1553 1473 966	1568 1479 1403 920	1426 1346 1276 838	1191 1124 1066 699	1019 961 911 598	894 843 800 525	800 754 715 469
25,001 - 40,000	1 2,3 4,5 6-9	8	226 226 226 170	219 219 219 165	352 352 352 266	342 342 342 258	1486 1401 1327 861	1415 1334 1264 820	1288 1214 1150 746	1075 1014 961 623	920 867 822 533	807 760 720 467	722 680 645 418	1858 1751 1659 1076	1769 1668 1580 1025	1610 1518 1438 933	1344 1268 1201 779	1150 1084 1028 666	1009 950 806 584	903 850 806 523
40,001 - 65,000	1 2,3 4,5 6-9	10	262 262 262 197	254 254 254 191	409 409 409 307	397 397 397 298	1896 1783 1686 1076	1806 1698 1606 1025	1643 1545 1461 933	1373 1290 1221 779	1174 1104 1044 666	1029 968 915 584	921 866 819 523	2370 2229 2108 1345	2258 2123 2008 1281	2054 1931 1826 1166	1716 1613 1526 974	1468 1380 1305 833	1286 1210 1144 730	1151 1083 1024 654
65,001 - 90,000	1 2,3 4,5 6-9	11	284 284 284 213	276 276 276 207	445 445 445 333	432 432 432 323	2060 1936 1831 1161	1962 1844 1744 1106	1785 1678 1587 841	1491 1401 1325 81	1275 1199 1134 719	1118 1051 994 630	1001 940 889 564	2575 2420 2289 1451	2453 2305 2180 1383	2231 2098 1984 1258	1864 1751 1656 1051	1594 1499 1418 899	1398 1314 1243 788	1251 1175 1111 705
Charge per \$1000 over \$90,000	1 2,3 4,5 6-9	12	0.76 0.76 0.76 0.76	0.74 0.74 0.74 0.74	1.19 1.19 1.19 1.19	1.15 1.15 1.15 1.15	12.76 12.76 12.76 12.76	12.15 12.15 12.15 12.15	11.06 11.06 11.06 11.06	9.24 9.24 9.24 9.24	7.90 7.90 7.90 7.90	6.93 6.93 6.93 6.93	6.20 6.20 6.20 6.20	15.95 15.95 15.95 15.95	15.19 15.19 15.19 15.19	13.82 13.82 13.82 13.82	11.54 11.54 11.54 11.54	9.87 9.87 9.87 9.87	8.66 8.66 8.66 8.66	7.75 7.75 7.75 7.75

For Original Cost greater than \$90,000, add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only, Charge 40% of Fire, Theft, and CAC.

For Fire and Theft only, Charge 85% of Fire, Theft, and CAC.

For Stated Amount rating refer to Rule 42.

#### COLLISION - WAIVER OF DEDUCTIBLE

\$ 300 Deductible	\$ 16
\$ 500 Deductible	\$ 20
\$1000 Deductible	\$ 35
\$2000 Deductible	\$ 56
\$3000 Deductible	\$ 70
\$4000 Deductible	\$ 80
\$5000 Deductible	\$ 88

#### Higher Deductibles for Comprehensive & Fire, Theft, and CAC.

\$1000 Ded. - Charge this % of \$500 Ded. Premium:	95%
\$2000 Ded. - Charge this % of \$500 Ded. Premium:	89%
\$3000 Ded. - Charge this % of \$500 Ded. Premium:	85%
\$4000 Ded. - Charge this % of \$500 Ded. Premium:	82%
\$5000 Ded. - Charge this % of \$500 Ded. Premium:	80%

#### LIMITED COLLISION

Any Deductible - Charge 10.0% of Comparable Collision Rate (after primary and secondary rating factors), subject to a \$5 minimum.

No Deductible - Add \$16 to the \$300 Ded Limited Collision Rate.



**Commercial Automobile Insurance Manual**

**ZONE RATING TABLES**

For liability the following tables include the zone or combination zone base premiums, and for physical damage they include the zone or combination zone factors to be applied to the Physical Damage Base Premium Table.

<b>KEY TO ZONE RATING TABLES</b>			
The liability premiums are displayed as follows:			The physical damage factors are displayed as follows:
Bodily Injury (\$20,000/40,000)	\$2,026	1.82	Comprehensive
Property Damage (\$5,000)	920	1.13	Fire, Theft and CAC (incl. MM&V)
		4.00	Collision (All Deductibles)
12345			
<b>Zone Combination Code</b>			

To separate the Bodily Injury premiums for zone rated risks, the following percentages shall be applied to the \$20,000/40,000 Bodily Injury premium determined from the Zone Rating Table for the appropriate zone rating combination.

Compulsory Bodily Injury	86% of the 20/40 B.I. Premium
Personal Injury Protection	4% of the 20/40 B.I. Premium
Optional Bodily Injury (20/40)	10% of the 20/40 B.I. Premium

Medical Payments –

Use the Medical Payments rates for trucks, tractors and trailers.

**Commercial Automobile Insurance Manual**

**LONG DISTANCE ZONE DEFINITIONS**

**REGIONAL ZONES**

01	ATLANTA Zone includes Clayton and Cobb Counties and Atlanta, Georgia territories.
02	BALTIMORE—WASHINGTON Zone includes Baltimore, Baltimore Suburban and Outer Suburban, Montgomery County Suburban and Outer Suburban, and Prince Georges County Suburban and Outer Suburban, Maryland territories, the entire District of Columbia, and Alexandria City, Arlington, Falls Church City and Arlington-Alexandria Suburban, Virginia territories.
03	BOSTON Zone includes all of Essex, Middlesex, Norfolk and Suffolk, Massachusetts Counties.
04	BUFFALO Zone includes Erie County (Balance), Buffalo, Buffalo Semi-Suburban, Buffalo Suburban, Niagara Falls and Niagara Falls Suburban, New York territories.
05	CHARLOTTE Zone includes Charlotte and all of Mecklenburg County, North Carolina territories.
06	CHICAGO Zone includes all of Cook and DuPage County territories. Lake County (Balance), Waukegan-North Chicago and all Chicago, Illinois territories; and East Chicago, Indiana territory.
07	CINCINNATI Zone includes Cincinnati, Dayton and Hamilton-Middletown, Ohio; and Covington-Newport, Kentucky territories.
08	CLEVELAND Zone includes all of Geauga, Lorain and Medina County territories, Portage County (excluding the village of Mogadore), all Cleveland and Painesville, Ohio territories.
09	DALLAS—FORT WORTH Zone includes all of Dallas and Tarrant, Texas Counties.
10	DENVER Zone includes Denver and North Central, Colorado territories.
11	DETROIT Zone includes all Detroit, Dearborn and Pontiac, Michigan territories.
12	HARTFORD Zone includes all of Hartford and New Haven Counties, and Bridgeport and Fairfield-Stratford, Connecticut territories.
13	HOUSTON Zone includes all of Chambers, Galveston and Harris, Texas Counties.
14	INDIANAPOLIS Zone includes all of Marion County, Indiana territory.
15	JACKSONVILLE Zone includes all of Jacksonville, Florida territory.
16	KANSAS CITY Zone includes all of Kansas City, Kansas; and Independence and all Kansas City, Missouri territories.
17	LITTLE ROCK Zone includes all of Pulaski County, Arkansas territory.
18	LOS ANGELES Zone includes all of Los Angeles and Orange Counties and also Riverside and San Bernardino, California territories.
19	LOUISVILLE Zone includes all of Jefferson County, Kentucky and New Albany and Jeffersonville, Indiana territories.
20	MEMPHIS Zone includes all of Shelby County, Tennessee territory.
21	MIAMI Zone includes Miami and Miami Beach, Florida territories.
22	MILWAUKEE Zone includes Kenosha, Milwaukee Metropolitan, Semi-Suburban and Suburban and Racine, Wisconsin territories.
23	MINNEAPOLIS—ST. PAUL Zone includes Minneapolis Metropolitan and Suburban, St. Paul Metropolitan and Suburban, Minnesota territories.
24	NASHVILLE Zone includes all of Davidson County, Tennessee territory.
25	NEW ORLEANS Zone includes all of New Orleans, Louisiana territory.
26	NEW YORK CITY Zone includes all of New York City, Nassau and Westchester, New York Counties, all of Bergen, Essex and Hudson Counties, Elizabeth, New Brunswick, Perth Amboy and Plainfield, New Jersey territories; and Darien-Greenwich and Stamford, Connecticut territories.
27	OKLAHOMA CITY Zone includes all of Oklahoma County, Oklahoma territory.



## Commercial Automobile Insurance Manual

## LONG DISTANCE ZONE DEFINITIONS

## REGIONAL ZONES

(Continued)

28	OMAHA Zone includes all of Douglas and Sarpy, Nebraska Counties and Council Bluffs, Iowa territory.
29	PHOENIX Zone includes Mesa-Tempe and Phoenix, Arizona territories.
30	PHILADELPHIA Zone includes Bucks County (Balance), Chester County (Balance), Delaware 24 (Balance), Montgomery County (Balance), Allentown-Bethlehem and all Philadelphia, Pennsylvania territories, Wilmington, Delaware and Camden, Camden Suburban and Trenton, New Jersey territories.
31	PITTSBURGH Zone includes all of Allegheny and Beaver Counties, Pennsylvania territories.
32	PORTLAND Zone includes all of Portland, Portland Semi-Suburban, Portland Suburban, Oregon and Vancouver, Washington territories.
33	RICHMOND Zone includes all of Richmond, Virginia territory.
34	ST. LOUIS Zone includes all of St. Louis County, Missouri, and East St. Louis, Illinois territories.
35	SALT LAKE CITY Zone includes all of Salt Lake City County, Utah territory.
36	SAN FRANCISCO Zone includes all of Alameda, Contra Costa, Marin, San Francisco, San Mateo and Santa Clara, California Counties.
37	TULSA Zone includes all of Tulsa, Oklahoma territory.
40	PACIFIC COAST Zone includes the States of California (excluding Los Angeles and San Francisco Zones), Oregon (excluding Portland Zone), and Washington (excluding Portland Zone).
41	MOUNTAIN Zone includes the States of Arizona (excluding Phoenix Zone), Colorado (excluding Denver Zone), Idaho, Montana, Nevada, New Mexico, Utah (excluding Salt Lake City Zone) and Wyoming.
42	MIDWEST Zone includes the States of Iowa (excluding Omaha Zone), Kansas (excluding Kansas City Zone), Missouri (excluding Kansas City and St. Louis Zones), Minnesota (excluding Minneapolis-St. Paul Zone), Nebraska (excluding Omaha Zone), North Dakota, South Dakota and Wisconsin (excluding Milwaukee Zone).
43	SOUTHWEST Zone includes the States of Arkansas (excluding Little Rock Zone), Oklahoma (excluding Oklahoma City and Tulsa Zones) and Texas (excluding Dallas-Fort Worth and Houston Zones).
44	NORTH CENTRAL Zone includes the States of Illinois (excluding Chicago and St. Louis Zones), Indiana (excluding Chicago, Indianapolis and Louisville Zones), Ohio (excluding Cincinnati and Cleveland Zones) and Michigan (excluding Detroit Zone).
45	MIDEAST Zone includes the States of Kentucky (excluding Cincinnati and Louisville Zones), Tennessee (excluding Memphis and Nashville Zones) and West Virginia.
46	GULF Zone includes the States of Alabama, Louisiana (excluding New Orleans Zone) and Mississippi.
47	SOUTHEAST Zone includes the States of Florida (excluding Jacksonville and Miami Zones), Georgia (excluding Atlanta Zone), North Carolina (excluding Charlotte Zone), South Carolina and Virginia (excluding Baltimore/Washington and Richmond Zones).
48	EASTERN Zone includes the States of Delaware (excluding Philadelphia Zone), Maryland (excluding Baltimore/Washington Zone), New York (excluding Buffalo and New York City Zones), New Jersey (excluding New York City and Philadelphia Zones) and Pennsylvania (excluding Philadelphia and Pittsburgh Zones).
49	NEW ENGLAND Zone includes the States of Connecticut (excluding Hartford and New York City Zones), Maine, Massachusetts (excluding Boston Zone), New Hampshire, Rhode Island and Vermont.
50	ALASKA Zone includes all of the State of Alaska (refer to company).

**COMMONWEALTH AUTOMOBILE REINSURERS**  
Massachusetts Commercial Automobile

ZONE RATING TABLE  
Zone 03 (Boston) Combinations

Insert the state code of the state of principal garaging as the first two digits of the zone combinations code.

Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.
01 Atlanta	2026	1.82	13 Houston	1656	2.75	25 New Orleans	1656	2.33	37 Tulsa	1656	2.11
	920	1.13		753	1.30		753	1.13		753	1.16
	-- 201	4.00		-- 213	3.75		-- 225	3.38		-- 237	3.39
02 Balt.- Wash	2026	2.45	14 Indianapolis	1656	1.76	26 N.Y. City	1963	1.83	40 Pacific	1656	1.92
	920	0.95		753	1.01		889	0.98		753	0.97
	-- 202	3.32		-- 214	3.16		-- 226	3.32		-- 240	3.55
03 Boston	1656	1.60	15 Jacksonville	2026	1.73	27 Okla. City	1656	2.11	41 Mountain	1656	2.08
	753	0.90		920	1.06		753	1.16		753	1.01
	-- 203	3.32		-- 215	3.90		-- 227	3.39		-- 241	3.38
04 Buffalo	1656	1.83	16 Kansas City	1534	2.14	28 Omaha	1656	1.89	42 Midwest	1656	2.03
	753	0.98		697	1.21		753	1.01		753	1.06
	-- 204	3.32		-- 216	3.16		-- 228	3.16		-- 242	3.16
05 Charlotte	2026	1.53	17 Little Rock	1534	2.51	29 Phoenix	1656	2.24	43 Southwest	1656	2.73
	920	0.93		697	1.03		753	0.97		753	1.27
	-- 205	3.71		-- 217	4.00		-- 229	3.55		-- 243	3.69
06 Chicago	1656	1.98	18 Los Angeles	1534	1.93	30 Philadelphia	2026	1.60	44 North Central	1656	1.77
	753	1.08		697	1.08		920	0.95		753	1.01
	-- 206	3.16		-- 218	3.55		-- 230	3.32		-- 244	3.22
07 Cincinnati	1656	1.84	19 Louisville	1656	1.62	31 Pittsburgh	1656	1.60	45 Midwest	1656	1.76
	753	0.99		753	0.99		753	0.95		753	1.11
	-- 207	3.16		-- 219	3.16		-- 231	3.32		-- 245	3.28
08 Cleveland	1656	1.84	20 Memphis	1534	1.95	32 Portland	1656	1.87	46 Gulf	1656	2.28
	753	0.99		697	1.25		753	0.92		753	1.08
	-- 208	3.16		-- 220	3.37		-- 232	3.55		-- 246	3.46
09 Dallas Fort Worth	1656	2.80	21 Miami	2026	1.73	33 Richmond	2026	1.81	47 South East	2026	1.72
	753	1.35		920	1.06		920	1.03		920	1.04
	-- 209	3.80		-- 221	3.90		-- 233	3.17		-- 247	3.75
10 Denver	1656	2.04	22 Milwaukee	1656	1.63	34 St. Louis	1656	2.14	48 Eastern	1656	1.79
	753	1.09		753	0.98		753	1.22		753	0.97
	-- 210	3.16		-- 222	3.16		-- 234	3.16		-- 248	3.32
11 Detroit	1656	1.76	23 Minn-St. Paul	1656	1.89	35 Salt Lake City	1656	2.26	49 New England	1656	1.60
	753	1.01		753	0.99		753	0.91		753	0.90
	-- 211	3.46		-- 223	3.16		-- 235	3.55		-- 249	3.32
12 Hartford	2026	1.72	24 Nashville	1656	1.95	36 San. Fran	2026	1.93			
	920	0.99		753	1.25		920	0.98			
	-- 212	3.32		-- 224	3.37		-- 236	3.55			

**COMMONWEALTH AUTOMOBILE REINSURERS**  
Massachusetts Commercial Automobile

**ZONE RATING TABLE**  
Zone 49 (Other than Boston) Combinations

Insert the state code of the state of principal garaging as the first two digits of the zone combinations code

Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.	Zone	Liability	Phys Dam.
01 Atlanta	2026	1.61	13 Houston	2026	2.63	25 New Orleans	1476	2.13	37 Tulsa	1476	1.90
	920	1.05		920	1.23		666	1.05		666	1.08
	4.00			3.70			3.38			3.39	
-- 901			-- 913			-- 925			-- 937		
02 Balt.- Wash	2026	2.24	14 Indianapolis	1476	1.56	26 N.Y. City	1963	1.63	40 Pacific	1476	1.72
	920	0.87		666	0.93		889	0.90		666	0.89
	3.32			3.16			3.32			3.55	
-- 902			-- 914			-- 926			-- 940		
03 Boston	1656	1.81	15 Jacksonville	2026	1.53	27 Okla. City	1476	1.90	41 Mountain	1291	1.87
	753	0.98		920	0.98		666	1.08		583	0.93
	3.32			3.90			3.39			3.38	
-- 903			-- 915			-- 927			-- 941		
04 Buffalo	1476	1.63	16 Kansas City	1534	1.94	28 Omaha	1656	1.68	42 Midwest	1291	1.83
	666	0.90		697	1.14		753	0.93		583	0.98
	3.32			3.16			3.16			3.38	
-- 904			-- 916			-- 928			-- 942		
05 Charlotte	2026	1.33	17 Little Rock	1534	2.30	29 Phoenix	1476	2.04	43 Southwest	1291	2.53
	920	0.85		697	0.95		666	0.89		583	1.19
	3.71			4.00			3.55			3.69	
-- 905			-- 917			-- 929			-- 943		
06 Chicago	1476	1.78	18 Los Angeles	1534	1.73	30 Philadelphia	2026	1.39	44 North Central	1534	1.56
	666	1.00		697	1.00		920	0.87		697	0.93
	3.16			3.55			3.32			3.22	
-- 906			-- 918			-- 930			-- 944		
07 Cincinnati	1476	1.63	19 Louisville	1656	1.41	31 Pittsburgh	1476	1.39	45 Mideast	1476	1.56
	666	0.91		753	0.91		666	0.87		666	1.03
	3.16			3.16			3.55			3.28	
-- 907			-- 919			-- 931			-- 945		
08 Cleveland	1476	1.63	20 Memphis	1534	2.00	32 Portland	1476	1.66	46 Gulf	1656	2.07
	666	0.91		697	1.00		666	0.84		753	1.00
	3.16			3.37			3.55			3.46	
-- 908			-- 920			-- 932			-- 946		
09 Dallas Fort Worth	1476	2.63	21 Miami	2026	1.53	33 Richmond	2026	1.60	47 South East	1476	1.51
	666	1.23		920	0.98		920	0.95		666	0.96
	3.70			3.90			3.17			3.75	
-- 909			-- 921			-- 933			-- 947		
10 Denver	1656	1.83	22 Milwaukee	1476	1.43	34 St. Louis	1476	1.94	48 Eastern	1656	1.59
	753	1.01		666	0.90		666	1.14		753	0.89
	3.16			3.16			3.16			3.32	
-- 910			-- 922			-- 934			-- 948		
11 Detroit	1656	1.56	23 Minn-St. Paul	1476	1.69	35 Salt Lake City	1656	2.05	49 New England	1476	1.60
	753	0.93		666	0.91		753	0.83		666	0.90
	3.46			3.16			3.55			3.32	
-- 911			-- 923			-- 935			-- 949		
12 Hartford	2026	1.51	24 Nashville	1476	1.74	36 San. Fran	2026	1.73			
	920	0.91		666	1.17		920	0.90			
	3.32			3.37			3.55				
-- 912			-- 924			-- 936					

**Commercial Automobile Insurance Manual**

**LONG DISTANCE PHYSICAL DAMAGE PREMIUMS**

**Premium Development  
Deductibles Other Than Shown On Rate Page**

**COLLISION**

- (1) Determine the \$4,501-6,000 \$500 deductible Collision premium for the same age group as the automobile being rated.
- (2) Multiply that premium by the applicable factor for the deductible desired.
- (3) Subtract the result from the \$500 deductible Collision premium for the original cost new and age group that applies to the automobile being rated.

Deductible	
Amount	Factor
\$3,000	.835

**COMPREHENSIVE**

- (1) Determine the \$4,501-6,000 \$500 deductible Comprehensive rate for the same age group as the automobile being rated.
- (2) Multiply that rate by the applicable factor for the deductible desired.
- (3) For deductible above \$500, subtract the result from the \$500 deductible Comprehensive rate for the original cost new and age group that applies to the automobile being rated.

Deductible	
Amount	Factor
\$1,000	.120
\$2,000	.380
\$3,000	.570

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**COMMONWEALTH AUTOMOBILE REINSURERS**  
 Massachusetts Commercial Automobile

LONG DISTANCE PHYSICAL DAMAGE BASE PREMIUMS

Original Cost New	Age Group	Other Than Collision		Collision Base Premiums							
		All Automobiles		Trucks, Trailers, and Semitrailers				Truck-Tractors & Automobiles Used in Dumping Operations			
		Deductibles		Deductibles				Deductibles			
		\$300	\$500	\$300	\$500	\$1,000	\$2,000	\$300	\$500	\$1,000	\$2,000
\$0 - 4,500	1,2,3	10	10	51	44	30	16	77	66	45	24
	4	10	9	44	36	26	15	66	54	39	23
	5	9	5	39	30	21	13	59	45	32	20
	6-9	5	4	31	26	18	10	47	39	27	15
\$4501 - 6,000	1,2,3	18	18	66	58	47	32	99	87	71	48
	4	17	16	57	51	41	29	86	77	62	44
	5	15	15	51	45	36	25	77	68	54	38
	6-9	13	11	45	39	30	21	68	59	45	32
\$6001 - 8,000	1,2,3	28	26	86	77	64	51	129	116	96	77
	4	23	21	71	65	55	45	107	98	83	68
	5	19	18	63	57	50	39	95	86	75	59
	6-9	18	17	55	51	44	32	83	77	66	48
\$8001 - 10,000	1,2,3	38	36	106	96	86	71	159	144	129	107
	4	30	30	91	84	71	60	137	126	107	90
	5	28	26	79	73	63	54	119	110	95	81
	6-9	23	23	66	63	55	47	99	95	83	71
\$10,001 - 15,000	1,2,3	54	53	140	133	121	107	210	200	182	161
	4	46	45	120	113	101	92	180	170	152	138
	5	43	39	106	99	92	79	159	149	138	119
	6-9	33	33	92	86	78	69	138	129	117	104
\$15,001 - 20,000	1,2,3	79	78	192	182	169	158	288	273	254	237
	4	66	64	163	157	146	133	245	236	219	200
	5	58	57	143	138	128	116	215	207	192	174
	6-9	51	50	124	118	112	101	186	177	168	152
\$20,001 - 25,000	1,2,3	101	100	240	233	220	207	360	350	330	311
	4	87	86	206	200	188	175	309	300	282	263
	5	75	75	180	174	166	155	270	261	249	233
	6-9	65	64	158	153	144	133	237	230	216	200
\$25,001 - 40,000	1,2,3	149	148	341	333	322	307	512	500	483	461
	4	128	125	288	282	273	262	432	423	410	393
	5	113	112	256	250	240	232	384	375	360	348
	6-9	96	96	221	217	209	200	332	326	314	300
\$40,001 - 65,000	1,2,3	244	243	543	536	523	508	815	804	785	762
	4	209	208	461	455	444	432	692	683	666	648
	5	184	182	406	400	392	382	609	600	588	573
	6-9	161	160	353	347	339	330	530	521	509	495
\$65,001 - 90,000	1,2,3	366	363	796	786	773	760	1194	1179	1160	1140
	4	312	309	674	666	658	649	1011	999	987	974
	5	274	273	595	589	582	569	893	884	873	854
	6-9	237	237	514	510	502	494	771	765	753	741
Over 90,000	1,2,3	485	484	1045	1036	1024	1011	1568	1554	1536	1517
	4	414	413	887	881	872	860	1331	1322	1308	1290
	5	363	363	782	776	770	758	1173	1164	1155	1137
	6-9	315	314	679	674	665	657	1019	1011	998	986

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 CAR  
 2/1/2018

**COMMONWEALTH AUTOMOBILE REINSURERS**  
 Massachusetts Commercial Automobile  
 LEGAL LIABILITY RATES FOR PHYSICAL DAMAGE  
 TO TRAILERS UNDER A TRAILER INTERCHANGE AGREEMENT  
 Daily Per Trailer Rates

Limit of Liability	Local						Intermediate						Long Distance					
	Comp or Specified Perils Deductibles		Collision Deductibles				Comp or Specified Perils Deductibles		Collision Deductibles				Comp or Specified Perils Deductibles		Collision Deductibles			
	\$300 (035)	\$500 (037)	\$300 (076)	\$500 (077)	\$1000 (078)	\$2000 (072)	\$300 (035)	\$500 (037)	\$300 (076)	\$500 (077)	\$1000 (078)	\$2000 (072)	\$300 (035)	\$500 (037)	\$300 (076)	\$500 (077)	\$1000 (078)	\$2000 (072)
\$1000	0.003	0.003	0.029	0.026	0.017	0.013	0.005	0.005	0.047	0.044	0.026	0.019	0.010	0.010	0.071	0.065	0.039	0.029
\$2000	0.005	0.005	0.033	0.031	0.018	0.016	0.010	0.010	0.057	0.053	0.031	0.025	0.017	0.017	0.087	0.079	0.051	0.039
\$3000	0.009	0.009	0.043	0.039	0.023	0.018	0.015	0.015	0.064	0.058	0.039	0.029	0.021	0.019	0.101	0.094	0.058	0.046
\$4000	0.010	0.010	0.047	0.044	0.028	0.019	0.017	0.017	0.075	0.070	0.046	0.033	0.028	0.026	0.116	0.108	0.070	0.054
\$5000	0.013	0.013	0.054	0.050	0.031	0.025	0.021	0.019	0.087	0.079	0.053	0.041	0.031	0.030	0.132	0.121	0.079	0.060
\$6000	0.016	0.016	0.060	0.055	0.036	0.028	0.025	0.023	0.096	0.089	0.058	0.046	0.038	0.036	0.148	0.136	0.091	0.069
\$7000	0.017	0.017	0.064	0.058	0.039	0.029	0.029	0.028	0.106	0.096	0.063	0.049	0.044	0.043	0.164	0.149	0.099	0.075
\$8000	0.019	0.018	0.070	0.064	0.044	0.032	0.031	0.030	0.114	0.106	0.071	0.055	0.049	0.047	0.175	0.163	0.109	0.085
\$9000	0.021	0.019	0.078	0.071	0.047	0.036	0.036	0.033	0.125	0.115	0.077	0.058	0.055	0.053	0.193	0.177	0.118	0.092
\$10000	0.025	0.023	0.084	0.075	0.053	0.041	0.039	0.038	0.136	0.125	0.085	0.064	0.058	0.057	0.208	0.192	0.130	0.099
\$11000	0.026	0.025	0.091	0.084	0.055	0.044	0.043	0.041	0.146	0.133	0.092	0.070	0.064	0.061	0.223	0.206	0.139	0.107
\$12000	0.029	0.028	0.096	0.089	0.058	0.046	0.047	0.046	0.155	0.142	0.096	0.074	0.070	0.066	0.238	0.219	0.148	0.114
\$13000	0.030	0.029	0.101	0.094	0.063	0.049	0.050	0.049	0.165	0.153	0.102	0.078	0.075	0.073	0.253	0.233	0.160	0.121
\$14000	0.031	0.030	0.108	0.099	0.066	0.053	0.053	0.051	0.172	0.161	0.109	0.085	0.080	0.078	0.268	0.248	0.169	0.130
\$15000	0.033	0.032	0.114	0.106	0.071	0.055	0.057	0.054	0.185	0.169	0.116	0.091	0.087	0.085	0.282	0.259	0.179	0.138
\$16000	0.038	0.036	0.120	0.110	0.075	0.057	0.058	0.057	0.194	0.179	0.122	0.094	0.093	0.089	0.300	0.276	0.189	0.144
\$17000	0.039	0.038	0.127	0.116	0.079	0.060	0.063	0.060	0.206	0.189	0.130	0.099	0.098	0.094	0.314	0.288	0.197	0.153
\$18000	0.043	0.041	0.132	0.121	0.084	0.063	0.066	0.064	0.216	0.196	0.136	0.106	0.102	0.099	0.329	0.303	0.208	0.161
\$19000	0.044	0.043	0.136	0.125	0.087	0.065	0.070	0.066	0.223	0.206	0.142	0.109	0.109	0.106	0.345	0.318	0.218	0.166
\$20000	0.046	0.045	0.143	0.132	0.093	0.070	0.074	0.071	0.235	0.216	0.148	0.114	0.113	0.109	0.359	0.330	0.226	0.172

Additional Charges added to the \$20000 rate for every \$1000 of liability in excess of \$20000

Each Addl \$1000	0.001	0.001	0.004	0.004	0.003	0.002	0.002	0.002	0.010	0.009	0.005	0.004	0.004	0.004	0.015	0.014	0.009	0.005
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**Commercial Automobile Insurance Manual**

**PRIVATE PASSENGER TYPES  
Rating Procedures**

COMPULSORY BODILY INJURY LIABILITY (Coverage A-1)

Refer to rate pages.

PERSONAL INJURY PROTECTION (Coverage A-2)

Refer to rate pages

OPTIONAL BODILY INJURY LIABILITY (Coverage B)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the following formula:

$$(B, \text{incr}) = ((A-1) + (B, \text{basic}) \times \text{ILF} - [(A-1)])$$

where

B, incr denotes the Optional Bodily Injury Liability rate,  
A-1 denotes the Compulsory Bodily Injury rate,  
B, basic denotes the basic limits (20/40) Optional Bodily Injury Liability rate,  
ILF denotes the appropriate Increased Limits Factor.

PROTECTION AGAINST UNINSURED AND UNDERINSURED MOTORISTS (Coverages U1 & U2)

Refer to rate pages.

PROPERTY DAMAGE LIABILITY (Coverage C)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the appropriate Increased Limits Factor to the basic limits rate shown on the rate pages.

MEDICAL PAYMENTS (Coverage D)

Refer to rate pages.

**Commercial Automobile Insurance Manual**

**PRIVATE PASSENGER TYPES  
Rating Procedures  
(Continued)**

**COLLISION**

Collision Deductible: \$500  
Refer to rate pages.

Collision Deductible: \$300  
Add the following buyback charges to the \$500 deductible rate:

	Territory 1	Territory 2	Territory 3	Territory 4
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$105	\$105	\$105	\$105
\$300 Ded. - Non-Fleet	140	140	140	140
	Territory 5	Territory 6	Territory 7	Territory 8
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$105	\$105	\$105	\$105
\$300 Ded. - Non-Fleet	140	140	140	140
	Territory 9	Territory 10	Territory 11	Territory 12
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$105	\$105	\$32	\$40
\$300 Ded. - Non-Fleet	140	140	42	53
	Territory 13	Territory 14	Territory 15	Territory 16
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$38	\$41	\$43	\$47
\$300 Ded. - Non-Fleet	50	54	57	63
	Territory 17	Territory 18	Territory 19	Territory 20
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$56	\$64	\$75	\$82
\$300 Ded. - Non-Fleet	74	85	100	109

**Collision Deductibles:**

- \$1,000 Ded. - Charge 90% of \$500 Ded. premium.
- \$2,000 Ded. - Charge 75% of \$500 Ded. premium.
- \$3,000 Ded. - Charge 63% of \$500 Ded. premium.
- \$4,000 Ded. - Charge 55% of \$500 Ded. premium.
- \$5,000 Ded. - Charge 49% of \$500 Ded. premium.

**Collision Waiver of Deductible Charges—**

	<u>Fleet</u>	<u>Non-Fleet</u>
\$ 300 Ded. -	\$15	\$20
\$ 500 Ded. -	22	29
\$1,000 Ded. -	39	52
\$2,000 Ded. -	62	83
\$3,000 Ded. -	78	103
\$4,000 Ded. -	90	119
\$5,000 Ded. -	99	131

Collision Stated Amount Rating—Refer to Rule 42.



**Commercial Automobile Insurance Manual**

**PRIVATE PASSENGER TYPES  
Rating Procedures  
(Continued)**

**LIMITED COLLISION**

Limited Collision Deductible: \$500

Refer to rate pages.

Limited Collision Deductible: \$0

Add \$15 for fleet, or \$20 for non-fleet, to the \$300 deductible rate.

Limited Collision Deductible: \$300

Add the following buyback charges to the \$500 deductible rate:

	Territory 1	Territory 2	Territory 3	Territory 4
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 7	\$ 7	\$ 7	\$ 7
\$300 Ded. - Non-Fleet	10	10	10	10
	Territory 5	Territory 6	Territory 7	Territory 8
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 7	\$ 7	\$ 7	\$ 7
\$300 Ded. - Non-Fleet	10	10	10	10
	Territory 9	Territory 10	Territory 11	Territory 12
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 7	\$ 7	\$ 2	\$ 3
\$300 Ded. - Non-Fleet	10	10	3	4
	Territory 13	Territory 14	Territory 15	Territory 16
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$3	\$3	\$3	\$3
\$300 Ded. - Non-Fleet	4	4	4	4
	Territory 17	Territory 18	Territory 19	Territory 20
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 4	\$ 4	\$ 5	\$ 6
\$300 Ded. - Non-Fleet	5	6	7	8

Limited Collision Deductibles:

\$1,000 Ded. - Charge 90% of \$500 Ded. premium.

\$2,000 Ded. - Charge 75% of \$500 Ded. premium.

\$3,000 Ded. - Charge 63% of \$500 Ded. premium.

\$4,000 Ded. - Charge 55% of \$500 Ded. premium.

\$5,000 Ded. - Charge 49% of \$500 Ded. premium.

For Limited Collision Stated Amount Rating—Refer to Rule 42.

**Commercial Automobile Insurance Manual**

**PRIVATE PASSENGER TYPES  
Rating Procedures  
(Continued)**

**COMPREHENSIVE**

Comprehensive Deductible: \$500  
Refer to rate pages.

Comprehensive Deductibles: \$300

Add the following buyback charges to the \$500 deductible rate:

	Territory 1	Territory 2	Territory 3	Territory 4
<u>Buyback Charge</u>				
\$300 Ded. – Fleet	\$ 20	\$ 20	\$ 20	\$ 20
\$300 Ded. – Non-Fleet	19	19	19	19
	Territory 5	Territory 6	Territory 7	Territory 8
<u>Buyback Charge</u>				
\$300 Ded. – Fleet	\$ 20	\$ 20	\$ 20	\$ 20
\$300 Ded. – Non-Fleet	19	19	19	19
	Territory 9	Territory 10	Territory 11	Territory 12
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 20	\$ 20	\$ 8	\$ 9
\$300 Ded. - Non-Fleet	19	19	8	8
	Territory 13	Territory 14	Territory 15	Territory 16
<u>Buyback Charge</u>				
\$300 Ded. – Fleet	\$ 8	\$ 10	\$ 9	\$ 10
\$300 Ded. – Non-Fleet	7	9	8	9
	Territory 17	Territory 18	Territory 19	Territory 20
<u>Buyback Charge</u>				
\$300 Ded. - Fleet	\$ 10	\$ 11	\$ 12	\$ 14
\$300 Ded. – Non-Fleet	10	10	12	13

**Comprehensive Deductibles:**

- \$1,000 Ded. - Charge 94% of \$500 Ded. premium.
- \$2,000 Ded. - Charge 86% of \$500 Ded. premium.
- \$3,000 Ded. - Charge 80% of \$500 Ded. premium.
- \$4,000 Ded. - Charge 76% of \$500 Ded. premium.
- \$5,000 Ded. - Charge 74% of \$500 Ded. premium.

For Comprehensive Stated Amount Rating—Refer to Rule 42.

**Fire, Theft, C.A.C.:**

- Fire – Charge 10% of the Comprehensive premium.
- Fire and Theft – Charge 70% of the Comprehensive premium.
- Fire, Theft and C.A.C. – Charge 85% of the Comprehensive premium.

**\$100 Glass Deductible:**

Charge 92% of the otherwise determined premium that would apply in the absence of a glass deductible.

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 1

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 2

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 3

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 4

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B, Increased Limits

Property Damage Liability

20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

Symbol

COLLISION \$500 DEDUCTIBLE

<u>Cost New</u>	<u>Code</u>	Age:	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

Symbol

LIMITED COLLISION \$500 DEDUCTIBLE

<u>Cost New</u>	<u>Code</u>	Age:	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

Symbol

COMPREHENSIVE \$500 DEDUCTIBLE

<u>Cost New</u>	<u>Code</u>	Age:	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

Medical Payments

U1, Uninsured

U2, Underinsured

5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

Towing & Labor (Rule 65)

\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

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COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 5

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
		250/500	11	250/500	92
		500/500	15	500/500	249
<u>Towing &amp; Labor (Rule 65)</u>					
\$25 per Disablement: 4					
\$50 per Disablement: 8					
\$100 per Disablement: 16					

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 6

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B, Increased Limits				Property Damage Liability	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					



COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 7

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B, Increased Limits				Property Damage Liability	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL**

**PRIVATE PASSENGER TYPE -- FLEET**  
**Territory 8**

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 9

A-1  
1155

A-2  
195

B, Increased Limits				Property Damage Liability	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 10

A-1  
1155

A-2  
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B, Increased Limits				Property Damage Liability	
20/40	173	100/300	1209	5000	973
20/50	226	250/500	1793	10000	1187
25/50	346	500/500	2271	25000	1304
35/80	558	500/1000	2298	50000	1333
50/100	771	1000/1000	2630	100000	1343
				500000	1352

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1684	1588	1548	1548	1453	1453	1425	1425	1141
4,501 - 6,000	02		1860	1753	1707	1707	1601	1601	1570	1570	1251
6,001 - 8,000	03		1860	1753	1707	1707	1601	1601	1570	1570	1251
8,001 - 10,000	04		1880	1772	1726	1726	1618	1618	1586	1586	1264
10,001 - 15,000	05		2193	2065	2010	2010	1882	1882	1845	1845	1460
15,001 - 20,000	06		2369	2230	2169	2169	2030	2030	1990	1990	1570
20,001 - 25,000	07		2252	2120	2063	2063	1931	1931	1893	1893	1497
25,001 - 40,000	08		2310	2175	2116	2116	1981	1981	1942	1942	1533
40,001 - 65,000	10		2448	2303	2241	2241	2096	2096	2054	2054	1619
65,001 - 90,000	11		3273	3073	2989	2989	2789	2789	2732	2732	2136
Charge Per \$1K > \$90K	12		18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33	18.33

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		118	111	108	108	102	102	100	100	80
4,501 - 6,000	02		130	123	119	119	112	112	110	110	87
6,001 - 8,000	03		130	123	119	119	112	112	110	110	87
8,001 - 10,000	04		131	124	121	121	113	113	111	111	88
10,001 - 15,000	05		153	144	141	141	132	132	129	129	102
15,001 - 20,000	06		166	156	152	152	142	142	139	139	110
20,001 - 25,000	07		157	148	144	144	135	135	132	132	105
25,001 - 40,000	08		162	152	148	148	138	138	136	136	107
40,001 - 65,000	10		171	161	157	157	147	147	144	144	113
65,001 - 90,000	11		229	215	209	209	195	195	191	191	149
Charge Per \$1K > \$90K	12		1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28	1.28

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		491	491	478	473	451	411	411	394	350
4,501 - 6,000	02		491	491	478	473	451	411	411	394	350
6,001 - 8,000	03		497	497	483	479	456	416	416	398	353
8,001 - 10,000	04		556	556	541	535	510	465	465	444	394
10,001 - 15,000	05		588	588	572	566	540	491	491	470	416
15,001 - 20,000	06		636	636	619	613	584	531	531	507	449
20,001 - 25,000	07		642	642	624	618	589	535	535	512	452
25,001 - 40,000	08		679	679	661	654	623	566	566	541	478
40,001 - 65,000	10		830	830	807	799	760	690	690	658	580
65,001 - 90,000	11		1444	1444	1402	1388	1318	1193	1193	1137	997
Charge Per \$1K > \$90K	12		10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76	10.76

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

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C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 11

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A-2  
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B, Increased Limits				Property Damage Liability	
20/40	53	100/300	371	5000	303
20/50	69	250/500	551	10000	370
25/50	106	500/500	698	25000	406
35/80	171	500/1000	706	50000	415
50/100	237	1000/1000	808	100000	418
				500000	421

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		669	641	628	628	600	600	591	591	506
4,501 - 6,000	02		722	690	677	677	644	644	635	635	539
6,001 - 8,000	03		722	690	677	677	644	644	635	635	539
8,001 - 10,000	04		728	696	682	682	649	649	640	640	543
10,001 - 15,000	05		823	784	768	768	729	729	718	718	602
15,001 - 20,000	06		876	834	816	816	774	774	762	762	635
20,001 - 25,000	07		841	801	784	784	744	744	732	732	613
25,001 - 40,000	08		858	817	800	800	759	759	747	747	624
40,001 - 65,000	10		900	856	837	837	794	794	781	781	650
65,001 - 90,000	11		1148	1088	1063	1063	1003	1003	985	985	806
Charge Per \$1K > \$90K	12		5.53	5.53	5.53	5.53	5.53	5.53	5.53	5.53	5.53

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		47	45	44	44	42	42	41	41	35
4,501 - 6,000	02		51	48	47	47	45	45	44	44	38
6,001 - 8,000	03		51	48	47	47	45	45	44	44	38
8,001 - 10,000	04		51	49	48	48	45	45	45	45	38
10,001 - 15,000	05		58	55	54	54	51	51	50	50	42
15,001 - 20,000	06		61	58	57	57	54	54	53	53	44
20,001 - 25,000	07		59	56	55	55	52	52	51	51	43
25,001 - 40,000	08		60	57	56	56	53	53	52	52	44
40,001 - 65,000	10		63	60	59	59	56	56	55	55	46
65,001 - 90,000	11		80	76	74	74	70	70	69	69	56
Charge Per \$1K > \$90K	12		0.39	0.39	0.39	0.39	0.39	0.39	0.39	0.39	0.39

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		231	231	226	224	215	199	199	192	173
4,501 - 6,000	02		231	231	226	224	215	199	199	192	173
6,001 - 8,000	03		234	234	228	226	217	201	201	193	175
8,001 - 10,000	04		258	258	252	249	239	221	221	212	191
10,001 - 15,000	05		271	271	265	262	251	231	231	223	200
15,001 - 20,000	06		291	291	284	281	269	248	248	238	214
20,001 - 25,000	07		293	293	286	284	271	249	249	240	215
25,001 - 40,000	08		309	309	301	298	286	262	262	252	226
40,001 - 65,000	10		371	371	361	358	342	313	313	300	268
65,001 - 90,000	11		623	623	606	600	571	520	520	497	440
Charge Per \$1K > \$90K	12		4.43	4.43	4.43	4.43	4.43	4.43	4.43	4.43	4.43

Medical Payments	U1, Uninsured	U2, Underinsured
5000 25	20/40 5	20/40 0
10000 27	20/50 6	20/50 0
15000 29	25/50 7	25/50 0
20000 30	35/80 8	35/80 4
25000 32	50/100 9	50/100 8
	100/300 10	100/300 25
<u>Towing &amp; Labor (Rule 65)</u>	250/500 11	250/500 92
\$25 per Disablement: 4	500/500 15	500/500 249
\$50 per Disablement: 8		
\$100 per Disablement: 16		

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C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 12

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76

B, Increased Limits				Property Damage Liability	
20/40	61	100/300	428	5000	348
20/50	80	250/500	634	10000	425
25/50	122	500/500	804	25000	466
35/80	197	500/1000	813	50000	477
50/100	273	1000/1000	931	100000	480
				500000	484

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		780	744	729	729	693	693	683	683	575
4,501 - 6,000	02		847	807	789	789	749	749	737	737	617
6,001 - 8,000	03		847	807	789	789	749	749	737	737	617
8,001 - 10,000	04		855	814	796	796	756	756	744	744	622
10,001 - 15,000	05		973	925	904	904	855	855	841	841	696
15,001 - 20,000	06		1040	987	964	964	911	911	896	896	737
20,001 - 25,000	07		995	945	924	924	874	874	859	859	710
25,001 - 40,000	08		1017	966	944	944	893	893	878	878	724
40,001 - 65,000	10		1069	1015	991	991	936	936	920	920	756
65,001 - 90,000	11		1381	1306	1274	1274	1198	1198	1177	1177	952
Charge Per \$1K > \$90K	12		6.93	6.93	6.93	6.93	6.93	6.93	6.93	6.93	6.93

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		55	52	51	51	48	48	48	48	40
4,501 - 6,000	02		59	56	55	55	52	52	52	52	43
6,001 - 8,000	03		59	56	55	55	52	52	52	52	43
8,001 - 10,000	04		60	57	56	56	53	53	52	52	43
10,001 - 15,000	05		68	65	63	63	60	60	59	59	49
15,001 - 20,000	06		73	69	67	67	64	64	63	63	52
20,001 - 25,000	07		70	66	65	65	61	61	60	60	50
25,001 - 40,000	08		71	67	66	66	62	62	61	61	51
40,001 - 65,000	10		75	71	69	69	65	65	64	64	53
65,001 - 90,000	11		96	91	89	89	84	84	82	82	66
Charge Per \$1K > \$90K	12		0.48	0.48	0.48	0.48	0.48	0.48	0.48	0.48	0.48

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		241	241	235	234	224	207	207	199	180
4,501 - 6,000	02		241	241	235	234	224	207	207	199	180
6,001 - 8,000	03		244	244	238	236	226	209	209	201	182
8,001 - 10,000	04		269	269	263	260	249	230	230	221	199
10,001 - 15,000	05		283	283	276	274	262	241	241	232	209
15,001 - 20,000	06		304	304	297	294	281	259	259	248	223
20,001 - 25,000	07		307	307	299	296	284	260	260	250	224
25,001 - 40,000	08		323	323	315	312	298	274	274	263	236
40,001 - 65,000	10		388	388	378	375	358	327	327	314	280
65,001 - 90,000	11		654	654	636	630	600	546	546	521	461
Charge Per \$1K > \$90K	12		4.67	4.67	4.67	4.67	4.67	4.67	4.67	4.67	4.67

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
		250/500	11	250/500	92
		500/500	15	500/500	249
<u>Towing &amp; Labor (Rule 65)</u>					
\$25 per Disablement: 4					
\$50 per Disablement: 8					
\$100 per Disablement: 16					

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET

Territory 13

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B, Increased Limits

Property Damage Liability

20/40	59	100/300	413	5000	336
20/50	77	250/500	613	10000	410
25/50	118	500/500	776	25000	450
35/80	191	500/1000	785	50000	460
50/100	263	1000/1000	899	100000	464
				500000	467

Symbol

COLLISION \$500 DEDUCTIBLE

Cost New	Code	Age:	1	2	3	4	5	6	7	8	9
0 - 4,500	01		754	719	705	705	671	671	661	661	559
4,501 - 6,000	02		817	779	762	762	724	724	713	713	598
6,001 - 8,000	03		817	779	762	762	724	724	713	713	598
8,001 - 10,000	04		824	785	769	769	730	730	719	719	603
10,001 - 15,000	05		937	891	871	871	825	825	812	812	673
15,001 - 20,000	06		1000	950	928	928	878	878	864	864	713
20,001 - 25,000	07		958	910	890	890	843	843	829	829	686
25,001 - 40,000	08		979	930	909	909	860	860	847	847	700
40,001 - 65,000	10		1028	976	954	954	902	902	887	887	731
65,001 - 90,000	11		1325	1253	1223	1223	1151	1151	1131	1131	916
Charge Per \$1K > \$90K	12		6.59	6.59	6.59	6.59	6.59	6.59	6.59	6.59	6.59

Symbol

LIMITED COLLISION \$500 DEDUCTIBLE

Cost New	Code	Age:	1	2	3	4	5	6	7	8	9
0 - 4,500	01		53	50	49	49	47	47	46	46	39
4,501 - 6,000	02		57	54	53	53	51	51	50	50	42
6,001 - 8,000	03		57	54	53	53	51	51	50	50	42
8,001 - 10,000	04		58	55	54	54	51	51	50	50	42
10,001 - 15,000	05		65	62	61	61	58	58	57	57	47
15,001 - 20,000	06		70	66	65	65	61	61	60	60	50
20,001 - 25,000	07		67	64	62	62	59	59	58	58	48
25,001 - 40,000	08		68	65	63	63	60	60	59	59	49
40,001 - 65,000	10		72	68	67	67	63	63	62	62	51
65,001 - 90,000	11		92	87	85	85	80	80	79	79	64
Charge Per \$1K > \$90K	12		0.46	0.46	0.46	0.46	0.46	0.46	0.46	0.46	0.46

Symbol

COMPREHENSIVE \$500 DEDUCTIBLE

Cost New	Code	Age:	1	2	3	4	5	6	7	8	9
0 - 4,500	01		228	228	223	221	212	196	196	189	171
4,501 - 6,000	02		228	228	223	221	212	196	196	189	171
6,001 - 8,000	03		231	231	225	223	214	198	198	191	173
8,001 - 10,000	04		254	254	248	246	236	218	218	209	189
10,001 - 15,000	05		268	268	261	259	248	228	228	220	198
15,001 - 20,000	06		287	287	280	278	266	244	244	235	211
20,001 - 25,000	07		289	289	282	280	268	246	246	237	213
25,001 - 40,000	08		305	305	297	294	282	259	259	249	223
40,001 - 65,000	10		366	366	356	353	337	309	309	296	265
65,001 - 90,000	11		614	614	597	591	563	512	512	490	433
Charge Per \$1K > \$90K	12		4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35

Medical Payments

U1, Uninsured

U2, Underinsured

5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

Towing & Labor (Rule 65)

\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

R-80  
C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 14

A-1  
408

A-2  
76

B, Increased Limits				Property Damage Liability	
20/40	61	100/300	427	5000	347
20/50	80	250/500	633	10000	423
25/50	122	500/500	802	25000	465
35/80	197	500/1000	811	50000	475
50/100	272	1000/1000	929	100000	479
				500000	482

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		790	753	738	738	701	701	691	691	581
4,501 - 6,000	02		858	817	799	799	758	758	746	746	624
6,001 - 8,000	03		858	817	799	799	758	758	746	746	624
8,001 - 10,000	04		865	824	806	806	765	765	753	753	629
10,001 - 15,000	05		986	937	916	916	866	866	852	852	704
15,001 - 20,000	06		1054	1000	977	977	923	923	908	908	746
20,001 - 25,000	07		1009	958	936	936	885	885	870	870	718
25,001 - 40,000	08		1031	979	956	956	904	904	889	889	732
40,001 - 65,000	10		1084	1028	1004	1004	949	949	932	932	765
65,001 - 90,000	11		1401	1324	1292	1292	1215	1215	1193	1193	964
Charge Per \$1K > \$90K	12		7.05	7.05	7.05	7.05	7.05	7.05	7.05	7.05	7.05

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		55	53	52	52	49	49	48	48	41
4,501 - 6,000	02		60	57	56	56	53	53	52	52	44
6,001 - 8,000	03		60	57	56	56	53	53	52	52	44
8,001 - 10,000	04		61	58	57	57	54	54	53	53	44
10,001 - 15,000	05		69	66	64	64	61	61	60	60	49
15,001 - 20,000	06		74	70	69	69	65	65	64	64	52
20,001 - 25,000	07		71	67	66	66	62	62	61	61	50
25,001 - 40,000	08		72	69	67	67	64	64	62	62	51
40,001 - 65,000	10		76	72	71	71	67	67	65	65	54
65,001 - 90,000	11		98	93	91	91	85	85	84	84	68
Charge Per \$1K > \$90K	12		0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		263	263	257	255	244	225	225	216	195
4,501 - 6,000	02		263	263	257	255	244	225	225	216	195
6,001 - 8,000	03		266	266	259	257	246	227	227	218	197
8,001 - 10,000	04		294	294	287	284	272	250	250	240	216
10,001 - 15,000	05		310	310	302	299	286	263	263	253	227
15,001 - 20,000	06		333	333	325	322	308	282	282	271	243
20,001 - 25,000	07		336	336	327	324	310	284	284	273	244
25,001 - 40,000	08		354	354	345	342	327	299	299	287	257
40,001 - 65,000	10		427	427	416	412	393	359	359	344	306
65,001 - 90,000	11		723	723	703	696	663	602	602	575	508
Charge Per \$1K > \$90K	12		5.20	5.20	5.20	5.20	5.20	5.20	5.20	5.20	5.20

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					



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C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 15

A-1  
429

A-2  
79

B, Increased Limits				Property Damage Liability	
20/40	64	100/300	449	5000	365
20/50	84	250/500	665	10000	445
25/50	128	500/500	843	25000	489
35/80	207	500/1000	853	50000	500
50/100	286	1000/1000	976	100000	504
				500000	507

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		821	782	766	766	727	727	716	716	601
4,501 - 6,000	02		892	849	830	830	787	787	775	775	645
6,001 - 8,000	03		892	849	830	830	787	787	775	775	645
8,001 - 10,000	04		900	856	838	838	794	794	781	781	650
10,001 - 15,000	05		1027	975	953	953	901	901	886	886	730
15,001 - 20,000	06		1099	1042	1018	1018	961	961	945	945	775
20,001 - 25,000	07		1051	998	975	975	921	921	905	905	745
25,001 - 40,000	08		1075	1020	996	996	941	941	926	926	760
40,001 - 65,000	10		1131	1072	1047	1047	988	988	971	971	795
65,001 - 90,000	11		1465	1384	1350	1350	1269	1269	1246	1246	1004
Charge Per \$1K > \$90K	12		7.44	7.44	7.44	7.44	7.44	7.44	7.44	7.44	7.44

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		57	55	54	54	51	51	50	50	42
4,501 - 6,000	02		62	59	58	58	55	55	54	54	45
6,001 - 8,000	03		62	59	58	58	55	55	54	54	45
8,001 - 10,000	04		63	60	59	59	56	56	55	55	45
10,001 - 15,000	05		72	68	67	67	63	63	62	62	51
15,001 - 20,000	06		77	73	71	71	67	67	66	66	54
20,001 - 25,000	07		74	70	68	68	64	64	63	63	52
25,001 - 40,000	08		75	71	70	70	66	66	65	65	53
40,001 - 65,000	10		79	75	73	73	69	69	68	68	56
65,001 - 90,000	11		102	97	94	94	89	89	87	87	70
Charge Per \$1K > \$90K	12		0.52	0.52	0.52	0.52	0.52	0.52	0.52	0.52	0.52

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		247	247	241	239	229	212	212	204	184
4,501 - 6,000	02		247	247	241	239	229	212	212	204	184
6,001 - 8,000	03		250	250	244	242	232	214	214	206	186
8,001 - 10,000	04		276	276	269	267	256	235	235	226	204
10,001 - 15,000	05		291	291	283	281	269	247	247	238	214
15,001 - 20,000	06		312	312	304	302	289	265	265	254	228
20,001 - 25,000	07		315	315	307	304	291	267	267	256	230
25,001 - 40,000	08		331	331	323	320	306	281	281	270	241
40,001 - 65,000	10		399	399	388	385	368	336	336	322	287
65,001 - 90,000	11		673	673	654	648	617	561	561	536	474
Charge Per \$1K > \$90K	12		4.81	4.81	4.81	4.81	4.81	4.81	4.81	4.81	4.81

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

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C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET

Territory 16

A-1  
439

A-2  
81

B, Increased Limits				Property Damage Liability	
20/40	66	100/300	460	5000	374
20/50	86	250/500	682	10000	456
25/50	132	500/500	864	25000	501
35/80	212	500/1000	874	50000	512
50/100	293	1000/1000	1000	100000	516
				500000	520

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		885	842	824	824	781	781	769	769	641
4,501 - 6,000	02		964	916	896	896	848	848	834	834	690
6,001 - 8,000	03		964	916	896	896	848	848	834	834	690
8,001 - 10,000	04		973	924	904	904	855	855	841	841	696
10,001 - 15,000	05		1114	1056	1032	1032	974	974	957	957	784
15,001 - 20,000	06		1193	1131	1103	1103	1041	1041	1023	1023	834
20,001 - 25,000	07		1140	1081	1056	1056	996	996	979	979	801
25,001 - 40,000	08		1167	1106	1079	1079	1018	1018	1001	1001	817
40,001 - 65,000	10		1229	1164	1136	1136	1070	1070	1051	1051	856
65,001 - 90,000	11		1600	1510	1472	1472	1382	1382	1357	1357	1089
Charge Per \$1K > \$90K	12		8.25	8.25	8.25	8.25	8.25	8.25	8.25	8.25	8.25

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		62	59	58	58	55	55	54	54	45
4,501 - 6,000	02		68	64	63	63	60	60	59	59	48
6,001 - 8,000	03		68	64	63	63	60	60	59	59	48
8,001 - 10,000	04		68	65	64	64	60	60	59	59	49
10,001 - 15,000	05		78	74	73	73	68	68	67	67	55
15,001 - 20,000	06		84	79	78	78	73	73	72	72	59
20,001 - 25,000	07		80	76	74	74	70	70	69	69	56
25,001 - 40,000	08		82	78	76	76	72	72	70	70	57
40,001 - 65,000	10		86	82	80	80	75	75	74	74	60
65,001 - 90,000	11		113	106	104	104	97	97	95	95	77
Charge Per \$1K > \$90K	12		0.58	0.58	0.58	0.58	0.58	0.58	0.58	0.58	0.58

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		269	269	262	260	249	229	229	221	199
4,501 - 6,000	02		269	269	262	260	249	229	229	221	199
6,001 - 8,000	03		272	272	265	263	252	232	232	223	201
8,001 - 10,000	04		301	301	294	291	278	256	256	246	221
10,001 - 15,000	05		317	317	309	306	293	269	269	258	232
15,001 - 20,000	06		341	341	332	329	315	289	289	277	248
20,001 - 25,000	07		344	344	335	332	317	291	291	279	250
25,001 - 40,000	08		363	363	353	350	335	306	306	294	263
40,001 - 65,000	10		437	437	426	422	403	368	368	352	313
65,001 - 90,000	11		742	742	721	714	680	618	618	590	520
Charge Per \$1K > \$90K	12		5.34	5.34	5.34	5.34	5.34	5.34	5.34	5.34	5.34

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

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C.A.R.  
2/1/2018

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET

Territory 17

A-1  
532

A-2  
95

B, Increased Limits				Property Damage Liability	
20/40	80	100/300	557	5000	451
20/50	104	250/500	827	10000	550
25/50	160	500/500	1047	25000	604
35/80	257	500/1000	1059	50000	618
50/100	355	1000/1000	1212	100000	622
				500000	627

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1002	951	930	930	879	879	865	865	714
4,501 - 6,000	02		1095	1039	1014	1014	958	958	941	941	772
6,001 - 8,000	03		1095	1039	1014	1014	958	958	941	941	772
8,001 - 10,000	04		1106	1048	1024	1024	967	967	950	950	779
10,001 - 15,000	05		1272	1204	1175	1175	1107	1107	1087	1087	883
15,001 - 20,000	06		1365	1291	1259	1259	1185	1185	1164	1164	941
20,001 - 25,000	07		1303	1233	1203	1203	1133	1133	1113	1113	903
25,001 - 40,000	08		1334	1262	1231	1231	1159	1159	1139	1139	922
40,001 - 65,000	10		1407	1330	1297	1297	1220	1220	1198	1198	968
65,001 - 90,000	11		1845	1739	1694	1694	1588	1588	1558	1558	1242
Charge Per \$1K > \$90K	12		9.72	9.72	9.72	9.72	9.72	9.72	9.72	9.72	9.72

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		70	66	65	65	61	61	60	60	50
4,501 - 6,000	02		76	72	71	71	67	67	66	66	54
6,001 - 8,000	03		76	72	71	71	67	67	66	66	54
8,001 - 10,000	04		77	73	71	71	67	67	66	66	54
10,001 - 15,000	05		89	84	82	82	77	77	76	76	62
15,001 - 20,000	06		95	90	88	88	83	83	81	81	66
20,001 - 25,000	07		91	86	84	84	79	79	78	78	63
25,001 - 40,000	08		93	88	86	86	81	81	79	79	64
40,001 - 65,000	10		98	93	90	90	85	85	84	84	67
65,001 - 90,000	11		129	121	118	118	111	111	109	109	87
Charge Per \$1K > \$90K	12		0.68	0.68	0.68	0.68	0.68	0.68	0.68	0.68	0.68

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		277	277	270	268	256	236	236	227	204
4,501 - 6,000	02		277	277	270	268	256	236	236	227	204
6,001 - 8,000	03		280	280	273	271	259	238	238	229	206
8,001 - 10,000	04		310	310	302	300	287	263	263	253	227
10,001 - 15,000	05		327	327	319	316	302	277	277	266	238
15,001 - 20,000	06		352	352	343	340	325	297	297	285	255
20,001 - 25,000	07		354	354	345	342	327	300	300	287	257
25,001 - 40,000	08		374	374	364	361	345	315	315	303	270
40,001 - 65,000	10		451	451	440	435	415	379	379	363	323
65,001 - 90,000	11		767	767	745	738	703	638	638	609	538
Charge Per \$1K > \$90K	12		5.54	5.54	5.54	5.54	5.54	5.54	5.54	5.54	5.54

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

Towing & Labor (Rule 65)		U1, Uninsured		U2, Underinsured	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL**

**PRIVATE PASSENGER TYPE -- FLEET**  
**Territory 18**

A-1  
617

A-2  
109

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	92	100/300	645	5000	522
20/50	120	250/500	957	10000	637
25/50	184	500/500	1212	25000	699
35/80	298	500/1000	1226	50000	715
50/100	411	1000/1000	1404	100000	720
				500000	726

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1117	1059	1034	1034	976	976	959	959	786
4,501 - 6,000	02		1224	1159	1131	1131	1066	1066	1047	1047	853
6,001 - 8,000	03		1224	1159	1131	1131	1066	1066	1047	1047	853
8,001 - 10,000	04		1236	1170	1142	1142	1076	1076	1057	1057	861
10,001 - 15,000	05		1427	1349	1315	1315	1237	1237	1215	1215	980
15,001 - 20,000	06		1534	1450	1413	1413	1328	1328	1303	1303	1047
20,001 - 25,000	07		1463	1383	1348	1348	1267	1267	1244	1244	1003
25,001 - 40,000	08		1499	1416	1380	1380	1298	1298	1274	1274	1025
40,001 - 65,000	10		1583	1494	1456	1456	1368	1368	1342	1342	1077
65,001 - 90,000	11		2085	1964	1912	1912	1790	1790	1756	1756	1393
Charge Per \$1K > \$90K	12		11.17	11.17	11.17	11.17	11.17	11.17	11.17	11.17	11.17

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		78	74	73	73	69	69	67	67	55
4,501 - 6,000	02		86	81	79	79	75	75	74	74	60
6,001 - 8,000	03		86	81	79	79	75	75	74	74	60
8,001 - 10,000	04		87	82	80	80	76	76	74	74	60
10,001 - 15,000	05		100	95	92	92	87	87	85	85	69
15,001 - 20,000	06		108	102	99	99	93	93	92	92	74
20,001 - 25,000	07		103	97	95	95	89	89	87	87	70
25,001 - 40,000	08		105	100	97	97	91	91	90	90	72
40,001 - 65,000	10		111	105	102	102	96	96	94	94	76
65,001 - 90,000	11		147	138	134	134	126	126	123	123	98
Charge Per \$1K > \$90K	12		0.79	0.79	0.79	0.79	0.79	0.79	0.79	0.79	0.79

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		290	290	283	280	268	247	247	237	213
4,501 - 6,000	02		290	290	283	280	268	247	247	237	213
6,001 - 8,000	03		293	293	285	283	271	249	249	239	215
8,001 - 10,000	04		325	325	317	314	300	276	276	264	237
10,001 - 15,000	05		343	343	334	331	316	290	290	278	249
15,001 - 20,000	06		369	369	359	356	340	312	312	299	267
20,001 - 25,000	07		372	372	362	359	343	314	314	301	269
25,001 - 40,000	08		392	392	382	379	362	331	331	317	283
40,001 - 65,000	10		474	474	462	457	436	398	398	381	338
65,001 - 90,000	11		808	808	785	777	740	671	671	641	565
Charge Per \$1K > \$90K	12		5.85	5.85	5.85	5.85	5.85	5.85	5.85	5.85	5.85

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET

Territory 19

A-1  
723

A-2  
126

B, Increased Limits				Property Damage Liability	
20/40	108	100/300	756	5000	611
20/50	141	250/500	1122	10000	745
25/50	216	500/500	1421	25000	819
35/80	349	500/1000	1438	50000	837
50/100	482	1000/1000	1645	100000	843
				500000	849

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1264	1196	1168	1168	1100	1100	1080	1080	878
4,501 - 6,000	02		1389	1314	1281	1281	1205	1205	1183	1183	956
6,001 - 8,000	03		1389	1314	1281	1281	1205	1205	1183	1183	956
8,001 - 10,000	04		1404	1327	1294	1294	1217	1217	1195	1195	966
10,001 - 15,000	05		1626	1535	1496	1496	1405	1405	1379	1379	1105
15,001 - 20,000	06		1752	1653	1610	1610	1510	1510	1482	1482	1183
20,001 - 25,000	07		1668	1574	1534	1534	1440	1440	1413	1413	1131
25,001 - 40,000	08		1710	1613	1572	1572	1475	1475	1448	1448	1157
40,001 - 65,000	10		1808	1705	1660	1660	1557	1557	1527	1527	1218
65,001 - 90,000	11		2394	2252	2192	2192	2050	2050	2010	2010	1586
Charge Per \$1K > \$90K	12		13.04	13.04	13.04	13.04	13.04	13.04	13.04	13.04	13.04

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		88	83	81	81	77	77	75	75	61
4,501 - 6,000	02		97	91	89	89	84	84	82	82	67
6,001 - 8,000	03		97	91	89	89	84	84	82	82	67
8,001 - 10,000	04		98	92	90	90	85	85	83	83	67
10,001 - 15,000	05		113	107	104	104	98	98	96	96	77
15,001 - 20,000	06		122	115	112	112	105	105	103	103	82
20,001 - 25,000	07		116	110	107	107	100	100	98	98	79
25,001 - 40,000	08		119	112	109	109	103	103	101	101	81
40,001 - 65,000	10		126	119	116	116	108	108	106	106	85
65,001 - 90,000	11		167	157	153	153	143	143	140	140	110
Charge Per \$1K > \$90K	12		0.91	0.91	0.91	0.91	0.91	0.91	0.91	0.91	0.91

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		325	325	316	314	300	275	275	264	237
4,501 - 6,000	02		325	325	316	314	300	275	275	264	237
6,001 - 8,000	03		328	328	320	317	303	278	278	267	239
8,001 - 10,000	04		365	365	355	352	336	308	308	295	264
10,001 - 15,000	05		385	385	375	371	355	325	325	311	278
15,001 - 20,000	06		415	415	404	400	382	349	349	335	298
20,001 - 25,000	07		418	418	407	404	385	352	352	337	300
25,001 - 40,000	08		442	442	430	426	407	371	371	356	317
40,001 - 65,000	10		536	536	521	516	492	448	448	429	380
65,001 - 90,000	11		917	917	891	883	839	761	761	726	640
Charge Per \$1K > \$90K	12		6.70	6.70	6.70	6.70	6.70	6.70	6.70	6.70	6.70

Medical Payments		U1, Uninsured		U2, Underinsured	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement: 4		500/500	15	500/500	249
\$50 per Disablement: 8					
\$100 per Disablement: 16					

COMMERCIAL AUTOMOBILE INSURANCE MANUAL

PRIVATE PASSENGER TYPE -- FLEET  
Territory 20

A-1  
856

A-2  
147

B, Increased Limits				Property Damage Liability	
20/40	128	100/300	896	5000	722
20/50	167	250/500	1328	10000	881
25/50	256	500/500	1683	25000	967
35/80	413	500/1000	1702	50000	989
50/100	571	1000/1000	1948	100000	996
				500000	1004

Cost New	Symbol Code	Age:	COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		1362	1288	1256	1256	1182	1182	1161	1161	939
4,501 - 6,000	02		1499	1416	1380	1380	1298	1298	1273	1273	1025
6,001 - 8,000	03		1499	1416	1380	1380	1298	1298	1273	1273	1025
8,001 - 10,000	04		1514	1430	1395	1395	1310	1310	1286	1286	1035
10,001 - 15,000	05		1758	1659	1616	1616	1516	1516	1487	1487	1188
15,001 - 20,000	06		1895	1787	1740	1740	1631	1631	1600	1600	1273
20,001 - 25,000	07		1804	1701	1657	1657	1554	1554	1524	1524	1216
25,001 - 40,000	08		1850	1744	1699	1699	1593	1593	1563	1563	1245
40,001 - 65,000	10		1957	1844	1796	1796	1683	1683	1650	1650	1312
65,001 - 90,000	11		2599	2443	2378	2378	2222	2222	2178	2178	1714
Charge Per \$1K > \$90K	12		14.27	14.27	14.27	14.27	14.27	14.27	14.27	14.27	14.27

Cost New	Symbol Code	Age:	LIMITED COLLISION \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		96	90	88	88	83	83	82	82	66
4,501 - 6,000	02		105	100	97	97	91	91	89	89	72
6,001 - 8,000	03		105	100	97	97	91	91	89	89	72
8,001 - 10,000	04		106	101	98	98	92	92	90	90	73
10,001 - 15,000	05		124	117	114	114	107	107	105	105	83
15,001 - 20,000	06		133	126	122	122	115	115	112	112	89
20,001 - 25,000	07		127	120	116	116	109	109	107	107	85
25,001 - 40,000	08		130	123	119	119	112	112	110	110	87
40,001 - 65,000	10		138	130	126	126	118	118	116	116	92
65,001 - 90,000	11		183	172	167	167	156	156	153	153	120
Charge Per \$1K > \$90K	12		1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

Cost New	Symbol Code	Age:	COMPREHENSIVE \$500 DEDUCTIBLE								
			1	2	3	4	5	6	7	8	9
0 - 4,500	01		359	359	350	347	331	303	303	291	260
4,501 - 6,000	02		359	359	350	347	331	303	303	291	260
6,001 - 8,000	03		363	363	354	351	335	307	307	294	263
8,001 - 10,000	04		405	405	394	390	372	341	341	326	291
10,001 - 15,000	05		427	427	416	412	393	359	359	344	306
15,001 - 20,000	06		461	461	449	445	424	387	387	371	329
20,001 - 25,000	07		465	465	452	448	428	390	390	374	332
25,001 - 40,000	08		491	491	478	474	452	412	412	394	350
40,001 - 65,000	10		597	597	581	575	548	498	498	477	422
65,001 - 90,000	11		1027	1027	998	988	939	851	851	812	714
Charge Per \$1K > \$90K	12		7.55	7.55	7.55	7.55	7.55	7.55	7.55	7.55	7.55

Medical Payments	U1, Uninsured	U2, Underinsured
5000 25	20/40 5	20/40 0
10000 27	20/50 6	20/50 0
15000 29	25/50 7	25/50 0
20000 30	35/80 8	35/80 4
25000 32	50/100 9	50/100 8
	100/300 10	100/300 25
<u>Towing &amp; Labor (Rule 65)</u>	250/500 11	250/500 92
\$25 per Disablement: 4	500/500 15	500/500 249
\$50 per Disablement: 8		
\$100 per Disablement: 16		

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 1**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 2**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				



**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 3**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 4**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

R-91  
C.A.R.  
2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 5**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
		250/500	11	250/500	92
		500/500	15	500/500	249

Towing & Labor (Rule 65)  
\$25 per Disablement: 4  
\$50 per Disablement: 8  
\$100 per Disablement: 16

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 6**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 7**

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		250/500		500/500	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
 PRIVATE PASSENGER TYPE -- NON - FLEET  
 FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
 Territory 8**

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1087

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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
		250/500	11	250/500	92
		500/500	15	500/500	249

Towing & Labor (Rule 65)  
 \$25 per Disablement: 4  
 \$50 per Disablement: 8  
 \$100 per Disablement: 16

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 9**

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A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		250/500		500/500	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 10**

A-1  
1087

A-2  
335

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	162	100/300	1136	5000	946
20/50	212	250/500	1686	10000	1154
25/50	324	500/500	2135	25000	1268
35/80	524	500/1000	2160	50000	1296
50/100	724	1000/1000	2473	100000	1305
				500000	1315

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1903	1793	1747	1747	1637	1637	1605	1605	1278
4,501 - 6,000	02		2105	1983	1930	1930	1808	1808	1772	1772	1405
6,001 - 8,000	03		2105	1983	1930	1930	1808	1808	1772	1772	1405
8,001 - 10,000	04		2129	2004	1951	1951	1827	1827	1791	1791	1420
10,001 - 15,000	05		2489	2342	2278	2278	2131	2131	2089	2089	1645
15,001 - 20,000	06		2692	2532	2462	2462	2302	2302	2255	2255	1772
20,001 - 25,000	07		2557	2405	2340	2340	2188	2188	2143	2143	1688
25,001 - 40,000	08		2624	2468	2401	2401	2245	2245	2200	2200	1730
40,001 - 65,000	10		2783	2616	2544	2544	2378	2378	2329	2329	1829
65,001 - 90,000	11		3732	3502	3405	3405	3175	3175	3110	3110	2424
Charge Per \$1K > \$90K	12		21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10	21.10

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		133	125	122	122	114	114	112	112	89
4,501 - 6,000	02		147	139	135	135	126	126	124	124	98
6,001 - 8,000	03		147	139	135	135	126	126	124	124	98
8,001 - 10,000	04		149	140	136	136	128	128	125	125	99
10,001 - 15,000	05		174	164	159	159	149	149	146	146	115
15,001 - 20,000	06		188	177	172	172	161	161	158	158	124
20,001 - 25,000	07		179	168	164	164	153	153	150	150	118
25,001 - 40,000	08		184	173	168	168	157	157	154	154	121
40,001 - 65,000	10		195	183	178	178	166	166	163	163	128
65,001 - 90,000	11		261	245	238	238	222	222	217	217	169
Charge Per \$1K > \$90K	12		1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48	1.48

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		427	427	415	412	393	359	359	344	306
4,501 - 6,000	02		427	427	415	412	393	359	359	344	306
6,001 - 8,000	03		431	431	420	416	397	363	363	347	309
8,001 - 10,000	04		482	482	469	464	443	404	404	387	344
10,001 - 15,000	05		509	509	496	491	468	427	427	408	362
15,001 - 20,000	06		551	551	536	531	506	461	461	440	390
20,001 - 25,000	07		555	555	540	535	510	464	464	444	394
25,001 - 40,000	08		588	588	571	566	539	491	491	469	416
40,001 - 65,000	10		716	716	696	690	656	596	596	570	503
65,001 - 90,000	11		1240	1240	1204	1192	1133	1026	1026	978	859
Charge Per \$1K > \$90K	12		9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19	9.19

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>250/500</u>		<u>500/500</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				



**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 11**

A-1  
338

A-2  
102

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	50	100/300	353	5000	296
20/50	66	250/500	523	10000	361
25/50	100	500/500	663	25000	397
35/80	163	500/1000	671	50000	406
50/100	225	1000/1000	768	100000	408
				500000	411

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		735	702	688	688	655	655	646	646	547
4,501 - 6,000	02		797	760	744	744	707	707	696	696	585
6,001 - 8,000	03		797	760	744	744	707	707	696	696	585
8,001 - 10,000	04		803	766	750	750	713	713	702	702	590
10,001 - 15,000	05		912	868	849	849	804	804	791	791	658
15,001 - 20,000	06		973	925	904	904	856	856	842	842	696
20,001 - 25,000	07		933	887	867	867	821	821	808	808	671
25,001 - 40,000	08		953	906	886	886	838	838	825	825	683
40,001 - 65,000	10		1001	950	929	929	879	879	864	864	713
65,001 - 90,000	11		1287	1218	1188	1188	1119	1119	1099	1099	893
Charge Per \$1K > \$90K	12		6.36	6.36	6.36	6.36	6.36	6.36	6.36	6.36	6.36

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		52	49	48	48	46	46	45	45	38
4,501 - 6,000	02		56	53	52	52	50	50	49	49	41
6,001 - 8,000	03		56	53	52	52	50	50	49	49	41
8,001 - 10,000	04		56	54	53	53	50	50	49	49	41
10,001 - 15,000	05		64	61	60	60	56	56	56	56	46
15,001 - 20,000	06		68	65	64	64	60	60	59	59	49
20,001 - 25,000	07		66	62	61	61	58	58	57	57	47
25,001 - 40,000	08		67	64	62	62	59	59	58	58	48
40,001 - 65,000	10		70	67	65	65	62	62	61	61	50
65,001 - 90,000	11		90	86	84	84	79	79	77	77	63
Charge Per \$1K > \$90K	12		0.45	0.45	0.45	0.45	0.45	0.45	0.45	0.45	0.45

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		205	205	200	198	191	177	177	171	155
4,501 - 6,000	02		205	205	200	198	191	177	177	171	155
6,001 - 8,000	03		206	206	202	200	192	178	178	172	156
8,001 - 10,000	04		227	227	222	220	211	195	195	188	170
10,001 - 15,000	05		239	239	233	231	222	205	205	197	178
15,001 - 20,000	06		256	256	249	247	237	219	219	210	190
20,001 - 25,000	07		257	257	251	249	239	220	220	212	191
25,001 - 40,000	08		271	271	264	262	251	231	231	222	200
40,001 - 65,000	10		323	323	315	312	299	274	274	263	236
65,001 - 90,000	11		538	538	524	519	495	451	451	431	382
Charge Per \$1K > \$90K	12		3.77	3.77	3.77	3.77	3.77	3.77	3.77	3.77	3.77

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>250/500</u>		<u>500/500</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 12**

A-1  
388

A-2  
118

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	58	100/300	406	5000	340
20/50	76	250/500	602	10000	415
25/50	116	500/500	763	25000	456
35/80	187	500/1000	772	50000	466
50/100	259	1000/1000	883	100000	469
				500000	473

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		864	822	805	805	763	763	751	751	628
4,501 - 6,000	02		940	894	874	874	828	828	814	814	675
6,001 - 8,000	03		940	894	874	874	828	828	814	814	675
8,001 - 10,000	04		949	902	882	882	835	835	821	821	681
10,001 - 15,000	05		1086	1030	1006	1006	950	950	934	934	766
15,001 - 20,000	06		1162	1102	1075	1075	1015	1015	997	997	814
20,001 - 25,000	07		1111	1054	1029	1029	972	972	955	955	782
25,001 - 40,000	08		1137	1078	1052	1052	993	993	976	976	798
40,001 - 65,000	10		1197	1134	1106	1106	1043	1043	1025	1025	836
65,001 - 90,000	11		1556	1469	1432	1432	1345	1345	1320	1320	1061
Charge Per \$1K > \$90K	12		7.98	7.98	7.98	7.98	7.98	7.98	7.98	7.98	7.98

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		60	57	56	56	53	53	52	52	44
4,501 - 6,000	02		66	62	61	61	58	58	57	57	47
6,001 - 8,000	03		66	62	61	61	58	58	57	57	47
8,001 - 10,000	04		66	63	62	62	58	58	57	57	48
10,001 - 15,000	05		76	72	70	70	66	66	65	65	53
15,001 - 20,000	06		81	77	75	75	71	71	70	70	57
20,001 - 25,000	07		78	74	72	72	68	68	67	67	55
25,001 - 40,000	08		79	75	73	73	69	69	68	68	56
40,001 - 65,000	10		83	79	77	77	73	73	72	72	58
65,001 - 90,000	11		108	102	100	100	94	94	92	92	74
Charge Per \$1K > \$90K	12		0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		214	214	209	207	199	184	184	178	161
4,501 - 6,000	02		214	214	209	207	199	184	184	178	161
6,001 - 8,000	03		216	216	211	209	201	186	186	179	162
8,001 - 10,000	04		237	237	232	230	220	204	204	196	177
10,001 - 15,000	05		249	249	243	241	231	214	214	206	186
15,001 - 20,000	06		267	267	261	259	248	228	228	219	198
20,001 - 25,000	07		269	269	263	261	250	230	230	221	199
25,001 - 40,000	08		283	283	276	274	262	241	241	232	209
40,001 - 65,000	10		339	339	331	328	313	287	287	276	247
65,001 - 90,000	11		567	567	551	546	520	474	474	453	401
Charge Per \$1K > \$90K	12		3.99	3.99	3.99	3.99	3.99	3.99	3.99	3.99	3.99

<u>Medical Payments</u>	
5000	25
10000	27
15000	29
20000	30
25000	32

<u>U1, Uninsured</u>	
20/40	5
20/50	6
25/50	7
35/80	8
50/100	9
100/300	10
250/500	11
500/500	15

<u>U2, Underinsured</u>	
20/40	0
20/50	0
25/50	0
35/80	4
50/100	8
100/300	25
250/500	92
500/500	249

<u>Towing &amp; Labor (Rule 65)</u>	
\$25 per Disablement:	4
\$50 per Disablement:	8
\$100 per Disablement:	16

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 13**

A-1  
375

A-2  
113

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	56	100/300	392	5000	328
20/50	73	250/500	582	10000	400
25/50	112	500/500	737	25000	440
35/80	181	500/1000	746	50000	449
50/100	250	1000/1000	853	100000	453
				500000	456

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		832	793	776	776	737	737	725	725	608
4,501 - 6,000	02		905	861	842	842	798	798	785	785	653
6,001 - 8,000	03		905	861	842	842	798	798	785	785	653
8,001 - 10,000	04		913	869	850	850	805	805	792	792	659
10,001 - 15,000	05		1043	990	967	967	914	914	899	899	740
15,001 - 20,000	06		1116	1058	1033	1033	975	975	959	959	785
20,001 - 25,000	07		1067	1013	989	989	935	935	919	919	755
25,001 - 40,000	08		1091	1035	1011	1011	955	955	939	939	770
40,001 - 65,000	10		1148	1088	1063	1063	1003	1003	985	985	806
65,001 - 90,000	11		1489	1407	1372	1372	1289	1289	1266	1266	1019
Charge Per \$1K > \$90K	12		7.58	7.58	7.58	7.58	7.58	7.58	7.58	7.58	7.58

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		58	56	54	54	52	52	51	51	43
4,501 - 6,000	02		63	60	59	59	56	56	55	55	46
6,001 - 8,000	03		63	60	59	59	56	56	55	55	46
8,001 - 10,000	04		64	61	60	60	56	56	56	56	46
10,001 - 15,000	05		73	69	68	68	64	64	63	63	52
15,001 - 20,000	06		78	74	72	72	68	68	67	67	55
20,001 - 25,000	07		75	71	69	69	66	66	64	64	53
25,001 - 40,000	08		77	73	71	71	67	67	66	66	54
40,001 - 65,000	10		81	76	75	75	70	70	69	69	56
65,001 - 90,000	11		104	99	96	96	90	90	89	89	71
Charge Per \$1K > \$90K	12		0.53	0.53	0.53	0.53	0.53	0.53	0.53	0.53	0.53

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		202	202	197	196	188	174	174	168	153
4,501 - 6,000	02		202	202	197	196	188	174	174	168	153
6,001 - 8,000	03		203	203	199	197	190	176	176	170	154
8,001 - 10,000	04		224	224	219	217	208	193	193	186	168
10,001 - 15,000	05		235	235	229	228	218	202	202	194	176
15,001 - 20,000	06		252	252	245	243	233	215	215	207	187
20,001 - 25,000	07		253	253	247	245	235	217	217	209	188
25,001 - 40,000	08		266	266	260	258	247	227	227	219	197
40,001 - 65,000	10		318	318	310	307	294	270	270	259	232
65,001 - 90,000	11		529	529	515	510	486	443	443	424	376
Charge Per \$1K > \$90K	12		3.70	3.70	3.70	3.70	3.70	3.70	3.70	3.70	3.70

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

R-100  
C.A.R.  
2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 14**

A-1  
388

A-2  
117

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	58	100/300	406	5000	339
20/50	76	250/500	602	10000	414
25/50	116	500/500	763	25000	454
35/80	187	500/1000	772	50000	464
50/100	259	1000/1000	883	100000	468
				500000	471

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		874	832	814	814	772	772	760	760	634
4,501 - 6,000	02		952	905	885	885	838	838	824	824	683
6,001 - 8,000	03		952	905	885	885	838	838	824	824	683
8,001 - 10,000	04		961	913	893	893	845	845	831	831	689
10,001 - 15,000	05		1100	1043	1019	1019	962	962	946	946	775
15,001 - 20,000	06		1178	1116	1089	1089	1028	1028	1010	1010	824
20,001 - 25,000	07		1126	1067	1042	1042	984	984	967	967	792
25,001 - 40,000	08		1152	1092	1066	1066	1006	1006	989	989	808
40,001 - 65,000	10		1213	1149	1121	1121	1057	1057	1038	1038	846
65,001 - 90,000	11		1578	1489	1452	1452	1364	1364	1338	1338	1075
Charge Per \$1K > \$90K	12		8.11	8.11	8.11	8.11	8.11	8.11	8.11	8.11	8.11

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		61	58	57	57	54	54	53	53	44
4,501 - 6,000	02		67	63	62	62	59	59	58	58	48
6,001 - 8,000	03		67	63	62	62	59	59	58	58	48
8,001 - 10,000	04		67	64	63	63	59	59	58	58	48
10,001 - 15,000	05		77	73	71	71	67	67	66	66	54
15,001 - 20,000	06		82	78	76	76	72	72	71	71	58
20,001 - 25,000	07		79	75	73	73	69	69	68	68	55
25,001 - 40,000	08		81	76	75	75	70	70	69	69	57
40,001 - 65,000	10		85	80	79	79	74	74	73	73	59
65,001 - 90,000	11		110	104	102	102	95	95	94	94	75
Charge Per \$1K > \$90K	12		0.57	0.57	0.57	0.57	0.57	0.57	0.57	0.57	0.57

<u>Cost New</u>	<u>Symbol Code</u>	Age:	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		231	231	226	224	215	199	199	192	173
4,501 - 6,000	02		231	231	226	224	215	199	199	192	173
6,001 - 8,000	03		234	234	228	226	217	201	201	193	175
8,001 - 10,000	04		258	258	252	249	239	221	221	212	191
10,001 - 15,000	05		271	271	265	262	251	231	231	223	200
15,001 - 20,000	06		291	291	284	281	269	248	248	238	214
20,001 - 25,000	07		293	293	286	284	271	249	249	240	215
25,001 - 40,000	08		309	309	301	298	286	262	262	252	226
40,001 - 65,000	10		371	371	361	358	342	313	313	300	268
65,001 - 90,000	11		623	623	606	600	571	520	520	497	440
Charge Per \$1K > \$90K	12		4.43	4.43	4.43	4.43	4.43	4.43	4.43	4.43	4.43

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

R-101  
C.A.R.  
2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 15**

A-1  
407

A-2  
123

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	61	100/300	426	5000	356
20/50	80	250/500	632	10000	434
25/50	122	500/500	800	25000	477
35/80	197	500/1000	810	50000	488
50/100	272	1000/1000	927	100000	491
				500000	495

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		910	865	846	846	802	802	789	789	656
4,501 - 6,000	02		992	942	921	921	871	871	857	857	708
6,001 - 8,000	03		992	942	921	921	871	871	857	857	708
8,001 - 10,000	04		1001	951	929	929	879	879	864	864	714
10,001 - 15,000	05		1148	1088	1062	1062	1002	1002	985	985	805
15,001 - 20,000	06		1230	1165	1137	1137	1072	1072	1053	1053	857
20,001 - 25,000	07		1175	1113	1087	1087	1025	1025	1007	1007	822
25,001 - 40,000	08		1203	1139	1112	1112	1048	1048	1030	1030	840
40,001 - 65,000	10		1267	1199	1170	1170	1102	1102	1083	1083	880
65,001 - 90,000	11		1652	1559	1519	1519	1426	1426	1399	1399	1121
Charge Per \$1K > \$90K	12		8.56	8.56	8.56	8.56	8.56	8.56	8.56	8.56	8.56

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		64	61	60	60	56	56	56	56	46
4,501 - 6,000	02		70	66	65	65	61	61	60	60	50
6,001 - 8,000	03		70	66	65	65	61	61	60	60	50
8,001 - 10,000	04		71	67	65	65	62	62	61	61	50
10,001 - 15,000	05		81	77	75	75	71	71	69	69	57
15,001 - 20,000	06		87	82	80	80	76	76	74	74	60
20,001 - 25,000	07		83	78	77	77	72	72	71	71	58
25,001 - 40,000	08		85	80	78	78	74	74	73	73	59
40,001 - 65,000	10		89	85	82	82	78	78	76	76	62
65,001 - 90,000	11		117	110	107	107	101	101	99	99	79
Charge Per \$1K > \$90K	12		0.60	0.60	0.60	0.60	0.60	0.60	0.60	0.60	0.60

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		218	218	213	212	203	188	188	181	165
4,501 - 6,000	02		218	218	213	212	203	188	188	181	165
6,001 - 8,000	03		221	221	215	214	205	190	190	183	166
8,001 - 10,000	04		243	243	237	235	226	208	208	201	181
10,001 - 15,000	05		255	255	249	247	237	218	218	210	190
15,001 - 20,000	06		274	274	267	265	254	234	234	225	202
20,001 - 25,000	07		276	276	269	267	256	235	235	226	204
25,001 - 40,000	08		290	290	283	281	269	247	247	238	214
40,001 - 65,000	10		348	348	339	336	321	294	294	282	253
65,001 - 90,000	11		582	582	566	561	534	487	487	465	412
Charge Per \$1K > \$90K	12		4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

R-102  
 C.A.R.  
 2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
 PRIVATE PASSENGER TYPE -- NON - FLEET  
 FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
 Territory 16**

A-1  
 417

A-2  
 127

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	62	100/300	436	5000	365
20/50	81	250/500	646	10000	445
25/50	124	500/500	819	25000	489
35/80	201	500/1000	828	50000	500
50/100	278	1000/1000	948	100000	504
				500000	507

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		983	934	913	913	864	864	850	850	703
4,501 - 6,000	02		1075	1020	996	996	941	941	925	925	759
6,001 - 8,000	03		1075	1020	996	996	941	941	925	925	759
8,001 - 10,000	04		1085	1029	1005	1005	949	949	933	933	766
10,001 - 15,000	05		1247	1181	1152	1152	1086	1086	1067	1067	868
15,001 - 20,000	06		1338	1266	1235	1235	1163	1163	1142	1142	925
20,001 - 25,000	07		1278	1209	1180	1180	1112	1112	1092	1092	887
25,001 - 40,000	08		1308	1238	1207	1207	1137	1137	1117	1117	906
40,001 - 65,000	10		1379	1304	1272	1272	1197	1197	1175	1175	950
65,001 - 90,000	11		1806	1703	1659	1659	1556	1556	1526	1526	1218
Charge Per \$1K > \$90K	12		9.49	9.49	9.49	9.49	9.49	9.49	9.49	9.49	9.49

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		69	65	64	64	61	61	60	60	49
4,501 - 6,000	02		75	71	70	70	66	66	65	65	53
6,001 - 8,000	03		75	71	70	70	66	66	65	65	53
8,001 - 10,000	04		76	72	70	70	66	66	65	65	54
10,001 - 15,000	05		87	83	81	81	76	76	75	75	61
15,001 - 20,000	06		94	89	87	87	81	81	80	80	65
20,001 - 25,000	07		90	85	83	83	78	78	76	76	62
25,001 - 40,000	08		92	87	85	85	80	80	78	78	63
40,001 - 65,000	10		97	91	89	89	84	84	82	82	67
65,001 - 90,000	11		127	119	116	116	109	109	107	107	85
Charge Per \$1K > \$90K	12		0.67	0.67	0.67	0.67	0.67	0.67	0.67	0.67	0.67

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		237	237	232	230	220	203	203	196	177
4,501 - 6,000	02		237	237	232	230	220	203	203	196	177
6,001 - 8,000	03		240	240	234	232	222	206	206	198	179
8,001 - 10,000	04		265	265	258	256	245	226	226	217	196
10,001 - 15,000	05		278	278	272	269	258	237	237	228	205
15,001 - 20,000	06		299	299	291	289	277	254	254	244	219
20,001 - 25,000	07		301	301	294	291	279	256	256	246	221
25,001 - 40,000	08		317	317	309	307	293	269	269	259	232
40,001 - 65,000	10		381	381	371	368	352	322	322	308	275
65,001 - 90,000	11		642	642	624	618	589	535	535	512	452
Charge Per \$1K > \$90K	12		4.57	4.57	4.57	4.57	4.57	4.57	4.57	4.57	4.57

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

R-103  
 C.A.R.  
 2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
 PRIVATE PASSENGER TYPE -- NON - FLEET  
 FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
 Territory 17**

A-1  
504

A-2  
154

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	75	100/300	527	5000	440
20/50	98	250/500	781	10000	537
25/50	150	500/500	990	25000	590
35/80	243	500/1000	1001	50000	603
50/100	336	1000/1000	1146	100000	607
				500000	612

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1119	1060	1036	1036	977	977	961	961	787
4,501 - 6,000	02		1226	1161	1133	1133	1068	1068	1049	1049	854
6,001 - 8,000	03		1226	1161	1133	1133	1068	1068	1049	1049	854
8,001 - 10,000	04		1238	1172	1144	1144	1078	1078	1059	1059	862
10,001 - 15,000	05		1430	1351	1318	1318	1239	1239	1217	1217	982
15,001 - 20,000	06		1537	1452	1415	1415	1330	1330	1306	1306	1049
20,001 - 25,000	07		1466	1385	1350	1350	1270	1270	1246	1246	1004
25,001 - 40,000	08		1501	1419	1383	1383	1300	1300	1276	1276	1027
40,001 - 65,000	10		1585	1497	1459	1459	1370	1370	1345	1345	1079
65,001 - 90,000	11		2089	1967	1916	1916	1794	1794	1759	1759	1395
Charge Per \$1K > \$90K	12		11.20	11.20	11.20	11.20	11.20	11.20	11.20	11.20	11.20

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		78	74	73	73	69	69	67	67	55
4,501 - 6,000	02		86	81	79	79	75	75	74	74	60
6,001 - 8,000	03		86	81	79	79	75	75	74	74	60
8,001 - 10,000	04		87	82	80	80	76	76	74	74	60
10,001 - 15,000	05		100	95	92	92	87	87	85	85	69
15,001 - 20,000	06		108	102	99	99	93	93	92	92	74
20,001 - 25,000	07		103	97	95	95	89	89	87	87	70
25,001 - 40,000	08		105	100	97	97	91	91	90	90	72
40,001 - 65,000	10		111	105	102	102	96	96	94	94	76
65,001 - 90,000	11		147	138	134	134	126	126	123	123	98
Charge Per \$1K > \$90K	12		0.79	0.79	0.79	0.79	0.79	0.79	0.79	0.79	0.79

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		243	243	237	235	226	208	208	201	181
4,501 - 6,000	02		243	243	237	235	226	208	208	201	181
6,001 - 8,000	03		246	246	240	238	228	210	210	202	183
8,001 - 10,000	04		272	272	265	263	252	232	232	223	201
10,001 - 15,000	05		286	286	279	276	264	243	243	234	210
15,001 - 20,000	06		307	307	299	297	284	261	261	250	225
20,001 - 25,000	07		309	309	301	299	286	263	263	252	226
25,001 - 40,000	08		326	326	318	315	301	276	276	265	238
40,001 - 65,000	10		392	392	382	378	361	330	330	317	282
65,001 - 90,000	11		661	661	642	636	606	551	551	526	465
Charge Per \$1K > \$90K	12		4.72	4.72	4.72	4.72	4.72	4.72	4.72	4.72	4.72

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				

R-104  
C.A.R.  
2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 18**

A-1  
583

A-2  
178

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	87	100/300	610	5000	509
20/50	114	250/500	904	10000	621
25/50	174	500/500	1146	25000	682
35/80	281	500/1000	1159	50000	697
50/100	389	1000/1000	1327	100000	702
				500000	708

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1250	1183	1155	1155	1088	1088	1068	1068	869
4,501 - 6,000	02		1373	1299	1266	1266	1192	1192	1170	1170	946
6,001 - 8,000	03		1373	1299	1266	1266	1192	1192	1170	1170	946
8,001 - 10,000	04		1387	1311	1279	1279	1203	1203	1182	1182	955
10,001 - 15,000	05		1607	1517	1479	1479	1389	1389	1363	1363	1093
15,001 - 20,000	06		1730	1633	1590	1590	1493	1493	1464	1464	1170
20,001 - 25,000	07		1648	1556	1516	1516	1423	1423	1396	1396	1119
25,001 - 40,000	08		1689	1594	1553	1553	1458	1458	1431	1431	1144
40,001 - 65,000	10		1786	1684	1640	1640	1539	1539	1509	1509	1205
65,001 - 90,000	11		2364	2224	2165	2165	2025	2025	1985	1985	1567
Charge Per \$1K > \$90K	12		12.85	12.85	12.85	12.85	12.85	12.85	12.85	12.85	12.85

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		87	82	80	80	76	76	74	74	61
4,501 - 6,000	02		96	90	88	88	83	83	82	82	66
6,001 - 8,000	03		96	90	88	88	83	83	82	82	66
8,001 - 10,000	04		97	91	89	89	84	84	82	82	67
10,001 - 15,000	05		112	106	103	103	97	97	95	95	76
15,001 - 20,000	06		121	114	111	111	104	104	102	102	82
20,001 - 25,000	07		115	108	106	106	99	99	97	97	78
25,001 - 40,000	08		118	111	108	108	102	102	100	100	80
40,001 - 65,000	10		124	117	114	114	107	107	105	105	84
65,001 - 90,000	11		165	155	151	151	141	141	138	138	109
Charge Per \$1K > \$90K	12		0.89	0.89	0.89	0.89	0.89	0.89	0.89	0.89	0.89

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		255	255	249	247	237	218	218	210	190
4,501 - 6,000	02		255	255	249	247	237	218	218	210	190
6,001 - 8,000	03		258	258	251	249	239	220	220	212	191
8,001 - 10,000	04		285	285	278	276	264	243	243	233	210
10,001 - 15,000	05		300	300	293	290	278	255	255	245	220
15,001 - 20,000	06		323	323	314	312	298	274	274	263	235
20,001 - 25,000	07		325	325	317	314	300	276	276	265	237
25,001 - 40,000	08		343	343	334	331	316	290	290	278	249
40,001 - 65,000	10		413	413	402	398	380	348	348	333	297
65,001 - 90,000	11		698	698	679	672	640	582	582	556	491
Charge Per \$1K > \$90K	12		5.01	5.01	5.01	5.01	5.01	5.01	5.01	5.01	5.01

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25
<u>Towing &amp; Labor (Rule 65)</u>		250/500	11	250/500	92
\$25 per Disablement:	4	500/500	15	500/500	249
\$50 per Disablement:	8				
\$100 per Disablement:	16				



R-105  
C.A.R.  
2/1/2018

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL  
PRIVATE PASSENGER TYPE -- NON - FLEET  
FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES  
Territory 19**

A-1  
682

A-2  
209

<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	102	100/300	714	5000	595
20/50	133	250/500	1058	10000	726
25/50	204	500/500	1341	25000	797
35/80	329	500/1000	1356	50000	815
50/100	455	1000/1000	1552	100000	821
				500000	827

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1420	1342	1309	1309	1231	1231	1209	1209	976
4,501 - 6,000	02		1564	1477	1440	1440	1353	1353	1327	1327	1066
6,001 - 8,000	03		1564	1477	1440	1440	1353	1353	1327	1327	1066
8,001 - 10,000	04		1581	1492	1455	1455	1366	1366	1341	1341	1077
10,001 - 15,000	05		1837	1732	1687	1687	1582	1582	1552	1552	1237
15,001 - 20,000	06		1981	1867	1818	1818	1704	1704	1671	1671	1327
20,001 - 25,000	07		1885	1777	1731	1731	1623	1623	1591	1591	1267
25,001 - 40,000	08		1933	1822	1774	1774	1663	1663	1632	1632	1297
40,001 - 65,000	10		2046	1927	1876	1876	1758	1758	1723	1723	1368
65,001 - 90,000	11		2721	2558	2489	2489	2325	2325	2279	2279	1791
Charge Per \$1K > \$90K	12		15.01	15.01	15.01	15.01	15.01	15.01	15.01	15.01	15.01

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		100	94	92	92	86	86	85	85	68
4,501 - 6,000	02		110	104	101	101	95	95	93	93	75
6,001 - 8,000	03		110	104	101	101	95	95	93	93	75
8,001 - 10,000	04		111	105	102	102	96	96	94	94	75
10,001 - 15,000	05		129	121	118	118	111	111	109	109	87
15,001 - 20,000	06		139	131	127	127	119	119	117	117	93
20,001 - 25,000	07		132	125	121	121	114	114	112	112	89
25,001 - 40,000	08		136	128	124	124	117	117	114	114	91
40,001 - 65,000	10		143	135	132	132	123	123	121	121	96
65,001 - 90,000	11		191	179	174	174	163	163	160	160	126
Charge Per \$1K > \$90K	12		1.05	1.05	1.05	1.05	1.05	1.05	1.05	1.05	1.05

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		284	284	277	274	263	242	242	233	209
4,501 - 6,000	02		284	284	277	274	263	242	242	233	209
6,001 - 8,000	03		287	287	280	277	265	244	244	235	211
8,001 - 10,000	04		318	318	310	307	294	270	270	259	232
10,001 - 15,000	05		335	335	327	324	310	284	284	272	244
15,001 - 20,000	06		361	361	352	348	333	305	305	292	261
20,001 - 25,000	07		364	364	354	351	336	307	307	295	263
25,001 - 40,000	08		384	384	374	370	354	324	324	310	277
40,001 - 65,000	10		464	464	451	447	427	389	389	373	331
65,001 - 90,000	11		789	789	767	759	723	656	656	626	552
Charge Per \$1K > \$90K	12		5.71	5.71	5.71	5.71	5.71	5.71	5.71	5.71	5.71

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**COMMERCIAL AUTOMOBILE INSURANCE MANUAL**  
**PRIVATE PASSENGER TYPE -- NON - FLEET**  
**FACTORS ONLY FOR MISCELLANEOUS VEHICLE TYPES**  
**Territory 20**

A-1  
806

A-2  
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<u>B, Increased Limits</u>				<u>Property Damage Liability</u>	
20/40	121	100/300	844	5000	703
20/50	158	250/500	1252	10000	858
25/50	242	500/500	1586	25000	942
35/80	390	500/1000	1604	50000	963
50/100	538	1000/1000	1836	100000	970
				500000	977

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		1532	1447	1411	1411	1325	1325	1301	1301	1046
4,501 - 6,000	02		1690	1595	1554	1554	1458	1458	1430	1430	1145
6,001 - 8,000	03		1690	1595	1554	1554	1458	1458	1430	1430	1145
8,001 - 10,000	04		1708	1611	1570	1570	1473	1473	1445	1445	1156
10,001 - 15,000	05		1989	1874	1825	1825	1710	1710	1677	1677	1332
15,001 - 20,000	06		2146	2022	1967	1967	1843	1843	1806	1806	1430
20,001 - 25,000	07		2041	1923	1872	1872	1754	1754	1719	1719	1365
25,001 - 40,000	08		2094	1972	1920	1920	1798	1798	1764	1764	1398
40,001 - 65,000	10		2217	2087	2031	2031	1902	1902	1864	1864	1475
65,001 - 90,000	11		2956	2777	2701	2701	2522	2522	2472	2472	1938
Charge Per \$1K > \$90K	12		16.42	16.42	16.42	16.42	16.42	16.42	16.42	16.42	16.42

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>LIMITED COLLISION \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		107	101	99	99	93	93	91	91	73
4,501 - 6,000	02		118	112	109	109	102	102	100	100	80
6,001 - 8,000	03		118	112	109	109	102	102	100	100	80
8,001 - 10,000	04		119	113	110	110	103	103	101	101	81
10,001 - 15,000	05		139	131	128	128	120	120	117	117	93
15,001 - 20,000	06		150	141	138	138	129	129	126	126	100
20,001 - 25,000	07		143	135	131	131	123	123	120	120	95
25,001 - 40,000	08		146	138	134	134	126	126	123	123	98
40,001 - 65,000	10		155	146	142	142	133	133	130	130	103
65,001 - 90,000	11		207	194	189	189	176	176	173	173	136
Charge Per \$1K > \$90K	12		1.15	1.15	1.15	1.15	1.15	1.15	1.15	1.15	1.15

<u>Cost New</u>	<u>Symbol Code</u>	<u>Age:</u>	<u>COMPREHENSIVE \$500 DEDUCTIBLE</u>								
			<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>
0 - 4,500	01		314	314	306	303	290	266	266	256	229
4,501 - 6,000	02		314	314	306	303	290	266	266	256	229
6,001 - 8,000	03		317	317	309	306	293	269	269	258	231
8,001 - 10,000	04		352	352	343	340	325	298	298	286	255
10,001 - 15,000	05		372	372	362	359	343	314	314	301	269
15,001 - 20,000	06		400	400	390	386	369	337	337	323	288
20,001 - 25,000	07		404	404	393	390	372	340	340	326	290
25,001 - 40,000	08		426	426	415	411	392	358	358	344	306
40,001 - 65,000	10		516	516	502	498	474	432	432	414	367
65,001 - 90,000	11		883	883	858	850	808	733	733	700	616
Charge Per \$1K > \$90K	12		6.43	6.43	6.43	6.43	6.43	6.43	6.43	6.43	6.43

<u>Medical Payments</u>		<u>U1, Uninsured</u>		<u>U2, Underinsured</u>	
5000	25	20/40	5	20/40	0
10000	27	20/50	6	20/50	0
15000	29	25/50	7	25/50	0
20000	30	35/80	8	35/80	4
25000	32	50/100	9	50/100	8
		100/300	10	100/300	25

<u>Towing &amp; Labor (Rule 65)</u>		250/500		500/500	
\$25 per Disablement:	4	250/500	11	250/500	92
\$50 per Disablement:	8	500/500	15	500/500	249
\$100 per Disablement:	16				

**Commercial Automobile Insurance Manual**

**PUBLIC VEHICLES  
Rating Procedures**

COMPULSORY BODILY INJURY LIABILITY (Coverage A-1)

Refer to rate pages.

PERSONAL INJURY PROTECTION (Coverage A-2)

Refer to rate pages.

OPTIONAL BODILY INJURY LIABILITY (Coverage B)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the following formula:

$$(B, \text{incr}) = ((A-1) + (B, \text{basic})) \times \text{ILF} - [(A-1)]$$

where

B, incr denotes the Optional Bodily Injury Liability rate,

A-1 denotes the Compulsory Bodily Injury rate,

B, basic denotes the basic limits (20/40) Optional Bodily Injury Liability rate,

ILF denotes the appropriate Increased Limits Factor.

PROTECTION AGAINST UNINSURED AND UNDERINSURED MOTORISTS (Coverages U1 & U2)

Refer to rate pages.

PROPERTY DAMAGE LIABILITY (Coverage C)

Basic Limits

Refer to rate pages.

Increased Limits

Rates for many common limits are displayed on the rate pages. For other limits, apply the appropriate Increased Limits Factor to the basic limits rate shown on the rate pages.

MEDICAL PAYMENTS (Coverage D)

Refer to rate pages.

**Commercial Automobile Insurance Manual**

**PUBLIC VEHICLES  
Rating Procedures  
(Continued)**

**Collision, Limited Collision, Comprehensive**

VAN POOLS

Refer to rate pages.

\$3,000 Ded. Collision - charge 86% of the \$2,000 Ded. Collision rate.

\$4,000 Ded. Collision - charge 75% of the \$2,000 Ded. Collision rate.

\$5,000 Ded. Collision - charge 67% of the \$2,000 Ded. Collision rate.

OTHER PUBLIC VEHICLES—BUSES

Multiply the Trucks, Tractors and Semitrailers Not Used In Dumping Operations base premium by 1.25, then apply primary and secondary rating factors as outlined in the Rating Rules and reflected in the Classification Table found in the Rate Section.

TAXIS

Collision and Limited Collision - charge five times the Private Passenger Type Collision or Limited Collision rate.

Comprehensive - charge six times the Private Passenger Type rate.

LIMOUSINES/CAR SERVICE

Collision, Limited Collision and Comprehensive - multiply the Private Passenger Type rates by 1.5.

FIRE, THEFT, CAC, COMPREHENSIVE \$100 GLASS DEDUCTIBLE

Charge 92% of the otherwise determined premium that would apply in the absence of a glass deductible.

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

PUBLIC  
TRANSPORTATION  
FLEET CLASSIFICATIONS  
RATING FACTORS AND STATISTICAL CODES

TAXICABS AND LIMOUSINES		RADIUS							
		Local Up to 50 miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles			
		Liability	Phys Dam	Liability	Phys Dam	Liability	Phys Dam		
Taxicab or Similar Passenger Carrying Service:									
Owner-Operator	Factor	.800	.800	.800	.800	.800	.800	.800	.800
	Code	4187	4187	4197	4197	4107	4107	4107	4107
Rented or Leased	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4188	4188	4198	4198	4108	4108	4108	4108
All Other	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4189	4189	4199	4199	4109	4109	4109	4109
Limousine	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4289	4289	4299	4299	4209	4209	4209	4209
Car Service	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4389	4389	4399	4399	4309	4309	4309	4309

VAN POOLS		SEATING CAPACITY							
		1 to 8		9 to 20		21 to 60		Over 60	
		Liability	Physical Damage	Liability	Physical Damage	Liability	Physical Damage	Liability	Physical Damage
Employer Furnished	Factor	1.00	1.00	1.05	1.00	1.40	1.00	1.90	1.00
	Code	4111	4111	4112	4112	4113	4113	4114	4114
All Other	Factor	1.10	1.00	1.25	1.00	1.80	1.00	2.30	1.00
	Code	4121	4121	4122	4122	4123	4123	4124	4124

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

PUBLIC  
TRANSPORTATION  
NON-FLEET CLASSIFICATIONS  
RATING FACTORS AND STATISTICAL CODES

TAXICABS AND LIMOUSINES		RADIUS							
		Local Up to 50 miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles			
		Liability	Phys Dam	Liability	Phys Dam	Liability	Phys Dam		
Taxicab or Similar Passenger Carrying Service:									
Owner-Operator	Factor	.800	.800	.800	.800	.800	.800	.800	.800
	Code	4157	4157	4167	4167	4177	4177	4177	4177
Rented or Leased	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4158	4158	4168	4168	4178	4178	4178	4178
All Other	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4159	4159	4169	4169	4179	4179	4179	4179
Limousine	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4259	4259	4269	4269	4279	4279	4279	4279
Car Service	Factor	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Code	4359	4359	4369	4369	4379	4379	4379	4379

VAN POOLS		SEATING CAPACITY							
		1 to 8		9 to 20		21 to 60		Over 60	
		Liability	Physical Damage	Liability	Physical Damage	Liability	Physical Damage	Liability	Physical Damage
Employer Furnished	Factor	1.00	1.00	1.05	1.00	1.40	1.00	1.90	1.00
	Code	4111	4111	4112	4112	4113	4113	4114	4114
All Other	Factor	1.10	1.00	1.25	1.00	1.80	1.00	2.30	1.00
	Code	4121	4121	4122	4122	4123	4123	4124	4124

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

**FLEET PUBLIC TRANSPORTATION CLASSIFICATION CODES  
AND PRIMARY RATING FACTORS**

DESCRIPTION		RADIUS					
		Local Up to 50 Miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles	
		Liab	Phys Dam	Liab	Phys Dam	Liab	Phys Dam
OTHER BUSES							
						Zone Rated	
Airport Bus or Airport Limousine	Factor Code	1.05 528-00	1.25 528-00	1.05 529-00	1.25 529-00	1.00 520900	1.00 520900
Inter-City Bus	Factor Code	1.05 538-00	1.25 538-00	1.05 539-00	1.25 539-00	1.00 530900	1.00 530900
Charter Bus	Factor Code	1.00 548-00	1.25 548-00	1.00 549-00	1.25 549-00	1.00 540900	1.00 540900
Sightseeing Bus	Factor Code	1.00 558-00	1.25 558-00	1.00 559-00	1.25 559-00	1.00 550900	1.00 550900
Trans of Athletes and Entertainers	Factor Code	1.00 568-00	1.25 568-00	1.00 569-00	1.25 569-00	1.00 560900	1.00 560900
Social Services Automobile (Employee Operated)	Factor Code	1.00 648-00	1.00 648-00	1.00 649-00	1.00 649-00	1.00 640900	1.00 640900
Social Services Automobile (All Other)	Factor Code	1.00 658-00	1.00 658-00	1.00 659-00	1.00 659-00	1.00 650900	1.00 650900
Bus N.O. C.	Factor Code	1.15 588-00	1.00 588-00	1.15 589-00	1.00 589-00	1.00 580900	1.00 580900
Urban Bus	Factor Code	0.96 518-00	1.25 518-00	0.96 519-00	1.25 519-00	--	--

SCHOOL & CHURCH BUSES							
School Bus owned by Political Subdivision or School District	Factor Code	1.15 618-00	0.30 618-00	1.15 619-00	0.30 619-00	1.15 610-00	0.30 610-00
Other School Bus	Factor Code	1.15 628-00	0.30 628-00	1.15 629-00	0.30 629-00	1.15 620-00	0.30 620-00
Church Bus	Factor Code	1.00 638-00	1.00 638-00	1.00 639-00	1.00 639-00	1.00 630-00	1.00 630-00

**Commonwealth Automobile Reinsurers**

**Commercial Automobile Insurance Manual**

**NON-FLEET PUBLIC TRANSPORTATION CLASSIFICATION CODES  
AND PRIMARY RATING FACTORS**

DESCRIPTION		RADIUS					
		Local Up to 50 Miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles	
		Liab	Phys Dam	Liab	Phys Dam	Liab	Phys Dam
OTHER BUSES							
						Zone Rated	
Airport Bus or Airport Limousine	Factor Code	1.05 525-00	1.25 525-00	1.05 526-00	1.25 526-00	1.00 527900	1.00 527900
Inter-City Bus	Factor Code	1.05 535-00	1.25 535-00	1.05 536-00	1.25 536-00	1.00 537900	1.00 537900
Charter Bus	Factor Code	1.00 545-00	1.25 545-00	1.00 546-00	1.25 546-00	1.00 547900	1.00 547900
Sightseeing Bus	Factor Code	1.00 555-00	1.25 555-00	1.00 556-00	1.25 556-00	1.00 557900	1.00 557900
Trans of Athletes and Entertainers	Factor Code	1.00 565-00	1.25 565-00	1.00 566-00	1.25 566-00	1.00 567900	1.00 567900
Social Services Automobile (Employee Operated)	Factor Code	1.00 645-00	1.00 645-00	1.00 646-00	1.00 646-00	1.00 647900	1.00 647900
Social Services Automobile (All Other)	Factor Code	1.00 655-00	1.00 655-00	1.00 656-00	1.00 656-00	1.00 657900	1.00 657900
Bus N.O. C.	Factor Code	1.15 585-00	1.00 585-00	1.15 586-00	1.00 586-00	1.00 587900	1.00 587900
Urban Bus	Factor Code	0.96 515-00	1.25 515-00	0.96 516-00	1.25 516-00	--	--

SCHOOL & CHURCH BUSES							
School Bus owned by Political Subdivision or School District	Factor Code	1.15 615-00	0.30 615-00	1.15 616-00	0.30 616-00	1.15 617-00	0.30 617-00
Other School Bus	Factor Code	1.15 625-00	0.30 625-00	1.15 626-00	0.30 626-00	1.15 627-00	0.30 627-00
Church Bus	Factor Code	1.00 635-00	1.00 635-00	1.00 636-00	1.00 636-00	1.00 637-00	1.00 637-00



## Commercial Automobile Insurance Manual

**PUBLIC TRANSPORTATION  
SECONDARY CLASSIFICATION CODES AND RATING FACTORS**

DESCRIPTION	4 <sup>th</sup> Posn Class Code	RADIUS					
		Local Up to 50 Miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles	
		Liab	Phys Dam	Liab	Phys Dam	Liab	Phys Dam
OTHER BUSES							
		Zone Rated					
Airport Bus or Airport Limousine	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Inter-City Bus	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Charter Bus	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Sightseeing Bus	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Trans of Athletes and Entertainers	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Social Services Automobile (Employee Operated)	1	-0.20	-0.25	-0.20	-0.25	0.00	0.00
	2	+0.00	+0.00	+0.00	+0.00	0.00	0.00
	3	+0.03	+0.00	+0.03	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Social Services Automobile (All Other)	1	-0.20	-0.25	-0.20	-0.25	0.00	0.00
	2	+0.00	+0.00	+0.00	+0.00	0.00	0.00
	3	+0.03	+0.00	+0.03	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Bus N.O. C.	1	-0.20	-0.25	-0.20	-0.25	0.00	0.00
	2	+0.00	+0.00	+0.00	+0.00	0.00	0.00
	3	+0.03	+0.00	+0.03	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00
Urban Bus	1	-0.30	-0.50	-0.30	-0.50	0.00	0.00
	2	+0.04	+0.00	+0.04	+0.00	0.00	0.00
	3	+0.20	+0.00	+0.20	+0.00	0.00	0.00
	4	+0.25	+0.00	+0.25	+0.00	0.00	0.00

**Commercial Automobile Insurance Manual**

**PUBLIC TRANSPORTATION  
SECONDARY CLASSIFICATION CODES AND RATING FACTORS**

DESCRIPTION	4 <sup>th</sup> Posn Class Code	RADIUS					
		Local Up to 50 Miles		Intermediate 51 to 200 Miles		Long Distance Over 200 Miles	
		Liab	Phys Dam	Liab	Phys Dam	Liab	Phys Dam
SCHOOL & CHURCH BUSES	1	+0.00	+0.45	+0.00	+0.45	+0.00	+0.45
	2	+0.05	+0.00	+0.05	+0.00	+0.05	+0.00
	3	+0.07	+0.00	+0.07	+0.00	+0.07	+0.00
	4	+0.15	+0.00	+0.15	+0.00	+0.15	+0.00
Other School Bus	1	+0.00	+0.45	+0.00	+0.45	+0.00	+0.45
	2	+0.05	+0.00	+0.05	+0.00	+0.05	+0.00
	3	+0.07	+0.00	+0.07	+0.00	+0.07	+0.00
	4	+0.15	+0.00	+0.15	+0.00	+0.15	+0.00
Church Bus	1	+0.00	-0.25	+0.00	-0.25	+0.00	-0.25
	2	+0.05	+0.00	+0.05	+0.00	+0.05	+0.00
	3	+0.07	+0.00	+0.07	+0.00	+0.07	+0.00
	4	+0.15	+0.00	+0.15	+0.00	+0.15	+0.00

**Fourth Digit of Classification Code**

These classifications do not apply to Taxicabs, Limousines (except Airport Limousines), Car Service, Van Pools and Zone Rated Autos.

SEATING CAPACITY

FOURTH DIGIT  
CODE

1 TO 8

1

9 TO 20

2

21 TO 60

3

OVER 60

4

ALL OTHER (NOT SECONDARY RATED)

9

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**PUBLIC AUTOMOBILES - TAXIS - OWNER OPERATOR, RENTED OR LEASED AND ALL OTHER**

**Liability Rates**

Territory	COVERAGE													
	A-1	A-2	B								PDL			
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	5,000	10,000	25,000	50,000	
1	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
2	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
3	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
4	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
5	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
6	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
7	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
8	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
9	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
10	2846	1094	172	293	534	987	1409	2254	3462	1620	1976	2171	2219	
11	1933	726	117	199	363	671	958	1532	2352	1071	1307	1435	1467	
12	1949	732	118	201	366	676	965	1544	2371	1081	1319	1449	1481	
13	2580	987	156	265	484	895	1278	2044	3138	1460	1781	1956	2000	
14	2588	990	156	266	485	897	1281	2049	3147	1464	1786	1962	2006	
15	2035	767	123	209	382	706	1008	1612	2475	1133	1382	1518	1552	
16	3040	1172	183	312	570	1053	1504	2407	3696	1736	2118	2326	2378	
17	2152	814	130	221	404	746	1066	1705	2617	1203	1468	1612	1648	
18	3247	1256	196	334	609	1126	1608	2572	3949	1861	2270	2494	2550	
19	3416	1323	206	351	641	1184	1691	2705	4154	1962	2394	2629	2688	
20	3772	1467	228	388	708	1308	1868	2988	4588	2176	2655	2916	2981	

All Territories				
Medical Payments	Limit	U-1	U-2	
		Uninsured	Underinsured	
5000	\$25	20/40	31	0
		20/50	32	0
		25/50	33	0
		35/80	38	4
		50/100	42	8
		100/300	52	25
		250/500	61	92

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**PUBLIC AUTOMOBILES - LIMOUSINES**

**Liability Rates**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
2	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
3	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
4	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
5	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
6	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
7	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
8	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
9	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
10	1463	403	88	150	274	507	724	1158	1779	2228	2244	2585	1004	1225	1345	1375	1386	1396
11	643	175	39	66	121	223	319	510	782	980	987	1137	419	511	561	574	578	582
12	761	208	46	78	143	264	377	603	926	1160	1168	1345	504	615	675	690	696	701
13	737	201	44	75	138	255	364	583	895	1122	1130	1301	486	593	651	666	671	676
14	618	168	37	63	116	214	306	489	751	941	947	1092	401	489	537	549	553	557
15	737	201	44	75	138	255	364	583	895	1122	1130	1301	486	593	651	666	671	676
16	873	239	53	90	164	303	433	692	1062	1331	1340	1544	583	711	781	799	805	810
17	1025	281	62	105	192	355	508	812	1247	1562	1573	1812	692	844	927	948	955	962
18	1301	358	79	134	245	452	645	1031	1583	1983	1997	2301	889	1085	1191	1218	1227	1236
19	1179	324	71	121	221	409	584	934	1434	1796	1809	2084	801	977	1073	1097	1105	1113
20	1186	326	72	122	223	412	588	940	1443	1808	1821	2097	807	985	1081	1106	1114	1122

All Territories				
Medical Payments	Limit		U-1	U-2
			Uninsured	Underinsured
5000	\$25	20/40	5	0
		20/50	6	0
		25/50	7	0
		35/80	8	4
		50/100	9	8
		100/300	10	25
		250/500	11	92
		500/500	15	249

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**PUBLIC AUTOMOBILES - CAR SERVICE**

**Liability Rates**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
2	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
3	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
4	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
5	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
6	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
7	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
8	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
9	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
10	2179	704	132	224	409	756	1080	1727	2651	3321	3344	3853	1326	1618	1777	1817	1830	1843
11	901	296	54	92	169	312	446	713	1095	1372	1381	1592	546	666	732	748	753	759
12	1085	355	65	111	203	376	537	859	1319	1652	1664	1917	658	803	882	901	908	915
13	1046	342	63	107	196	362	518	828	1272	1593	1605	1848	635	775	851	870	876	883
14	860	283	52	88	161	298	426	681	1046	1311	1320	1520	522	637	699	715	720	726
15	1046	342	63	107	196	362	518	828	1272	1593	1605	1848	635	775	851	870	876	883
16	1259	410	76	129	236	436	623	997	1531	1918	1932	2225	765	933	1025	1048	1056	1063
17	1496	486	90	153	280	518	740	1184	1819	2279	2295	2643	909	1109	1218	1245	1254	1264
18	1927	623	116	198	361	668	954	1526	2343	2935	2956	3405	1171	1429	1569	1604	1616	1628
19	1735	562	105	179	326	602	859	1375	2111	2644	2663	3067	1055	1287	1414	1445	1456	1466
20	1748	566	105	179	327	605	865	1384	2125	2662	2681	3088	1062	1296	1423	1455	1466	1476

All Territories					
		U-1			U-2
<u>Medical Payments</u>		<u>Limit</u>	<u>Uninsured</u>	<u>Underinsured</u>	
5000	\$25	20/40	5	0	
		20/50	6	0	
		25/50	7	0	
		35/80	8	4	
		50/100	9	8	
		100/300	10	25	
		250/500	11	92	
		500/500	15	249	

**COMMONWEALTH AUTOMOBILE REINSURERS  
Massachusetts Commercial Automobile  
CHURCH AND SCHOOL BUSES**

**Liability Rates  
Fleet and Non-Fleet**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
2	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
3	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
4	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
5	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
6	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
7	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
8	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
9	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
10	1236	210	156	212	337	560	782	1242	1854	2355	2383	2731	988	1195	1314	1344	1354	1363
11	473	74	60	81	129	215	300	476	710	902	913	1046	397	480	528	540	544	548
12	364	54	46	62	99	165	231	366	546	694	702	805	312	378	415	424	427	431
13	493	77	62	84	134	223	312	495	739	939	950	1089	412	499	548	560	564	569
14	472	74	59	80	128	213	298	473	707	898	909	1041	396	479	527	539	543	546
15	405	62	51	69	110	183	256	407	607	771	781	895	344	416	458	468	471	475
16	493	77	62	84	134	223	312	495	739	939	950	1089	412	499	548	560	564	569
17	630	102	79	107	171	285	398	632	944	1199	1213	1391	518	627	689	704	710	715
18	612	99	77	105	167	277	387	614	918	1166	1179	1352	504	610	670	685	690	696
19	662	108	83	113	180	299	418	664	992	1260	1275	1461	543	657	722	738	744	749
20	715	117	90	122	195	323	452	718	1072	1362	1378	1579	584	707	777	794	800	806

All Territories				
<u>Medical Payments</u>		<u>Limit</u>	<u>U-1 Uninsured</u>	<u>U-2 Underinsured</u>
\$5,000	25	20/40	5	0
		20/50	6	0
		25/50	7	0
		35/80	8	4
		50/100	9	8
		100/300	10	25
		250/500	11	92
		500/500	15	249

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**SOCIAL SERVICES AND BUS N.O.C.**

**Liability Rates**  
**Fleet and Non-Fleet**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
2	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
3	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
4	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
5	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
6	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
7	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
8	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
9	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
10	2921	1022	368	500	796	1322	1848	2933	4381	5565	5630	6453	1837	2223	2443	2498	2517	2535
11	1022	338	129	175	279	463	647	1027	1533	1948	1971	2258	673	814	895	915	922	929
12	751	241	95	129	205	340	476	755	1127	1432	1449	1660	507	613	674	690	695	700
13	1072	356	135	183	292	485	678	1076	1608	2042	2066	2368	704	852	936	957	964	972
14	1019	337	129	175	278	462	646	1024	1530	1943	1966	2253	672	813	894	914	921	927
15	853	277	108	146	233	387	540	858	1280	1626	1646	1886	570	690	758	775	781	787
16	1072	356	135	183	292	485	678	1076	1608	2042	2066	2368	704	852	936	957	964	972
17	1411	478	178	242	385	639	893	1417	2117	2689	2720	3118	912	1104	1213	1240	1249	1259
18	1368	462	172	234	372	619	865	1373	2051	2605	2636	3021	885	1071	1177	1204	1212	1221
19	1492	507	188	255	406	675	944	1498	2238	2842	2876	3296	961	1163	1278	1307	1317	1326
20	1624	555	205	278	443	735	1028	1632	2436	3095	3131	3589	1043	1262	1387	1418	1429	1439

All Territories				
Medical Payments	Limit	U-1	U-2	
		Uninsured	Underinsured	
\$5,000	25	20/40	5	0
		20/50	6	0
		25/50	7	0
		35/80	8	4
		50/100	9	8
		100/300	10	25
		250/500	11	92
		500/500	15	249

**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**OTHER BUSES**  
**Liability Rates**  
**Fleet and Non-Fleet**

Territory	COVERAGE																	
	A-1	A-2	B										PDL					
			20/40	20/50	25/50	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
2	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
3	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
4	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
5	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
6	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
7	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
8	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
9	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
10	1806	865	228	309	492	818	1143	1815	2709	3442	3482	3991	1112	1346	1479	1512	1523	1535
11	659	287	83	113	179	298	417	662	988	1255	1270	1456	437	529	581	594	599	603
12	496	205	62	84	135	224	313	497	743	944	955	1094	341	413	454	464	467	471
13	689	302	87	118	188	312	436	692	1034	1313	1329	1523	454	549	604	617	622	627
14	657	286	83	113	179	298	416	660	986	1252	1267	1452	436	528	580	593	597	602
15	557	236	70	95	152	252	352	559	835	1061	1073	1230	377	456	501	513	516	520
16	689	302	87	118	188	312	436	692	1034	1313	1329	1523	454	549	604	617	622	627
17	894	406	113	153	244	405	566	898	1342	1704	1724	1976	575	696	765	782	788	794
18	868	392	109	148	236	392	549	871	1301	1653	1672	1916	559	676	743	760	766	771
19	943	430	119	161	257	427	597	947	1415	1797	1818	2084	604	731	803	821	827	834
20	1023	470	129	175	279	463	647	1028	1534	1949	1972	2260	651	788	866	885	892	898

All Territories			
Medical Payments	Limit	U-1	U-2
		Uninsured	Underinsured
\$5,000	25	20/40	5
		20/50	6
		25/50	7
		35/80	8
		50/100	9
		100/300	10
		250/500	11
	500/500	15	
			0
			0
			0
			4
			8
			25
			92
			249



**COMMONWEALTH AUTOMOBILE REINSURERS**  
**Massachusetts Commercial Automobile**  
**VAN POOLS**

**Liability Rates**

Territory	COVERAGE																		
	A-1	A-2	B											PDL					
			20/40	20/50	25/50	25/60	35/80	50/100	100/300	250/500	500/500	500/1000	1000/1000	5,000	10,000	25,000	50,000	100,000	500,000
1	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
2	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
3	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
4	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
5	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
6	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
7	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
8	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
9	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
10	1303	464	164	223	355	369	589	824	1,308	1,954	2,482	2,511	2,878	900	1089	1197	1224	1233	1242
11	495	156	62	84	134	140	224	313	496	742	942	953	1,092	368	445	489	500	504	508
12	379	113	48	65	104	108	172	240	381	569	723	731	838	292	353	388	397	400	403
13	516	164	65	88	141	146	233	326	518	774	983	995	1,140	382	462	508	520	523	527
14	494	156	62	84	134	140	223	312	496	740	940	952	1,091	367	444	488	499	503	506
15	423	129	53	72	115	120	191	267	424	634	805	815	934	321	388	427	437	440	443
16	516	164	65	88	141	146	233	326	518	774	983	995	1,140	382	462	508	520	523	527
17	660	219	83	113	180	187	298	417	663	989	1,257	1,272	1,458	477	577	634	649	653	658
18	641	212	81	110	175	182	290	406	644	962	1,222	1,236	1,417	465	563	618	632	637	642
19	694	233	88	119	190	197	315	440	698	1,042	1,324	1,339	1,535	500	605	665	680	685	690
20	751	254	95	129	205	213	340	476	755	1,127	1,432	1,449	1,660	537	650	714	730	736	741

All Territories				
Medical Payments		U-1		U-2
		Limit	Uninsured	Underinsured
5000	25			
10000	27			
		20/40	5	0
		20/50	6	0
		25/50	7	0
		35/80	8	4
		50/100	9	8
		100/300	10	25
		250/500	11	92
		500/500	15	249

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C.A.R.  
2/1/2018

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 1

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17

to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 2

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 3

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 4

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

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C.A.R.  
2/1/2018

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 5

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 6

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

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Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

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\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

R-128  
C.A.R.  
2/1/2018

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 7

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

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\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17

to the \$300 deductible limited collision premium.



COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 8

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

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\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 9

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

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\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 10

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
4,501- 6,000	1	2	84	80	129	125	364	347	316	264
	2,3		84	80	129	125	352	335	305	255
	4,5		84	80	129	125	341	325	296	247
	6-9		71	67	109	105	274	261	238	198
6,001- 8,000	1	3	84	80	129	125	403	384	349	292
	2,3		84	80	129	125	389	370	337	281
	4,5		84	80	129	125	376	358	326	272
	6-9		71	67	109	105	295	281	256	214
8,001-10,000	1	4	110	106	170	165	542	516	470	392
	2,3		110	106	170	165	519	494	450	375
	4,5		110	106	170	165	498	474	431	360
	6-9		89	85	137	133	368	350	319	266
10,001-15,000	1	5	145	141	228	221	731	696	633	529
	2,3		145	141	228	221	695	662	602	503
	4,5		145	141	228	221	664	632	575	480
	6-9		115	111	178	173	466	444	404	337
15,001-20,000	1	6	190	184	296	287	1109	1056	961	803
	2,3		190	184	296	287	1048	998	908	758
	4,5		190	184	296	287	995	948	863	720
	6-9		145	141	227	220	665	633	576	481
20,001-25,000	1	7	204	198	318	309	1337	1273	1158	967
	2,3		204	198	318	309	1261	1201	1093	913
	4,5		204	198	318	309	1196	1139	1036	866
	6-9		155	150	242	235	783	746	679	567
25,001-40,000	1	8	227	220	354	344	1509	1437	1308	1092
	2,3		227	220	354	344	1422	1354	1232	1029
	4,5		227	220	354	344	1347	1283	1168	975
	6-9		171	166	268	260	874	832	757	632
40,001-65,000	1	10	264	256	412	400	1926	1834	1669	1394
	2,3		264	256	412	400	1811	1725	1570	1311
	4,5		264	256	412	400	1714	1632	1485	1240
	6-9		198	192	309	300	1092	1040	946	790
65,001-90,000	1	11	286	278	448	435	2093	1993	1814	1515
	2,3		286	278	448	435	1967	1873	1704	1423
	4,5		286	278	448	435	1860	1771	1612	1346
	6-9		214	208	335	325	1179	1123	1022	853
Charge per \$1000 over \$90,000	1	12	0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	2,3		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	4,5		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40
	6-9		0.76	0.74	1.19	1.16	12.98	12.36	11.25	9.40

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 17

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 21

\$1000 Ded \$ 38

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 60

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 74

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 86

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 94

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$17 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 11

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	61	57	93	89	251	239	217	182
	2,3		61	57	93	89	246	234	213	178
	4,5		61	57	93	89	243	231	210	176
	6-9		55	51	83	79	215	205	187	156
4,501- 6,000	1	2	63	59	96	92	256	244	222	185
	2,3		63	59	96	92	251	239	217	182
	4,5		63	59	96	92	246	234	213	178
	6-9		56	52	86	82	217	207	188	157
6,001- 8,000	1	3	63	59	96	92	273	260	237	198
	2,3		63	59	96	92	266	253	230	192
	4,5		63	59	96	92	260	248	226	188
	6-9		56	52	86	82	227	216	197	164
8,001-10,000	1	4	77	73	118	114	332	316	288	240
	2,3		77	73	118	114	321	306	278	233
	4,5		77	73	118	114	313	298	271	226
	6-9		66	62	101	97	257	245	223	186
10,001-15,000	1	5	96	92	148	144	412	392	357	298
	2,3		96	92	148	144	397	378	344	287
	4,5		96	92	148	144	383	365	332	277
	6-9		80	76	122	118	299	285	259	217
15,001-20,000	1	6	119	115	184	179	572	545	496	414
	2,3		119	115	184	179	547	521	474	396
	4,5		119	115	184	179	524	499	454	379
	6-9		96	92	147	143	383	365	332	277
20,001-25,000	1	7	126	122	196	190	670	638	581	485
	2,3		126	122	196	190	637	607	552	461
	4,5		126	122	196	190	610	581	529	442
	6-9		101	97	156	151	434	413	376	314
25,001-40,000	1	8	138	134	215	209	742	707	643	537
	2,3		138	134	215	209	706	672	612	511
	4,5		138	134	215	209	674	642	584	488
	6-9		109	105	169	164	473	450	410	342
40,001-65,000	1	10	158	153	246	239	920	876	797	666
	2,3		158	153	246	239	872	830	755	631
	4,5		158	153	246	239	830	790	719	600
	6-9		123	119	192	186	565	538	490	409
65,001-90,000	1	11	170	165	266	258	991	944	859	717
	2,3		170	165	266	258	938	893	813	679
	4,5		170	165	266	258	891	849	773	645
	6-9		131	127	205	199	603	574	522	436
Charge per \$1000 over \$90,000	1	12	0.41	0.40	0.64	0.62	5.52	5.26	4.79	4.00
	2,3		0.41	0.40	0.64	0.62	5.52	5.26	4.79	4.00
	4,5		0.41	0.40	0.64	0.62	5.52	5.26	4.79	4.00
	6-9		0.41	0.40	0.64	0.62	5.52	5.26	4.79	4.00

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 7

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 9

\$1000 Ded \$ 16

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 25

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 32

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 36

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 40

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$7 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 12

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	64	60	97	93	256	244	222	185
	2,3		64	60	97	93	251	239	217	182
	4,5		64	60	97	93	247	235	214	179
	6-9		56	52	86	82	217	207	188	157
4,501- 6,000	1	2	66	62	101	97	261	249	227	189
	2,3		66	62	101	97	255	243	221	185
	4,5		66	62	101	97	251	239	217	182
	6-9		58	54	89	85	221	210	191	160
6,001- 8,000	1	3	66	62	101	97	278	265	241	201
	2,3		66	62	101	97	272	259	236	197
	4,5		66	62	101	97	266	253	230	192
	6-9		58	54	89	85	230	219	199	166
8,001-10,000	1	4	81	77	124	120	341	325	296	247
	2,3		81	77	124	120	331	315	287	239
	4,5		81	77	124	120	321	306	278	233
	6-9		69	65	105	101	263	250	228	190
10,001-15,000	1	5	102	98	158	153	427	407	370	309
	2,3		102	98	158	153	411	391	356	297
	4,5		102	98	158	153	396	377	343	287
	6-9		84	80	129	125	307	292	266	222
15,001-20,000	1	6	128	124	199	193	597	569	518	432
	2,3		128	124	199	193	570	543	494	413
	4,5		128	124	199	193	546	520	473	395
	6-9		102	98	158	153	397	378	344	287
20,001-25,000	1	7	135	131	211	205	700	667	607	507
	2,3		135	131	211	205	667	635	578	483
	4,5		135	131	211	205	637	607	552	461
	6-9		108	104	167	162	450	429	390	326
25,001-40,000	1	8	149	145	233	226	779	742	675	564
	2,3		149	145	233	226	739	704	641	535
	4,5		149	145	233	226	706	672	612	511
	6-9		117	113	181	176	491	468	426	356
40,001-65,000	1	10	171	166	267	259	967	921	838	700
	2,3		171	166	267	259	916	872	794	663
	4,5		171	166	267	259	872	830	755	631
	6-9		132	128	206	200	590	562	511	427
65,001-90,000	1	11	184	179	288	280	1043	993	904	755
	2,3		184	179	288	280	986	939	854	714
	4,5		184	179	288	280	938	893	813	679
	6-9		142	138	221	215	629	599	545	455
Charge per \$1000 over \$90,000	1	12	0.45	0.44	0.71	0.69	5.87	5.59	5.09	4.25
	2,3		0.45	0.44	0.71	0.69	5.87	5.59	5.09	4.25
	4,5		0.45	0.44	0.71	0.69	5.87	5.59	5.09	4.25
	6-9		0.45	0.44	0.71	0.69	5.87	5.59	5.09	4.25

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 8

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 10

\$1000 Ded \$ 17

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 27

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 34

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 39

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 42

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$8 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 13

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	63	59	96	92	259	247	225	188
	2,3		63	59	96	92	254	242	220	184
	4,5		63	59	96	92	250	238	217	181
	6-9		56	52	85	81	219	209	190	159
4,501- 6,000	1	2	65	61	100	96	266	253	230	192
	2,3		65	61	100	96	259	247	225	188
	4,5		65	61	100	96	254	242	220	184
	6-9		58	54	88	84	223	212	193	161
6,001- 8,000	1	3	65	61	100	96	284	270	246	205
	2,3		65	61	100	96	276	263	239	200
	4,5		65	61	100	96	270	257	234	195
	6-9		58	54	88	84	232	221	201	168
8,001-10,000	1	4	80	76	122	118	350	333	303	253
	2,3		80	76	122	118	338	322	293	245
	4,5		80	76	122	118	329	313	285	238
	6-9		68	64	104	100	267	254	231	193
10,001-15,000	1	5	101	97	156	151	439	418	380	318
	2,3		101	97	156	151	422	402	366	306
	4,5		101	97	156	151	407	388	353	295
	6-9		83	79	127	123	314	299	272	227
15,001-20,000	1	6	125	121	195	189	618	589	536	448
	2,3		125	121	195	189	589	561	511	426
	4,5		125	121	195	189	565	538	490	409
	6-9		100	96	155	150	407	388	353	295
20,001-25,000	1	7	133	129	208	202	727	692	630	526
	2,3		133	129	208	202	690	657	598	499
	4,5		133	129	208	202	659	628	571	477
	6-9		106	102	164	159	464	442	402	336
25,001-40,000	1	8	146	142	229	222	809	770	701	585
	2,3		146	142	229	222	767	730	664	555
	4,5		146	142	229	222	731	696	633	529
	6-9		115	111	178	173	506	482	439	366
40,001-65,000	1	10	168	163	262	254	1006	958	872	728
	2,3		168	163	262	254	951	906	824	689
	4,5		168	163	262	254	905	862	784	655
	6-9		129	125	202	196	610	581	529	442
65,001-90,000	1	11	180	175	282	274	1085	1033	940	785
	2,3		180	175	282	274	1025	976	888	742
	4,5		180	175	282	274	974	928	844	705
	6-9		139	135	217	211	651	620	564	471
Charge per \$1000 over \$90,000	1	12	0.44	0.43	0.69	0.67	6.16	5.86	5.34	4.46
	2,3		0.44	0.43	0.69	0.67	6.16	5.86	5.34	4.46
	4,5		0.44	0.43	0.69	0.67	6.16	5.86	5.34	4.46
	6-9		0.44	0.43	0.69	0.67	6.16	5.86	5.34	4.46

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 8

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 10

\$1000 Ded \$ 18

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 28

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 35

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 40

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 45

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$8 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 14

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	63	59	96	92	261	249	227	189
	2,3		63	59	96	92	256	244	222	185
	4,5		63	59	96	92	251	239	217	182
	6-9		56	52	85	81	221	210	191	160
4,501- 6,000	1	2	65	61	100	96	267	254	231	193
	2,3		65	61	100	96	261	249	227	189
	4,5		65	61	100	96	256	244	222	185
	6-9		58	54	88	84	224	213	194	162
6,001- 8,000	1	3	65	61	100	96	286	272	248	207
	2,3		65	61	100	96	278	265	241	201
	4,5		65	61	100	96	272	259	236	197
	6-9		58	54	88	84	233	222	202	169
8,001-10,000	1	4	80	76	122	118	353	336	306	255
	2,3		80	76	122	118	341	325	296	247
	4,5		80	76	122	118	332	316	288	240
	6-9		68	64	104	100	269	256	233	195
10,001-15,000	1	5	101	97	156	151	444	423	385	321
	2,3		101	97	156	151	427	407	370	309
	4,5		101	97	156	151	412	392	357	298
	6-9		83	79	127	123	316	301	274	229
15,001-20,000	1	6	125	121	195	189	628	598	544	454
	2,3		125	121	195	189	597	569	518	432
	4,5		125	121	195	189	572	545	496	414
	6-9		100	96	155	150	412	392	357	298
20,001-25,000	1	7	133	129	208	202	738	703	640	534
	2,3		133	129	208	202	701	668	608	508
	4,5		133	129	208	202	670	638	581	485
	6-9		106	102	164	159	469	447	407	340
25,001-40,000	1	8	146	142	229	222	821	782	712	594
	2,3		146	142	229	222	779	742	675	564
	4,5		146	142	229	222	742	707	643	537
	6-9		115	111	178	173	513	489	445	372
40,001-65,000	1	10	168	163	262	254	1023	974	886	740
	2,3		168	163	262	254	967	921	838	700
	4,5		168	163	262	254	920	876	797	666
	6-9		129	125	202	196	620	590	537	448
65,001-90,000	1	11	180	175	282	274	1104	1051	956	799
	2,3		180	175	282	274	1043	993	904	755
	4,5		180	175	282	274	991	944	859	717
	6-9		139	135	217	211	662	630	573	479
Charge per \$1000 over \$90,000	1	12	0.44	0.43	0.69	0.67	6.28	5.99	5.45	4.55
	2,3		0.44	0.43	0.69	0.67	6.28	5.99	5.45	4.55
	4,5		0.44	0.43	0.69	0.67	6.28	5.99	5.45	4.55
	6-9		0.44	0.43	0.69	0.67	6.28	5.99	5.45	4.55

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 8

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 10

\$1000 Ded \$ 18

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 29

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 36

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 41

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 46

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$8 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 15

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	62	58	95	91	271	258	235	196
	2,3		62	58	95	91	265	252	229	192
	4,5		62	58	95	91	259	247	225	188
	6-9		56	52	85	81	226	215	196	163
4,501- 6,000	1	2	64	60	98	94	277	264	240	201
	2,3		64	60	98	94	270	257	234	195
	4,5		64	60	98	94	265	252	229	192
	6-9		57	53	87	83	228	217	197	165
6,001- 8,000	1	3	64	60	98	94	297	283	258	215
	2,3		64	60	98	94	290	276	251	210
	4,5		64	60	98	94	282	269	245	204
	6-9		57	53	87	83	239	228	207	173
8,001-10,000	1	4	79	75	121	117	372	354	322	269
	2,3		79	75	121	117	359	342	311	260
	4,5		79	75	121	117	348	331	301	252
	6-9		67	63	103	99	278	265	241	201
10,001-15,000	1	5	99	95	153	149	474	451	410	343
	2,3		99	95	153	149	454	432	393	328
	4,5		99	95	153	149	437	416	379	316
	6-9		81	77	125	121	331	315	287	239
15,001-20,000	1	6	123	119	192	186	675	643	585	489
	2,3		123	119	192	186	643	612	557	465
	4,5		123	119	192	186	614	585	532	445
	6-9		99	95	152	148	437	416	379	316
20,001-25,000	1	7	131	127	204	198	797	759	691	577
	2,3		131	127	204	198	757	721	656	548
	4,5		131	127	204	198	722	688	626	523
	6-9		104	100	162	157	501	477	434	363
25,001-40,000	1	8	143	139	224	217	889	847	771	644
	2,3		143	139	224	217	843	803	731	610
	4,5		143	139	224	217	803	765	696	581
	6-9		113	109	175	170	549	523	476	397
40,001-65,000	1	10	164	159	256	249	1113	1060	965	806
	2,3		164	159	256	249	1051	1001	911	761
	4,5		164	159	256	249	999	951	865	723
	6-9		128	124	199	193	666	634	577	482
65,001-90,000	1	11	177	172	277	269	1202	1145	1042	870
	2,3		177	172	277	269	1135	1081	984	822
	4,5		177	172	277	269	1077	1026	934	780
	6-9		136	132	213	207	713	679	618	516
Charge per \$1000 over \$90,000	1	12	0.43	0.42	0.67	0.65	6.95	6.62	6.02	5.03
	2,3		0.43	0.42	0.67	0.65	6.95	6.62	6.02	5.03
	4,5		0.43	0.42	0.67	0.65	6.95	6.62	6.02	5.03
	6-9		0.43	0.42	0.67	0.65	6.95	6.62	6.02	5.03

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 9

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 11

\$1000 Ded \$ 20

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 32

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 40

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 46

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 50

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$9 to the \$300 deductible limited collision premium.



COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 16

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	63	59	96	92	266	253	230	192
	2,3		63	59	96	92	259	247	225	188
	4,5		63	59	96	92	255	243	221	185
	6-9		56	52	86	82	223	212	193	161
4,501- 6,000	1	2	65	61	100	96	271	258	235	196
	2,3		65	61	100	96	265	252	229	192
	4,5		65	61	100	96	259	247	225	188
	6-9		58	54	88	84	226	215	196	163
6,001- 8,000	1	3	65	61	100	96	291	277	252	211
	2,3		65	61	100	96	284	270	246	205
	4,5		65	61	100	96	277	264	240	201
	6-9		58	54	88	84	236	225	205	171
8,001-10,000	1	4	80	76	123	119	361	344	313	261
	2,3		80	76	123	119	349	332	302	252
	4,5		80	76	123	119	338	322	293	245
	6-9		69	65	105	101	273	260	237	198
10,001-15,000	1	5	101	97	157	152	457	435	396	331
	2,3		101	97	157	152	438	417	379	317
	4,5		101	97	157	152	422	402	366	306
	6-9		83	79	128	124	322	307	279	233
15,001-20,000	1	6	126	122	197	191	648	617	561	469
	2,3		126	122	197	191	617	588	535	447
	4,5		126	122	197	191	590	562	511	427
	6-9		101	97	157	152	423	403	367	306
20,001-25,000	1	7	134	130	209	203	763	727	662	553
	2,3		134	130	209	203	725	690	628	524
	4,5		134	130	209	203	692	659	600	501
	6-9		106	102	165	160	483	460	419	350
25,001-40,000	1	8	147	143	231	224	851	810	737	616
	2,3		147	143	231	224	806	768	699	584
	4,5		147	143	231	224	769	732	666	556
	6-9		116	112	180	175	529	504	459	383
40,001-65,000	1	10	169	164	265	257	1062	1011	920	768
	2,3		169	164	265	257	1004	956	870	727
	4,5		169	164	265	257	953	908	826	690
	6-9		131	127	204	198	639	609	554	463
65,001-90,000	1	11	182	177	285	277	1146	1091	993	829
	2,3		182	177	285	277	1083	1031	938	784
	4,5		182	177	285	277	1028	979	891	744
	6-9		140	136	219	213	684	651	592	495
Charge per \$1000 over \$90,000	1	12	0.45	0.43	0.70	0.68	6.57	6.26	5.69	4.76
	2,3		0.45	0.43	0.70	0.68	6.57	6.26	5.69	4.76
	4,5		0.45	0.43	0.70	0.68	6.57	6.26	5.69	4.76
	6-9		0.45	0.43	0.70	0.68	6.57	6.26	5.69	4.76

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 9

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 11

\$1000 Ded \$ 19

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 30

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 38

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 43

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 48

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$9 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 17

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	64	60	98	94	284	270	246	205
	2,3		64	60	98	94	276	263	239	200
	4,5		64	60	98	94	270	257	234	195
	6-9		56	52	86	82	232	221	201	168
4,501- 6,000	1	2	67	63	102	98	290	276	251	210
	2,3		67	63	102	98	282	269	245	204
	4,5		67	63	102	98	276	263	239	200
	6-9		58	54	89	85	235	224	204	170
6,001- 8,000	1	3	67	63	102	98	314	299	272	227
	2,3		67	63	102	98	305	290	264	220
	4,5		67	63	102	98	297	283	258	215
	6-9		58	54	89	85	248	236	215	179
8,001-10,000	1	4	82	78	126	122	398	379	345	288
	2,3		82	78	126	122	383	365	332	277
	4,5		82	78	126	122	371	353	321	268
	6-9		69	65	106	102	292	278	253	211
10,001-15,000	1	5	104	100	161	156	512	488	444	371
	2,3		104	100	161	156	490	467	425	355
	4,5		104	100	161	156	471	449	409	341
	6-9		85	81	131	127	352	335	305	255
15,001-20,000	1	6	129	125	202	196	741	706	642	537
	2,3		129	125	202	196	705	671	611	510
	4,5		129	125	202	196	673	641	583	487
	6-9		103	99	160	155	471	449	409	341
20,001-25,000	1	7	138	134	215	209	880	838	763	637
	2,3		138	134	215	209	834	794	723	603
	4,5		138	134	215	209	794	756	688	575
	6-9		109	105	169	164	544	518	471	394
25,001-40,000	1	8	151	147	237	230	984	937	853	712
	2,3		151	147	237	230	931	887	807	674
	4,5		151	147	237	230	886	844	768	641
	6-9		119	115	184	179	599	570	519	433
40,001-65,000	1	10	174	169	272	264	1237	1178	1072	895
	2,3		174	169	272	264	1168	1112	1012	845
	4,5		174	169	272	264	1108	1055	960	802
	6-9		135	131	210	204	731	696	633	529
65,001-90,000	1	11	187	182	294	285	1338	1274	1159	968
	2,3		187	182	294	285	1262	1202	1094	914
	4,5		187	182	294	285	1197	1140	1037	866
	6-9		144	140	226	219	784	747	680	568
Charge per \$1000 over \$90,000	1	12	0.46	0.45	0.72	0.70	7.87	7.50	6.82	5.70
	2,3		0.46	0.45	0.72	0.70	7.87	7.50	6.82	5.70
	4,5		0.46	0.45	0.72	0.70	7.87	7.50	6.82	5.70
	6-9		0.46	0.45	0.72	0.70	7.87	7.50	6.82	5.70

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 10

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 13

\$1000 Ded \$ 23

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 36

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 45

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 52

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 57

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$10 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 18

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	62	58	95	91	274	261	238	198
	2,3		62	58	95	91	268	255	232	194
	4,5		62	58	95	91	263	250	228	190
	6-9		56	52	85	81	228	217	197	165
4,501- 6,000	1	2	65	61	99	95	281	268	244	204
	2,3		65	61	99	95	274	261	238	198
	4,5		65	61	99	95	268	255	232	194
	6-9		57	53	87	83	231	220	200	167
6,001- 8,000	1	3	65	61	99	95	302	288	262	219
	2,3		65	61	99	95	294	280	255	213
	4,5		65	61	99	95	287	273	248	207
	6-9		57	53	87	83	243	231	210	176
8,001-10,000	1	4	80	76	122	118	380	362	329	275
	2,3		80	76	122	118	366	349	318	265
	4,5		80	76	122	118	355	338	308	257
	6-9		68	64	104	100	282	269	245	204
10,001-15,000	1	5	100	96	155	150	485	462	420	351
	2,3		100	96	155	150	465	443	403	337
	4,5		100	96	155	150	447	426	388	324
	6-9		82	78	126	122	338	322	293	245
15,001-20,000	1	6	124	120	193	187	696	663	603	504
	2,3		124	120	193	187	662	630	573	479
	4,5		124	120	193	187	632	602	548	458
	6-9		99	95	153	149	448	427	389	325
20,001-25,000	1	7	132	128	206	200	823	784	713	596
	2,3		132	128	206	200	780	743	676	565
	4,5		132	128	206	200	744	709	645	539
	6-9		105	101	163	158	515	490	446	372
25,001-40,000	1	8	145	141	227	220	919	875	796	665
	2,3		145	141	227	220	870	829	754	630
	4,5		145	141	227	220	828	789	718	600
	6-9		114	110	177	172	565	538	490	409
40,001-65,000	1	10	166	161	260	252	1152	1097	998	834
	2,3		166	161	260	252	1088	1036	943	787
	4,5		166	161	260	252	1033	984	895	748
	6-9		129	125	201	195	686	653	594	496
65,001-90,000	1	11	178	173	279	271	1244	1185	1078	901
	2,3		178	173	279	271	1174	1118	1017	850
	4,5		178	173	279	271	1114	1061	966	806
	6-9		138	134	215	209	735	700	637	532
Charge per \$1000 over \$90,000	1	12	0.44	0.42	0.68	0.66	7.24	6.89	6.27	5.24
	2,3		0.44	0.42	0.68	0.66	7.24	6.89	6.27	5.24
	4,5		0.44	0.42	0.68	0.66	7.24	6.89	6.27	5.24
	6-9		0.44	0.42	0.68	0.66	7.24	6.89	6.27	5.24

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 10

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 12

\$1000 Ded \$ 21

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 33

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 41

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 48

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 52

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$10 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 19

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	64	60	97	93	273	260	237	198
	2,3		64	60	97	93	267	254	231	193
	4,5		64	60	97	93	261	249	227	189
	6-9		56	52	86	82	227	216	197	164
4,501- 6,000	1	2	66	62	101	97	279	266	242	202
	2,3		66	62	101	97	272	259	236	197
	4,5		66	62	101	97	267	254	231	193
	6-9		58	54	89	85	230	219	199	166
6,001- 8,000	1	3	66	62	101	97	300	286	260	217
	2,3		66	62	101	97	292	278	253	211
	4,5		66	62	101	97	285	271	247	206
	6-9		58	54	89	85	240	229	208	174
8,001-10,000	1	4	81	77	125	121	376	358	326	272
	2,3		81	77	125	121	363	346	315	263
	4,5		81	77	125	121	352	335	305	255
	6-9		69	65	106	102	280	267	243	203
10,001-15,000	1	5	103	99	160	155	480	457	416	347
	2,3		103	99	160	155	460	438	399	333
	4,5		103	99	160	155	443	422	384	321
	6-9		85	81	130	126	335	319	290	242
15,001-20,000	1	6	128	124	200	194	687	654	595	497
	2,3		128	124	200	194	653	622	566	473
	4,5		128	124	200	194	625	595	541	452
	6-9		103	99	159	154	443	422	384	321
20,001-25,000	1	7	136	132	213	207	812	773	703	587
	2,3		136	132	213	207	770	733	667	557
	4,5		136	132	213	207	734	699	636	531
	6-9		108	104	168	163	508	484	440	368
25,001-40,000	1	8	150	146	235	228	906	863	785	656
	2,3		150	146	235	228	858	817	743	621
	4,5		150	146	235	228	817	778	708	591
	6-9		118	114	183	178	558	531	483	404
40,001-65,000	1	10	173	168	270	262	1134	1080	983	821
	2,3		173	168	270	262	1071	1020	928	775
	4,5		173	168	270	262	1017	969	882	736
	6-9		133	129	208	202	677	645	587	490
65,001-90,000	1	11	185	180	290	282	1225	1167	1062	887
	2,3		185	180	290	282	1157	1102	1003	838
	4,5		185	180	290	282	1098	1046	952	795
	6-9		143	139	224	217	725	690	628	524
Charge per \$1000 over \$90,000	1	12	0.46	0.44	0.71	0.69	7.11	6.77	6.16	5.15
	2,3		0.46	0.44	0.71	0.69	7.11	6.77	6.16	5.15
	4,5		0.46	0.44	0.71	0.69	7.11	6.77	6.16	5.15
	6-9		0.46	0.44	0.71	0.69	7.11	6.77	6.16	5.15

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 9

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 12

\$1000 Ded \$ 21

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 33

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 41

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 47

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 51

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$9 to the \$300 deductible limited collision premium.

COMMONWEALTH AUTOMOBILE REINSURERS  
Physical Damage Premiums  
VAN POOLS

Territory 20

Original Cost New Complete Automobile Chassis & Body	Age Group Code	Original Cost New Code	Other than Collision				Collision			
			Fire,Theft,CAC		Comprehensive		Deductibles			
			\$300	\$500	\$300	\$500	\$300	\$500	\$1000	\$2000
\$0- 4,500	1	1	62	58	95	91	269	256	233	195
	2,3		62	58	95	91	264	251	228	191
	4,5		62	58	95	91	258	246	224	187
	6-9		56	52	85	81	225	214	195	163
4,501- 6,000	1	2	65	61	99	95	275	262	238	199
	2,3		65	61	99	95	269	256	233	195
	4,5		65	61	99	95	264	251	228	191
	6-9		57	53	87	83	228	217	197	165
6,001- 8,000	1	3	65	61	99	95	296	282	257	214
	2,3		65	61	99	95	288	274	249	208
	4,5		65	61	99	95	281	268	244	204
	6-9		57	53	87	83	238	227	207	173
8,001-10,000	1	4	80	76	122	118	370	352	320	268
	2,3		80	76	122	118	357	340	309	258
	4,5		80	76	122	118	345	329	299	250
	6-9		68	64	104	100	277	264	240	201
10,001-15,000	1	5	100	96	155	150	469	447	407	340
	2,3		100	96	155	150	449	428	389	325
	4,5		100	96	155	150	434	413	376	314
	6-9		82	78	126	122	329	313	285	238
15,001-20,000	1	6	124	120	193	187	669	637	580	484
	2,3		124	120	193	187	636	606	551	461
	4,5		124	120	193	187	609	580	528	441
	6-9		99	95	153	149	434	413	376	314
20,001-25,000	1	7	132	128	206	200	789	751	683	571
	2,3		132	128	206	200	749	713	649	542
	4,5		132	128	206	200	714	680	619	517
	6-9		105	101	163	158	497	473	430	359
25,001-40,000	1	8	145	141	227	220	880	838	763	637
	2,3		145	141	227	220	834	794	723	603
	4,5		145	141	227	220	794	756	688	575
	6-9		114	110	177	172	544	518	471	394
40,001-65,000	1	10	166	161	260	252	1100	1048	954	796
	2,3		166	161	260	252	1040	990	901	752
	4,5		166	161	260	252	988	941	856	715
	6-9		129	125	201	195	659	628	571	477
65,001-90,000	1	11	178	173	279	271	1188	1131	1029	860
	2,3		178	173	279	271	1121	1068	972	812
	4,5		178	173	279	271	1065	1014	923	771
	6-9		138	134	215	209	706	672	612	511
Charge per \$1000 over \$90,000	1	12	0.44	0.42	0.68	0.66	6.86	6.53	5.94	4.96
	2,3		0.44	0.42	0.68	0.66	6.86	6.53	5.94	4.96
	4,5		0.44	0.42	0.68	0.66	6.86	6.53	5.94	4.96
	6-9		0.44	0.42	0.68	0.66	6.86	6.53	5.94	4.96

For Original Cost greater than \$90,000 add the rate per \$1000 to the \$65,000-\$90,000 rate.

For Fire only - Charge 40% of Fire, Theft & CAC Premium

Collision Waiver of Deductible -

For Fire and Theft only - Charge 85% of Fire, Theft & CAC Premium

\$300 Ded \$ 9

For Stated Amount Rating - Refer to Rule 42.

\$500 Ded \$ 11

\$1000 Ded \$ 20

Higher Deductibles for Comprehensive, Fire, Theft, and CAC -

\$2000 Ded \$ 32

\$1,000 Ded - Charge this % of \$500 Ded. Premium 95%

\$3000 Ded \$ 39

\$2,000 Ded - Charge this % of \$500 Ded. Premium 89%

\$4000 Ded \$ 45

\$3,000 Ded - Charge this % of \$500 Ded. Premium 85%

\$5000 Ded \$ 50

\$4,000 Ded - Charge this % of \$500 Ded. Premium 82%

\$5,000 Ded - Charge this % of \$500 Ded. Premium 80%

For Limited Collision - For any deductible, charge 7% of comparable collision premium after primary

and secondary rating factors, subject to a \$4 minimum. For no deductible, add \$9 to the \$300 deductible limited collision premium.

**Commercial Automobile Insurance Manual**

**GARAGES  
Rating Procedures**

**Liability Coverages for Garages Subject to the Massachusetts Compulsory Law**

COMPULSORY BODILY INJURY LIABILITY (Coverage A-1)

Refer to rate pages.

PERSONAL INJURY PROTECTION (Coverage A-2)

Refer to rate pages.

OPTIONAL BODILY INJURY LIABILITY (Coverage B)

Basic Limits

Refer to rate pages.

Increased Limits

For increased limits, apply the following formula:

$$(B, \text{incr}) = ((A-1) + (B, \text{basic}) \times \text{ILF} - (A-1))$$

where

B, incr denotes the Optional Bodily Injury Liability rate,

A-1 denotes the Compulsory Bodily Injury rate,

B, basic denotes the basic limits (20/40) Optional Bodily Injury Liability rate,

ILF denotes the appropriate Increased Limits Factor.

PROTECTION AGAINST UNINSURED (Coverage U1) AND UNDERINSURED (Coverage U2) MOTORISTS

Refer to rate pages.

PROPERTY DAMAGE LIABILITY (Coverage C)

Basic Limits

Refer to rate pages.

Increased Limits

For increased limits, apply the appropriate Increased Limits Factor to the basic limits rate shown on the rate pages.

Deductible Coverage

Refer to Manual rules.

MEDICAL PAYMENTS (Coverage D)

Refer to rate pages.

**Commercial Automobile Insurance Manual**

**GARAGES  
Rating Procedures**

**Liability Coverages for Garages—Dealer or Repair Plate Not Issued**

LIABILITY

Basic Limits (Combined Single Limit, \$50,000)  
Refer to rate pages.

Increased Limits

For increased limits, apply the appropriate Increased Limits Factor to the basic limits rate shown on the rate pages.

DEALERS PHYSICAL DAMAGE COVERAGE

Refer to rate and rule pages.

GARAGEKEEPERS INSURANCE

Refer to rate pages.

FIRE, THEFT, CAC, COMPREHENSIVE \$100 GLASS DEDUCTIBLE

Charge 92% of the otherwise determined premium that would apply in the absence of a glass deductible.

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	18	19	20
RATES PER PLATE																				
Coverage A-1	1189	1189	1189	1189	1189	1189	1189	1189	1189	1189	314	372	322	485	384	440	553	556	676	561
Coverage A-2	130	130	130	130	130	130	130	130	130	130	46	52	47	62	53	58	69	69	81	70
Coverage PDL	1360	1360	1360	1360	1360	1360	1360	1360	1360	1360	341	410	351	540	424	488	620	624	763	630
Coverage B	179	179	179	179	179	179	179	179	179	179	47	56	48	73	58	66	83	84	102	85

GARAGES MEDICAL PAYMENT TABLES						
Bodily Injury Liability Limits	Garage Automobile Medical Payments			Garage Automobile and Other Than Covered Autos		
	Limit per Person			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	4.5%	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		
Limits	U-1	U-2
	Uninsured	Underinsured
20/40	5	0
20/50	6	0
25/50	7	0
35/80	8	4
50/100	9	8
100/300	10	25
250/500	11	92
500/500	15	249

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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**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile**

Garages Subject to the Massachusetts Compulsory Law

Garage Operations - Other Than Covered Autos

**Liability Rates**

		Combined Single Limit of Liability (in 000's) - Rate is per \$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		28	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.

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COMMONWEALTH AUTOMOBILE REINSURERS  
Massachusetts Commercial Automobile

Garagekeepers Premiums - Other Than Collision

Limit of Maximum Liability	*Specified Causes of Loss		*Comprehensive	
	Legal Liability	Direct (Primary)	Legal Liability	Direct (Primary)
	Coverage Codes		Coverage Codes	
	(214)	(215)	(211)	(212)
\$6,000	\$ 143	\$ 218	\$ 175	\$ 265
7,500	173	261	203	306
9,000	194	294	233	349
12,000	243	362	294	442
15,000	288	414	338	509
18,000	313	473	381	574
22,500	388	581	457	689
30,000	488	723	580	869
37,500	567	853	685	1,028
45,000	648	973	776	1,163
60,000	798	1,201	958	1,437
75,000	943	1,414	1,135	1,700
90,000	1,083	1,625	1,299	1,947
120,000	1,337	2,006	1,599	2,399
150,000	1,566	2,347	1,881	2,821
180,000	1,800	2,701	2,165	3,244
225,000	2,167	3,247	2,601	3,898
300,000	2,740	4,114	3,287	4,930
375,000	3,323	4,989	3,986	5,982
450,000	3,891	5,838	4,670	7,008
600,000	4,986	7,479	5,978	8,965
750,000	6,044	9,063	7,245	10,871
900,000	7,070	10,609	8,482	12,724
1,000,000	8,043	12,069	9,649	14,474
<b>Direct Coverage (Excess)</b>		<b>Premium Computation</b>		
Specified Perils (216)		Multiply the coverage 214 premium by 1.35		
Comprehensive (213)		Multiply the coverage 211 premium by 1.35		

\*Theft and Mischief or Vandalism losses are subject to a \$100 per car and \$500 per occurrence deductible applying to each loss.

Optional Deductibles

\$250 per car and \$1,000 per occurrence - Multiply the above by .90.

\$500 per car and \$2,500 per occurrence - Multiply the above by .75.

For Garagekeepers Experience Rating Plan, refer to CAR.

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COMMONWEALTH AUTOMOBILE REINSURERS  
Massachusetts Commercial Automobile

Garagekeepers Premiums - Collision

Limit of Maximum Liability	Collision \$300 Deductible		Collision \$500 Deductible		Collision \$1000 Deductible	
	Legal Liability (311)	Direct (Primary) (312)	Legal Liability (311)	Direct (Primary) (312)	Legal Liability (311)	Direct (Primary) (312)
\$ 6,000	65	94	61	89	50	75
7,500	73	112	67	104	59	88
9,000	89	134	83	125	70	104
12,000	108	159	98	149	81	125
15,000	134	200	125	185	104	155
18,000	153	229	142	212	119	175
22,500	181	273	168	251	142	212
30,000	229	343	212	321	175	266
37,500	273	411	251	380	212	318
45,000	312	468	291	433	244	366
60,000	388	581	359	538	301	452
75,000	462	696	427	643	362	541
90,000	534	800	493	738	415	623
120,000	668	999	618	923	517	778
150,000	795	1,191	734	1,101	619	924
180,000	918	1,380	849	1,275	715	1,073
225,000	1,093	1,637	1,011	1,517	847	1,273
300,000	1,393	2,092	1,289	1,936	1,083	1,626
375,000	1,688	2,533	1,562	2,345	1,309	1,970
450,000	1,978	2,969	1,828	2,743	1,537	2,304
600,000	2,560	3,836	2,367	3,548	1,988	2,982
750,000	3,118	4,675	2,888	4,326	2,425	3,634
900,000	3,653	5,478	3,379	5,068	2,839	4,256
1,000,000	4,151	6,225	3,837	5,759	3,225	4,838
<b>Direct Coverage (Excess)</b>		<b>Premium Computation</b>				
Collision (313)		Multiply the coverage 311 premium by 1.35				

For Garagekeepers Experience Rating Plan, refer to CAR.

**Commercial Automobile Insurance Manual**

**GARAGES  
Rating Procedures**

**(RULE 88) PREMIUM DEVELOPMENT**

A. Covered Auto Coverage (Unlimited Liability Coverage for Customers)

Garage Trailer Plates (Class Code 07090)

For all liability coverages except Uninsured or Underinsured Motorists Coverage, apply a factor of .25 to the Trucks, Tractors and Trailers base rates.

For Uninsured or Underinsured Motorists Coverages, charge the Trucks, Tractors and Trailers rates.

B. Automobile Coverage (Limited Liability Coverage)

Apply a factor of 1.00 to the plate rate shown on the rate sheets for the following coverages:

Compulsory Bodily Injury  
Personal Injury Protection  
Property Damage (Basic Limit)  
Uninsured Motorist  
Underinsured Motorist

AND

Apply a factor of .95 to the plate rate shown on the rate sheets for:

Optional Bodily Injury  
Property Damage (Increased Limits)  
Medical Payments

**(RULE 103) FALSE PRETENSE COVERAGE**

\$ 300 Ded. - Charge \$0.40 per \$100

\$ 500 Ded. - Charge \$0.38 per \$100

\$1,000 Ded. - Charge \$0.35 per \$100

**(RULE 104) DEALERS COLLISION COVERAGE**

Named Driver - charge the Private Passenger Type rate for age group 1, original cost new \$5,000.

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**GARAGES  
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**(RULE 98) —**

For Non-Franchised Dealers multiply the rates displayed on this page by 1.10.

**COMPREHENSIVE RATES  
per \$100 of value**

Deductible	Buildings	Standard Open Lots	Non-Standard Open Lots	Miscellaneous Types Listed in Rule 102
\$ 300	\$2.07	\$2.35	\$2.49	\$2.27
500	\$1.94	\$2.17	\$2.33	\$2.11
1,000	\$1.68	\$1.91	\$2.00	\$1.81

Specified causes of Loss - Multiply the Comprehensive rate by .85  
 Fire - Multiply the Comprehensive rate by .10  
 Theft - Multiply the Comprehensive rate by .70  
 Fire & Theft – Multiply the Comprehensive Rate by .80.

Loss due to theft, malicious mischief or vandalism is subject to a maximum deductible. These vary according to the per car deductible as follows:

\$ 300 Ded. per car - \$1,500 per occurrence  
 \$ 500 Ded per car - \$2,500 per occurrence  
 \$1,000 Ded. per car - \$5,000 per occurrence

**BLANKET COLLISION RATES  
per \$100 of value**

Deductible	Reporting Form - Total of Value Reported Each Month or Quarter Non-Reporting Form - Total of Limits of Liability		
	First \$50,000 and under	\$50,001 to \$100,000	Over \$100,000
\$ 300	\$2.44	\$0.93	\$0.37
\$ 500	\$2.12	\$0.83	\$0.30
\$1,000	\$1.64	\$0.67	\$0.25

**Waiver of Deductible Charges:**

Apply the following factors to the otherwise applicable Collision premium - \$300 - 9%; \$500 - 14%; \$1,000 - 24%.

**Limited Collision:**

Any Deductible - charge 8.0% of the comparable Collision premium subject to a minimum of \$5.00.  
 No Deductible - charge 50% of the \$500 deductible Collision premium subject to a minimum of \$7.00.

**Commercial Automobile Insurance Manual**

**GARAGES  
Rating Procedures**

**(RULE 105) DEALERS DRIVE AWAY - COLLISION COVERAGE**

Definition

Dealers automobiles while being driven, towed or carried on any other automobile or trailer owned or hired by the insured from the point of purchase or distribution to the point of destination. Use distance from point of purchase or distribution to point of destination to determine the mileage rating basis. This coverage is not available to drive-away contractors.

Individual Coverage

When Collision coverage is not written on all dealers automobiles.

Blanket Coverage

When Collision Coverage is written on all dealers automobiles and drive away operation is in excess of 50 miles.

DRIVE-AWAY PREMIUMS PER CAR PER TRIP  
ALL TERRITORIES / ALL TYPES AND MAKES / ALL AGES

Price New at Factory to Dealers	Mileage	Individual Coverage		Blanket Coverage	
		Deductibles		Deductibles	
		\$300	\$500	\$300	\$500
\$ 0 - \$ 2,500	less than 500	7.96	6.73	3.97	3.36
	501 - 1,000	13.25	11.26	6.66	5.66
	1,001 - 1,500	17.60	15.00	8.88	7.50
	Over 1,500	22.11	18.82	11.03	9.43
\$ 2,501 - \$ 7,500	less than 500	10.41	8.88	5.36	4.59
	501 - 1,000	16.69	14.16	8.58	7.27
	1,001 - 1,500	23.20	19.75	11.79	10.01
	Over 1,500	28.94	24.65	14.86	12.71
\$ 7,501 - \$15,000	less than 500	15.07	12.76	7.57	6.49
	501 - 1,000	24.97	21.19	12.64	10.73
	1,001 - 1,500	33.20	28.32	16.69	14.16
	Over 1,500	41.60	35.38	20.99	17.82
\$15,001 - \$25,000	less than 500	20.99	17.82	10.41	8.88
	501 - 1,000	34.76	29.56	17.35	14.77
	1,001 - 1,500	46.37	39.42	23.13	19.67
	Over 1,500	58.09	49.43	28.94	24.57
\$25,001 - \$40,000	less than 500	25.40	21.58	12.76	10.87
	501 - 1,000	42.08	35.81	21.19	18.00
	1,001 - 1,500	56.17	47.76	28.25	24.03
	Over 1,500	70.34	59.81	35.38	30.08
\$40,001 - \$65,000	less than 500	29.18	24.78	14.69	12.49
	501 - 1,000	48.36	41.15	24.35	20.68
	1,001 - 1,500	64.56	54.90	32.46	27.62
	Over 1,500	80.81	68.71	40.65	34.57
Over \$65,000	less than 500	30.70	26.09	15.46	13.11
	501 - 1,000	50.89	43.30	25.63	21.75
	1,001 - 1,500	67.92	57.74	34.13	29.05
	Over 1,500	85.03	72.28	42.78	36.39

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 112) AMBULANCE SERVICES**

Premium Computation

1. Ambulance (Class Code 79130)

a. Liability and No-Fault Coverages

Multiply the fleet or non-fleet Trucks, Tractors and Trailers base premium by 3.00.

b. Physical Damage

(1) Determine the age group and original cost new.

(2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rating factors:

Other Than Collision	Collision
.87	1.23

2. Ambulance Type Automobiles Not Used For Emergency Purposes (Class Code 79140)

a. Liability and No-Fault Coverages

Multiply the fleet or non-fleet Trucks, Tractors and Trailers base premium by 2.00.

b. Physical Damage

(1) Determine the age group and original cost new.

(2) Multiply the Truck, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rating factors:

Other Than Collision	Collision
.87	1.23

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 116) DRIVER TRAINING PROGRAMS**

A. Driver Training Programs - Educational Institutions (Class Code 79260)

Premium Computation

1. Liability and No-Fault Coverages

- (1) For automobiles equipped with dual controls, multiply the Private Passenger Type fleet or non-fleet rates by .75. There must be dual brakes to qualify as dual control.
- (2) For automobiles not equipped with dual controls, multiply the Private Passenger Type fleet or non-fleet rates by 1.50.

2. Collision Coverage

- (1) For automobiles equipped with dual controls, charge the Private Passenger Type fleet or non-fleet rates. There must be dual brakes to qualify as dual control.
- (2) For automobiles not equipped with dual controls, multiply the Private Passenger Type fleet or non-fleet rates by 2.25.

3. All Other Coverages

Apply 1.50 factor to the Private Passenger Type fleet or non-fleet rates.

B. Commercial Driving Schools (Class Code 79270)

a. Owned Private Passenger Automobiles

(1) Liability and No-Fault Coverages

- (a) For automobiles equipped with dual controls, charge the Private Passenger Type fleet or non-fleet rates. There must be dual brakes to qualify as dual controls.
- (b) For automobiles not equipped with dual controls, multiply the Private Passenger Type fleet or non-fleet rates by 2.00.

(2) Collision Coverage

- (a) For automobiles equipped with dual controls, apply 1.50 factor to the Private Passenger Type fleet or non-fleet rates. There must be dual brakes to qualify as dual controls.
- (b) For automobiles not equipped with dual controls, multiply the Private Passenger Type fleet or non-fleet rates by 3.00.



**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 116) DRIVER TRAINING PROGRAMS (Continued)**

- (3) All Other Coverages

Apply 1.50 factor to the Private Passenger Type fleet or non-fleet rates.

- b. All Other Types of Owned Automobiles

Multiply the Trucks, Trailers and Semitrailers base premiums by 2.00.

**(RULE 117) FIRE DEPARTMENT**

Premium Computation

- 1. Private Passenger Automobiles (Class Code 79080)

- a. Liability and No-Fault Coverages

Charge Private Passenger Type fleet or non-fleet rates.

- b. Physical Damage

Multiply the Private Passenger Type rates by .75.

- 2. Trailer Types

Classify and rate according to the Trucks, Tractors and Trailers Rule.

- 3. All Other Types (Class Code 79090)

- a. Liability and No-Fault Coverages

Multiply the fleet or non-fleet Trucks, Tractors and Trailers base premiums by 1.60.

- b. Physical Damage

- (1) Determine the age group and original cost new.

- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rating factors:

Other Than Collision	Collision
.64	.51

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
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**(RULE 118) FUNERAL DIRECTORS**

Premium Computation

1. Limousines (Class Code 79150)

a. Liability and No-Fault Coverages

Multiply the Private Passenger Type fleet or non-fleet rates by .90.

b. Physical Damage

Charge the Private Passenger Type fleet or non-fleet rates.

2. Hearses and Flower Cars (Class Code 79220)

a. Liability, Medical Payments and No-Fault Coverages

Multiply the fleet or non-fleet Trucks, Tractors and Trailers base premiums by .90.

b. Physical Damage

(1) Determine the age group and original cost new.

(2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rating factors:

Other Than Collision	Collision
.50	.50

3. Combination Hearses and Ambulances

Classify and rate the automobile according to the Ambulance Service Rule.

4. Automobiles Used for Other Purposes

Classify and rate the automobile according to its regular use.

**(RULE 119) LAW ENFORCEMENT AGENCIES**

Premium Computation

1. Private Passenger Automobiles (Class Code 79110)

a. Liability and No-Fault Coverages

Charge the Private Passenger Type fleet or non-fleet rates.

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
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**(RULE 119) LAW ENFORCEMENT AGENCIES (Continued)**

b. Physical Damage Coverages

Apply 1.50 factor to the Private Passenger Type fleet or non-fleet rates.

2. Motorcycles (Class Code 79420)

Use the Motorcycle rates from Rule 122 of the Commercial Automobile Insurance Manual.

3. Trailer Types

Classify and rate according to the Trucks, Tractors and Trailers Rule.

4. All Other Types (Class Code 79120)

a. Liability and No-Fault Coverages

Multiply the fleet or non-fleet Trucks, Tractors and Trailers base premiums by 1.60.

b. Physical Damage

(1) Determine the age group and original cost new.

(2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rating factors.

Other Than Collision	Collision
1.28	1.23

**(RULE 120) LEASING OR RENTAL CONCERNS**

Premium Computation

When determining the premiums, use the territory where the automobile is principally garaged.

1. Specified Car Basis

a. Long Term - automobiles leased for one year, or more.

(1) Full Coverage for Owner and Lessee

(a) If coverage is provided by the lessor:

i. Private passenger automobiles at the classification rates in this Manual that apply to the lessee.

ii. All Other - rate the automobile at the classification rates in this Manual that apply to the lessee.

(b) If the coverage is provided by the lessee - rate the automobile at the classification rates in this Manual that apply to the lessee.

(2) Contingent Coverage. Refer to company (Class Code 72190).

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
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**(RULE 120) LEASING OR RENTAL CONCERNS (Continued)**

b. Short Term - automobiles rented by the hour, day or week.

(1) Commercial Automobiles

Multiply the Trucks, Trailers and Semitrailers base premiums by the following factors:

	Liability	Code	Physical Damage
Trucks	4.00	72110	5.00
Tractors	5.00	72120	5.00
Trailers, semitrailers and service trailers, including trailers designed for use with a private passenger automobile.	0.25	72130	0.25

(2) Private Passenger Automobiles (Class Code 72140)

Liability

Multiply the Private Passenger Type fleet or non-fleet rates by 3.00.

Physical Damage

Multiply the age group 1, original cost new \$5,000 Private Passenger Type fleet or non-fleet rates by the following factors:

Collision	4.50
O.T.C	2.25

(3) Special Types (Class Code 72160)

(a) Motorcycles, Motorbikes and Other Similar Motor Vehicles

Multiply the rates developed in Rule 122 (Motorcycles and Similar Vehicles) by the following factors:

Liability	4.00
Physical Damage	4.00

(4) Non-Dealer Garage Risks - Customer Rental (Class Code 72160)

For private passenger automobiles rented to customers while their automobiles are temporarily left with named insured for service, repair of sale, charge the Private Passenger Type fleet or non-fleet rates.

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 120) LEASING OR RENTAL CONCERNS (Continued)**

(5) Motor Homes (Class Code 72150)

Multiply the rates developed in the Mobile Home Rule by the following factors:

Liability	4.00
Physical Damage	4.00

(6) Rent-It-Here/Leave-It-There Automobiles

The policy shall be endorsed to exclude coverage for the owner or rentee of any rent-it-here automobile not owned by the named insured.

2. Gross Receipts Basis

Refer to the Composite Rating Rule.

3. Conversion, Embezzlement or Secretion Coverage

Coverage under Comprehensive or Theft for conversion, embezzlement or secretion may be provided at the following rates:

Trucks, Tractors and Trailers	- \$1.10 per \$100 of insurance
All Others	- \$5.51 per \$100 of insurance

**(RULE 121) MOBILE HOMES**

1. Trailers Equipped as Living Quarters (Class Code 79630)

a. Liability

Apply a factor of .40 to the appropriate fleet or non-fleet Trucks, Tractors and Trailers base premiums.

b. Medical Payments

Use the Truck, Tractor and Trailer Automobile Medical Payments Table.

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 121) MOBILE HOMES (Continued)**

c. Physical Damage

- (1) Determine the age group and original cost new.
- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rate factors.

Other Than Collision	Collision
.52	.52

2. Pick-up Trucks Used Solely to Transport Camper Bodies (Class Code 79620)

a. Liability

Apply a factor of 1.25 to the appropriate fleet or non-fleet Trucks, Tractors and Trailers base premiums.

b. Medical Payments

Use the Truck, Tractor and Trailer Automobile Medical Payments Table.

c. Physical Damage

- (1) Determine the age group and original cost new.
- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rate factors:

Other Than Collision	Collision
1.00	1.00

3. Motor Homes

Self-propelled vehicles equipped as living quarters. Overall length not more than 22 feet (Class Code 79600) and overall length more than 22 feet (Class Code 79610)

a. Liability

Apply a factor of 1.25 (not more than 22 feet) or 1.60 (more than 22 feet) to the appropriate fleet or non-fleet TTT base premiums.

b. Medical Payments

Use the TTT Medical Payments Table.

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 121) MOBILE HOMES (Continued)**

c. Physical Damage

- (1) Determine the age group and original cost new.
- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rate factors:

<u>Other Than Collision</u>	<u>Collision</u>
1 .03	1.03

**(RULE 122) MOTORCYCLES AND SIMILAR VEHICLES**

Premium Computation

Use the Commercial Motorcycle Rates contained on page R-179.

**(RULE 124) REGISTRATION PLATES NOT ISSUED TO A SPECIFIC AUTOMOBILE**

Premium Computation

1. Farmers Special Plates (Class Code 79530)

a. Liability

Apply a .70 factor to the non-fleet Trucks, Tractors and Trailers base premiums for each farmers special plate.

b. Physical Damage

Physical damage coverage is available on a specified car basis only.

2. Boat Trailers (Class Code 04560)

For all liability coverages except Uninsured Motorists or Underinsured Motorists Coverage, apply a factor of .25 to the Trucks, Tractors and Trailers base rates.

For Uninsured or Underinsured Motorists Coverage, charge the Trucks, Tractors and Trailers rate.

**Commercial Automobile Insurance Manual**

**SPECIAL TYPES  
Rating Procedures**

**(RULE 125) SPECIAL OR MOBILE EQUIPMENT**

Premium Computation

A. Subject to the Compulsory Law

1. Equipment Capable Of Moving Under Its Own Power (Class Code 79340)

a. Liability

Apply a factor of 1.25 to the appropriate fleet or non-fleet commercial base premiums except: Well Drilling Machinery - apply a factor of .75.

b. Physical Damage

- (1) Determine the age group and original cost new.
- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rate factors:

<u>Other Than Collision</u>	<u>Collision</u>
.81	.84

2. Equipment Incapable Of Moving Under Its Own Power (Class Code 79390)

a. Liability

Charge \$26.45 for Compulsory Bodily Injury Liability, \$3.31 for Personal Injury Protection, and \$5.51 for Optional Bodily Injury Liability at basic limits. Property Damage Liability is provided without additional charge.

b. Physical Damage

Charge the rates applicable to a vehicle capable of moving under its own power.

B. Not Subject to the Compulsory Law, but Subject to Registration (Class Code 79650)

Charge the rates applicable to a vehicle Subject to the Compulsory Law, Rule 125 A.1.

C. Farm Equipment (Class Code 79070)

1. Liability

Apply a factor of .20 to the appropriate fleet or non-fleet Truck, Tractor or Trailer base premium.

2. Physical Damage

- (1) Determine the age group and original cost new.
- (2) Multiply the Trucks, Trailers and Semitrailers Not Used In Dumping Operations base premium by the following rate factors:

Other Than Collision	Collision
.64	.39



**Commercial Automobile Insurance Manual**

**INCREASED LIMITS FACTORS**

**Commonwealth Automobile Reinsurers  
Massachusetts Commercial Automobile  
Increased Limit Factors for Bodily Injury Liability**

R-162  
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2/1/2018

**Trucks, Tractors and Trailers, Private Passenger Types, Van Pools, Buses, Motorcycles**

02/01/18

(Limits Expressed in Thousands)

LIMIT PER PERSON

	2	2	3	3	4	5	1	1	2	2	3	4	5	6	7	8	9	1	1	1	1	2	2	3	4	5	
	0	5	0	5	0	0	0	5	0	5	0	0	0	0	0	0	0	0	2	5	0	0	0	0	0	0	
L	40	1.00	1.13	1.21	1.28	1.33																					
I	45	1.02	1.13	1.21	1.28	1.34																					
M	50	1.04	1.13	1.22	1.28	1.34	1.44																				
I	60	1.04	1.14	1.22	1.29	1.34	1.44																				
T	70	1.05	1.14	1.22	1.29	1.35	1.44																				
	80	1.05	1.15	1.23	1.29	1.35	1.45																				
	100	1.05	1.15	1.23	1.30	1.35	1.45	1.76																			
	150	1.06	1.16	1.24	1.31	1.36	1.46	1.77	1.95																		
	200	1.07	1.17	1.25	1.31	1.37	1.47	1.77	1.96	2.09																	
	250	1.07	1.17	1.25	1.32	1.37	1.47	1.78	1.97	2.10	2.20																
P	300	1.08	1.18	1.25	1.32	1.38	1.47	1.78	1.97	2.10	2.21	2.30															
E	350	1.08	1.18	1.26	1.32	1.38	1.48	1.78	1.97	2.11	2.21	2.31															
R	400						1.48	1.79	1.98	2.11	2.22	2.31	2.46														
	500						1.49	1.79	1.98	2.12	2.22	2.32	2.47	2.58													
A	600						1.49	1.80	1.99	2.12	2.23	2.32	2.47	2.59	2.66												
C	700						1.49	1.80	1.99	2.12	2.23	2.32	2.47	2.59	2.66	2.72											
C	800						1.50	1.80	1.99	2.13	2.23	2.33	2.48	2.59	2.66	2.72	2.77										
I	900						1.50	1.81	2.00	2.13	2.24	2.33	2.48	2.60	2.66	2.72	2.77	2.81									
D	1000						1.50	1.81	2.00	2.13	2.24	2.33	2.48	2.60	2.67	2.72	2.77	2.81	2.85								
E	1250						1.51	1.81	2.00	2.14	2.24	2.34	2.49	2.60	2.67	2.73	2.77	2.82	2.85	2.94							
N	1500						1.51	1.82	2.01	2.14	2.25	2.34	2.49	2.61	2.67	2.73	2.78	2.82	2.86	2.95	3.02						
T	1750						1.51	1.82	2.01	2.15	2.25	2.35	2.50	2.61	2.68	2.73	2.78	2.82	2.86	2.95	3.02	3.08					
	2000						1.52	1.82	2.01	2.15	2.26	2.35	2.50	2.61	2.68	2.73	2.78	2.82	2.86	2.95	3.02	3.08	3.14				
	2500						1.52	1.83	2.02	2.15	2.26	2.36	2.51	2.62	2.68	2.74	2.79	2.83	2.87	2.96	3.03	3.09	3.14	3.23			
	3000						1.83	2.02	2.16	2.27	2.36	2.51	2.62	2.69	2.74	2.79	2.83	2.87	2.96	3.03	3.09	3.14	3.23	3.30			
	4000						1.84	2.03	2.16	2.27	2.37	2.52	2.63	2.69	2.75	2.80	2.84	2.88	2.97	3.04	3.10	3.15	3.24	3.31	3.42		
	5000						1.85	2.04	2.17	2.28	2.38	2.53	2.63	2.70	2.75	2.80	2.84	2.88	2.97	3.04	3.10	3.15	3.24	3.31	3.43	3.51	

Increased Limit Factor for 45/45 limit is 1.39  
 Increased Limit Factor for 75/75 limit is 1.62  
 Increased Limit Factor for 750/750 limit is 2.74  
 Increased Limit Factor for 550/550 limit is 2.62

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limit Factors for Bodily Injury Liability**

R-163  
 C.A.R.  
 2/1/2018

**Taxis**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON									
		2	2	3	3	4	5	1	1	2	2
		0	5	0	5	0	0	0	5	0	5
		0	0	0	0	0	0	0	0	0	0
L	40	1.00	1.12	1.19	1.25	1.31					
I	45	1.02	1.12	1.20	1.26	1.31					
M	50	1.04	1.12	1.20	1.26	1.31	1.40				
I	60	1.04	1.13	1.20	1.26	1.31	1.40				
T	70	1.05	1.13	1.20	1.26	1.32	1.40				
P	80	1.05	1.14	1.21	1.27	1.32	1.41				
E	100	1.05	1.14	1.21	1.27	1.32	1.41	1.67			
R	150	1.06	1.15	1.22	1.28	1.33	1.42	1.68	1.85		
A	200	1.07	1.15	1.22	1.29	1.34	1.42	1.68	1.85	1.98	
C	250	1.07	1.16	1.23	1.29	1.34	1.43	1.69	1.86	1.98	2.08
C	300	1.07	1.16	1.23	1.29	1.34	1.43	1.69	1.86	1.98	2.08
I	350	1.08	1.16	1.24	1.30	1.35	1.43	1.69	1.87	1.99	2.08
D	400						1.44	1.70	1.87	1.99	2.09
E	400						1.44	1.70	1.87	1.99	2.09
N	500						1.44	1.70	1.87	2.00	2.09
T	500						1.44	1.70	1.87	2.00	2.09

Increased Limit Factor for 45/45 limit is 1.35  
 Increased Limit Factor for 75/75 limit is 1.55

**Commonwealth Automobile Reinsurers  
Massachusetts Commercial Automobile  
Increased Limit Factors for Bodily Injury Liability**

R-164  
C.A.R.  
2/1/2018

**Limousines and Car Service**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON																			
		2	2	3	3	4	5	1	1	2	2	3	4	5	6	7	8	9	1	1	1
		0	5	0	5	0	0	0	5	0	5	0	0	0	0	0	0	0	0	5	0
		0	5	0	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
L I M I T  P E R  A C C I D E N T	40	1.00	1.12	1.19	1.25	1.31															
	45	1.02	1.12	1.20	1.26	1.31															
	50	1.04	1.12	1.20	1.26	1.31	1.40														
	60	1.04	1.13	1.20	1.26	1.31	1.40														
	70	1.05	1.13	1.20	1.26	1.32	1.40														
	80	1.05	1.14	1.21	1.27	1.32	1.41														
	100	1.05	1.14	1.21	1.27	1.32	1.41	1.67													
	150	1.06	1.15	1.22	1.28	1.33	1.42	1.68	1.85												
	200	1.07	1.15	1.22	1.29	1.34	1.42	1.68	1.85	1.98											
	250	1.07	1.16	1.23	1.29	1.34	1.43	1.69	1.86	1.98	2.08										
	300	1.07	1.16	1.23	1.29	1.34	1.43	1.69	1.86	1.98	2.08	2.16									
	350	1.08	1.16	1.24	1.30	1.35	1.43	1.69	1.87	1.99	2.08	2.16									
	400						1.44	1.70	1.87	1.99	2.09	2.16	2.28								
	500						1.44	1.70	1.87	2.00	2.09	2.17	2.28	2.38							
	600						1.44	1.71	1.88	2.00	2.09	2.17	2.29	2.38	2.44						
700						1.45	1.71	1.88	2.00	2.10	2.17	2.29	2.38	2.44	2.49						
800						1.45	1.71	1.88	2.01	2.10	2.18	2.29	2.39	2.44	2.49	2.54					
900						1.45	1.71	1.89	2.01	2.10	2.18	2.30	2.39	2.45	2.50	2.54	2.58				
1000						1.45	1.72	1.89	2.01	2.10	2.18	2.30	2.39	2.45	2.50	2.54	2.58	2.61			
1250						1.46	1.72	1.89	2.02	2.11	2.18	2.30	2.39	2.45	2.50	2.54	2.58	2.61	2.69		
1500						1.46	1.72	1.90	2.02	2.11	2.19	2.31	2.40	2.45	2.50	2.55	2.58	2.62	2.70	2.76	

Increased Limit Factor for 45/45 limit is 1.35  
 Increased Limit Factor for 75/75 limit is 1.55  
 Increased Limit Factor for 750/750 limit is 2.51  
 Increased Limit Factor for 550/550 limit is 2.41

**Commonwealth Automobile Reinsurers  
Massachusetts Commercial Automobile  
Increased Limit Factors for Bodily Injury Liability**

R-165  
C.A.R.  
2/1/2018

**Garages**

**02/01/18**

(Limits Expressed in Thousands)

LIMIT PER PERSON

	2	2	3	3	4	5	1	1	2	2	3	4	5	6	7	8	9	1	1	1	1	2	2	3	4	5	
	0	5	0	5	0	0	0	5	0	5	0	0	0	0	0	0	0	0	5	0	7	0	5	0	0	0	
L	40	1.00	1.13	1.21	1.27	1.33																					
I	45	1.02	1.13	1.21	1.27	1.33																					
M	50	1.04	1.13	1.21	1.28	1.33	1.43																				
I	60	1.04	1.14	1.22	1.28	1.34	1.43																				
T	70	1.05	1.14	1.22	1.28	1.34	1.43																				
	80	1.05	1.15	1.22	1.29	1.34	1.44																				
	100	1.05	1.15	1.23	1.29	1.35	1.44	1.75																			
	150	1.06	1.16	1.24	1.30	1.36	1.45	1.76	1.95																		
	200	1.07	1.17	1.24	1.31	1.36	1.46	1.76	1.96	2.10																	
	250	1.07	1.17	1.25	1.31	1.37	1.46	1.77	1.96	2.10	2.21																
P	300	1.08	1.17	1.25	1.31	1.37	1.46	1.77	1.97	2.11	2.22	2.30															
E	350	1.08	1.18	1.25	1.32	1.37	1.47	1.77	1.97	2.11	2.22	2.31															
R	400						1.47	1.78	1.98	2.12	2.23	2.31	2.44														
	500						1.48	1.78	1.98	2.12	2.23	2.32	2.45	2.55													
A	600						1.48	1.79	1.99	2.13	2.23	2.32	2.45	2.56	2.65												
C	700						1.48	1.79	1.99	2.13	2.24	2.32	2.46	2.56	2.65	2.73											
C	800						1.49	1.79	1.99	2.13	2.24	2.33	2.46	2.57	2.65	2.73	2.80										
I	900						1.49	1.80	2.00	2.14	2.24	2.33	2.46	2.57	2.66	2.73	2.80	2.86									
D	1000						1.49	1.80	2.00	2.14	2.25	2.33	2.47	2.57	2.66	2.74	2.80	2.86	2.91								
E	1250						1.50	1.81	2.00	2.14	2.25	2.34	2.47	2.58	2.67	2.74	2.81	2.86	2.91	3.00							
N	1500						1.50	1.81	2.01	2.15	2.26	2.34	2.48	2.58	2.67	2.75	2.81	2.87	2.92	3.01	3.08						
T	1750						1.50	1.81	2.01	2.15	2.26	2.34	2.48	2.58	2.67	2.75	2.81	2.87	2.92	3.01	3.08	3.15					
	2000						1.51	1.82	2.01	2.16	2.26	2.35	2.48	2.59	2.68	2.75	2.82	2.88	2.92	3.01	3.09	3.15	3.20				
	2500						1.51	1.82	2.02	2.16	2.27	2.35	2.49	2.59	2.68	2.76	2.82	2.88	2.93	3.02	3.09	3.15	3.21	3.30			
	3000							1.83	2.02	2.17	2.27	2.36	2.49	2.60	2.69	2.76	2.83	2.89	2.93	3.02	3.10	3.16	3.21	3.30	3.37		
	4000							1.83	2.03	2.17	2.28	2.36	2.50	2.60	2.69	2.77	2.84	2.89	2.94	3.03	3.10	3.16	3.22	3.31	3.38	3.49	
	5000							1.84	2.04	2.18	2.28	2.37	2.50	2.61	2.70	2.78	2.84	2.90	2.94	3.03	3.11	3.17	3.22	3.31	3.38	3.50	3.59

Increased Limit Factor for 45/45 limit is 1.38  
 Increased Limit Factor for 75/75 limit is 1.62  
 Increased Limit Factor for 750/750 limit is 2.76  
 Increased Limit Factor for 550/550 limit is 2.60

**Commonwealth Automobile Reinsurers  
Massachusetts Commercial Automobile  
Property Damage Liability Increased Limit Factors**

<u>Limit</u>	<u>Motorcycle, PPT, GAR *</u>	<u>Light / Medium TTT</u>	<u>Heavy Trucks &amp; Truck Tractors</u>	<u>Extra Heavy Trucks &amp; Truck Tractors, Trailers/Semi Trailers</u>	<u>Taxis, Limos &amp; Car Service</u>	<u>Bus &amp; Van Pool</u>
\$5,000	1.000	1.000	1.000	1.000	1.000	1.000
\$10,000	1.220	1.300	1.313	1.379	1.220	1.210
\$15,000	1.290	1.379	1.413	1.509	1.290	1.280
\$20,000	1.318	1.410	1.463	1.578	1.318	1.308
\$25,000	1.340	1.434	1.501	1.631	1.340	1.330
\$30,000	1.351	1.443	1.522	1.666	1.351	1.341
\$35,000	1.360	1.452	1.540	1.695	1.360	1.350
\$40,000	1.365	1.458	1.558	1.725	1.365	1.355
\$45,000	1.368	1.461	1.566	1.739	1.368	1.358
\$50,000	1.370	1.464	1.573	1.751	1.370	1.360
\$75,000	1.379	1.474	1.629	1.822	1.379	1.369
\$80,000	1.379	1.474	1.631	1.824	1.379	1.369
\$100,000	1.380	1.475	1.638	1.833	1.380	1.370
\$150,000	1.386	1.482	1.695	1.883	1.386	1.376
\$200,000	1.388	1.485	1.718	1.903	1.388	1.378
\$250,000	1.390	1.487	1.736	1.918	1.390	1.380
\$300,000	1.390	1.487	1.776	1.927	1.390	1.380
\$400,000	1.390	1.487	1.812	1.936	1.390	1.380
\$500,000	1.390	1.487	1.841	1.942	1.390	1.380
\$550,000	1.390	1.487	1.861	1.951	1.390	1.380
\$750,000	1.390	1.487	1.897	1.965	1.390	1.380
\$1,000,000	1.390	1.488	1.928	1.980	1.390	1.380
\$1,500,000	1.470	1.573	2.043	2.095	1.470	1.460
\$2,000,000	1.494	1.599	2.072	2.129	1.494	1.484
\$2,500,000	1.515	1.622	2.101	2.158	1.515	1.504
\$5,000,000	1.714	1.834	2.377	2.441	1.714	1.702

\* All other vehicle types should use these increased limit factors.

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limits Rates for Uninsured Motorists (U1)**

R-167  
 C.A.R.  
 2/1/2018

**All Vehicle Types Excluding Taxicabs and Motorcycles**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON												
		2	2	3	3	4	5	1	1	2	2	3	4	5
		0	5	0	5	0	0	0	5	0	5	0	0	0
L I M I T P E R A C C I D E N T	40	5	7	8	8	9								
	45	6	7	8	8	9								
	50	6	7	8	8	9	9							
	60	6	8	8	8	9	9							
	70	6	8	8	8	9	9							
	80	6	8	8	8	9	9							
	100	6	8	8	9	9	9	10						
	150	6	8	8	9	9	9	10	10					
	200	6	8	8	9	9	9	10	10	11				
	250	6	8	8	9	9	9	10	10	11	11			
	300	6	8	8	9	9	9	10	10	11	11	12		
	350	6	8	8	9	9	9	10	10	11	11	12		
	400						9	10	10	11	11	12	14	
	500						9	10	10	11	11	12	14	15

Increased Limit Rate for 45/45 limit is 9  
 Increased Limit Rate for 75/75 limit is 10

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limit Rates for Uninsured Motorists (U1)**

R-168  
 C.A.R.  
 2/1/2018

**Taxis**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON									
		2	2	3	3	4	5	1	1	2	2
		0	5	0	5	0	0	0	5	0	5
L I M I T P E R A C C I D E N T	40	31	33	36	38	39					
	45	32	33	36	38	39					
	50	32	33	36	38	39	42				
	60	32	34	36	38	39	42				
	70	32	34	36	38	39	42				
	80	32	34	36	38	39	42				
	100	32	34	36	38	40	42	51			
	150	32	35	37	38	40	42	52	56		
	200	32	35	37	38	40	42	52	56	58	
	250	32	35	37	39	40	43	52	56	59	61
	300	32	35	37	39	40	43	52	56	59	61
	350	32	35	37	39	40	43	52	56	59	61
	400						43	52	56	59	61
	500						43	52	56	59	61

Increased Limit Rate for 45/45 limit is 40  
 Increased Limit Rate for 75/75 limit is 48



**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limit Rates for Uninsured Motorists (U1)**

R-169  
 C.A.R.  
 2/1/2018

**Commercial Motorcycles**

**02/01/18**

(Limits Expressed in Thousands)

LIMIT PER PERSON

	2 0	2 5	3 0	3 5	4 0	5 0	1 0	1 5	2 0	2 5	3 0	4 0	5 0	6 0	7 0	8 0	9 0	1 0	
L	40	35	41	42	44	45													
I	45	35	41	42	44	45													
M	50	35	41	42	44	45	50												
I	60	35	41	42	44	45	50												
T	70	35	41	42	44	45	50												
P	80	35	41	42	44	45	50												
E	100	36	41	42	44	47	50	56											
R	150	36	41	42	44	47	50	56	57										
A	200	36	41	42	44	47	50	56	57	59									
C	250	36	41	42	45	47	50	56	57	59	60								
C	300	38	41	42	45	47	50	56	57	59	60	63							
I	350	38	42	44	45	47	50	56	57	59	60	63							
D	400						50	56	57	59	60	63	71						
E	500						50	56	57	59	60	65	71	75					
N	600						50	56	57	59	60	65	71	80	92				
T	700						51	56	57	59	60	65	71	83	92	95			
	800						51	56	57	59	60	65	71	86	92	95	96		
	900						51	56	57	59	60	65	71	87	93	95	96	98	
	1000						51	56	57	59	62	65	71	90	93	95	96	98	99

Increased Limit Rate for 45/45 limit is 47

Increased Limit Rate for 750/750 limit is 95

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limits Rates for Underinsured Motorists (U2)**

R-170  
 C.A.R.  
 2/1/2018

**All Vehicle Types Excluding Taxicabs and Motorcycles**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON												
		2	2	3	3	4	5	1	1	2	2	3	4	5
		0	5	0	5	0	0	0	5	0	5	0	0	0
L														
I														
M	40	0	0	3	4	5								
I	45	0	0	3	4	5								
T	50	0	0	3	4	5	8							
P	60	0	1	3	4	6	8							
E	70	0	1	3	4	6	8							
R	80	0	1	3	4	6	8							
A	100	0	1	3	5	6	8	24						
C	150	0	1	3	5	6	8	24	51					
C	200	0	2	3	5	6	9	25	52	73				
I	250	0	2	3	5	6	9	25	53	74	90			
D	300	0	2	4	5	6	9	25	54	74	90	128		
E	350	0	2	4	5	6	9	26	54	75	91	129		
N	400						10	26	55	75	91	131	196	
T	500						10	27	56	76	92	133	199	249

Increased Limit Rate for 45/45 limit is 7  
 Increased Limit Rate for 75/75 limit is 19

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limits Rates for Underinsured Motorists (U2)**

R-171  
 C.A.R.  
 2/1/2018

**Taxis**

**02/01/18**

(Limits Expressed in Thousands)

		LIMIT PER PERSON									
		2	2	3	3	4	5	1	1	2	2
		0	5	0	5	0	0	0	5	0	5
L I M I T P E R A C C I D E N T	40	0	0	3	4	5					
	45	0	0	3	4	5					
	50	0	0	3	4	5	8				
	60	0	1	3	4	6	8				
	70	0	1	3	4	6	8				
	80	0	1	3	4	6	8				
	100	0	1	3	5	6	8	24			
	150	0	1	3	5	6	8	24	51		
	200	0	2	3	5	6	9	25	52	73	
	250	0	2	3	5	6	9	25	53	74	90
	300	0	2	4	5	6	9	25	54	74	90
350	0	2	4	5	6	9	26	54	75	91	
400						10	26	55	75	91	
500						10	27	56	76	92	

Increased Limit Rate for 45/45 limit is 7  
 Increased Limit Rate for 75/75 limit is 19

**Commonwealth Automobile Reinsurers  
 Massachusetts Commercial Automobile  
 Increased Limits Rates for Underinsured Motorists (U2)**

R-172  
 C.A.R.  
 2/1/2018

**Commercial Motorcycles**

**02/01/18**

**(Limits Expressed in Thousands)**

LIMIT PER PERSON

		2	2	3	3	4	5	1	1	2	2	3	4	5	6	7	8	9	1
		0	5	0	5	0	0	0	5	0	5	0	0	0	0	0	0	0	0
L	40	0	8	17	23	30													
I	45	2	8	17	23	30													
M	50	2	8	17	23	30	45												
I	60	2	9	17	24	32	45												
T	70	2	9	17	24	32	45												
	80	2	9	18	24	32	47												
P	100	3	11	18	24	33	47	119											
E	150	3	11	20	26	35	48	122	254										
R	200	3	12	20	27	35	50	123	258	359									
	250	3	12	20	27	36	51	123	263	362	440								
A																			
C	300	5	12	20	29	36	53	125	266	365	443	534							
C	350	5	14	21	29	36	53	128	269	368	446	539							
I	400						54	129	270	371	447	542	695						
D	500						56	134	275	374	452	548	701	819					
E	600						56	137	278	377	456	554	705	917	1217				
N																			
T	700						57	140	281	380	461	557	710	998	1218	1247			
	800						57	141	282	383	464	561	713	1070	1220	1247	642		
	900						59	144	285	384	467	564	717	1133	1220	1248	642	806	
	1000						59	146	287	386	470	567	719	1188	1221	1250	642	806	1185

Increased Limit Rate for 45/45 limit is

38

Increased Limit Rate for 750/750 limit is

1259

**Commercial Automobile Insurance Manual**

**PRO RATA AND SHORT TABLES**

**Commercial Automobile Insurance Manual**

**PRO RATA AND SHORT RATE TABLES**

**INSTRUCTIONS FOR USE OF THE SHORT RATE TABLE:**

1. Determine the pro rata earned premium factor in accordance with the instructions for use of the Pro Rata Table.
2. Add to the pro rata factor the following factor:

<b>Policy Period Months in Effect</b>		
in excess of	but less than	Factors
0	1	.000
1	2	.055
2	3	.050
3	4	.045
4	5	.040
5	6	.035
6	7	.030
7	8	.025
8	9	.020
9	10	.015
10	11	.010
11	12	.005

3. Apply the factor determined in 2 above to the annual premium to compute the percentage of the annual premium which is to be retained by the company.

**Example:**

Pro rata premium in example	.214
Short rate factor (policy in effect for 2-3 months)	<u>.050</u>
	.264

Earned premium for annual policy cancelled on a short rate basis is .264 times the annual premium.

**Commercial Automobile Insurance Manual**

**PRO RATA AND SHORT RATE TABLES**

**INSTRUCTIONS FOR USE OF PRO RATA OR SHORT RATE TABLE**

1. Express the date of cancellation by year and decimal part of a year by combining the calendar year with the decimal appearing opposite the month and day in the Pro Rata Table, e.g., March 7, 1995 is designated as 1995.181.
2. In like manner express the effective date of the policy by year and decimal part of a year and subtract from the cancellation date.
3. The difference represents the percentage of the annual premium which is to be retained by the carrier.

**Examples:**

Cancellation date September 22, 1995	1995.726
Effective date July 6, 1995	<u>1995.512</u>

Earned premium for one year policy term will therefore be .214 times the annual premium. .214

Cancellation date March 7, 1995	1995.181
Effective date December 15, 1994	<u>1994.956</u>

Earned premium for one year policy term will therefore be .225 times the annual premium. .225

**NOTE:** As it is not customary to charge for the extra day (February 29) which occurs one year in every four years, these tables shall also be used for each such year.

PRO RATA TABLE

January			February			March			April			May			June		
Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio
1	1	.003	1	32	.088	1	60	.164	1	91	.249	1	121	.332	1	152	.416
2	2	.005	2	33	.090	2	61	.167	2	92	.252	2	122	.334	2	153	.419
3	3	.008	3	34	.093	3	62	.170	3	93	.255	3	123	.337	3	154	.422
4	4	.011	4	35	.096	4	63	.173	4	94	.258	4	124	.340	4	155	.425
5	5	.014	5	36	.099	5	64	.175	5	95	.260	5	125	.342	5	156	.427
6	6	.016	6	37	.101	6	65	.178	6	96	.263	6	126	.345	6	157	.430
7	7	.019	7	38	.104	7	66	.181	7	97	.266	7	127	.348	7	158	.433
8	8	.022	8	39	.107	8	67	.184	8	98	.268	8	128	.351	8	159	.436
9	9	.025	9	40	.110	9	68	.186	9	99	.271	9	129	.353	9	160	.438
10	10	.027	10	41	.112	10	69	.189	10	100	.274	10	130	.356	10	161	.441
11	11	.030	11	42	.115	11	70	.192	11	101	.277	11	131	.359	11	162	.444
12	12	.033	12	43	.118	12	71	.195	12	102	.279	12	132	.362	12	163	.447
13	13	.036	13	44	.121	13	72	.197	13	103	.282	13	133	.364	13	164	.449
14	14	.038	14	45	.123	14	73	.200	14	104	.285	14	134	.367	14	165	.452
15	15	.041	15	46	.126	15	74	.203	15	105	.288	15	135	.370	15	166	.455
16	16	.044	16	47	.129	16	75	.205	16	106	.290	16	136	.373	16	167	.458
17	17	.047	17	48	.132	17	76	.208	17	107	.293	17	137	.375	17	168	.460
18	18	.049	18	49	.134	18	77	.211	18	108	.296	18	138	.378	18	169	.463
19	19	.052	19	50	.137	19	78	.214	19	109	.299	19	139	.381	19	170	.466
20	20	.055	20	51	.140	20	79	.216	20	110	.301	20	140	.384	20	171	.468
21	21	.058	21	52	.142	21	80	.219	21	111	.304	21	141	.386	21	172	.471
22	22	.060	22	53	.145	22	81	.222	22	112	.307	22	142	.389	22	173	.474
23	23	.063	23	54	.148	23	82	.225	23	113	.310	23	143	.392	23	174	.477
24	24	.066	24	55	.151	24	83	.227	24	114	.312	24	144	.395	24	175	.479
25	25	.068	25	56	.153	25	84	.230	25	115	.315	25	145	.397	25	176	.482
26	26	.071	26	57	.156	26	85	.233	26	116	.318	26	146	.400	26	177	.485
27	27	.074	27	58	.159	27	86	.236	27	117	.321	27	147	.403	27	178	.488
28	28	.077	28	59	.162	28	87	.238	28	118	.323	28	148	.405	28	179	.490
29	29	.079				29	88	.241	29	119	.326	29	149	.408	29	180	.493
30	30	.082				30	89	.244	30	120	.329	30	150	.411	30	181	.496
31	31	.085				31	90	.247				31	151	.414			

July			August			September			October			November			December		
Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio	Day of Month	Day of Year	Ratio
1	182	.499	1	213	.584	1	244	.668	1	274	.751	1	305	.836	1	335	.918
2	183	.501	2	214	.586	2	245	.671	2	275	.753	2	306	.838	2	336	.921
3	184	.504	3	215	.589	3	246	.674	3	276	.756	3	307	.841	3	337	.923
4	185	.507	4	216	.592	4	247	.677	4	277	.759	4	308	.844	4	338	.926
5	186	.510	5	217	.595	5	248	.679	5	278	.762	5	309	.847	5	339	.929
6	187	.512	6	218	.597	6	249	.682	6	279	.764	6	310	.849	6	340	.932
7	188	.515	7	219	.600	7	250	.685	7	280	.767	7	311	.852	7	341	.934
8	189	.518	8	220	.603	8	251	.688	8	281	.770	8	312	.855	8	342	.937
9	190	.521	9	221	.605	9	252	.690	9	282	.773	9	313	.858	9	343	.940
10	191	.523	10	222	.608	10	253	.693	10	283	.775	10	314	.860	10	344	.942
11	192	.526	11	223	.611	11	254	.696	11	284	.778	11	315	.863	11	345	.945
12	193	.529	12	224	.614	12	255	.699	12	285	.781	12	316	.866	12	346	.948
13	194	.532	13	225	.616	13	256	.701	13	286	.784	13	317	.868	13	347	.951
14	195	.534	14	226	.619	14	257	.704	14	287	.786	14	318	.871	14	348	.953
15	196	.537	15	227	.622	15	258	.707	15	288	.789	15	319	.874	15	349	.956
16	197	.540	16	228	.625	16	259	.710	16	289	.792	16	320	.877	16	350	.959
17	198	.542	17	229	.627	17	260	.712	17	290	.795	17	321	.879	17	351	.962
18	199	.545	18	230	.630	18	261	.715	18	291	.797	18	322	.882	18	352	.964
19	200	.548	19	231	.633	19	262	.718	19	292	.800	19	323	.885	19	353	.967
20	201	.551	20	232	.636	20	263	.721	20	293	.803	20	324	.888	20	354	.970
21	202	.553	21	233	.638	21	264	.723	21	294	.805	21	325	.890	21	355	.973
22	203	.556	22	234	.641	22	265	.726	22	295	.808	22	326	.893	22	356	.975
23	204	.559	23	235	.644	23	266	.729	23	296	.811	23	327	.896	23	357	.978
24	205	.562	24	236	.647	24	267	.732	24	297	.814	24	328	.899	24	358	.981
25	206	.564	25	237	.649	25	268	.734	25	298	.816	25	329	.901	25	359	.984
26	207	.567	26	238	.652	26	269	.737	26	299	.819	26	330	.904	26	360	.986
27	208	.570	27	239	.655	27	270	.740	27	300	.822	27	331	.907	27	361	.989
28	209	.573	28	240	.658	28	271	.742	28	301	.825	28	332	.910	28	362	.992
29	210	.575	29	241	.660	29	272	.745	29	302	.827	29	333	.912	29	363	.995
30	211	.578	30	242	.663	30	273	.748	30	303	.830	30	334	.915	30	364	.997
31	212	.581	31	243	.666				31	304	.833				31	365	1.000



**Commercial Automobile Insurance Manual**

**COMMERCIAL MOTORCYCLE RATES**

R-178  
C.A.R.  
2/1/2018

**Commonwealth Automobile Reinsurers  
Massachusetts Commercial Automobile**

**Commercial Motorcycle Rates**

Coverage	Vehicle Engine Size Group			
	0cc-100cc	101cc-350cc	351cc-650cc	651cc +
A-1	A \$32.00	B \$26.00	C \$41.00	D \$38.00
A-2	\$3.00	\$3.00	\$5.00	\$5.00
B (excluding guest)	\$11.00	\$9.00	\$14.00	\$12.00
B (including guest)	\$38.00	\$30.00	\$48.00	\$45.00
PDL	\$36.00	\$29.00	\$45.00	\$42.00

Collision (\$500 Deductible) \$4.77 per \$100 of value  
 Comprehensive (\$500 Deductible) \$2.46 per \$100 or value  
 Limited Collision (\$500 Deductible) 6.0% of the \$500 deductible Collision rate

Determine motorcycle Collision and Comprehensive rates by following procedure:

- (a) Determine the motorcycle's Original Cost New in hundreds of dollars,
- (b) Multiply the value determined in (a) by the rate per \$100,
- (c) Multiply the value determined in (b) by the Age Rate Factor.

Motorcycle Age Rate Factors			
Age Group	Motorcycle Age Based on Model Year	Collision Factor	Comprehensive Factor
1	Current MY	1.00	1.00
2	1st Preceding	0.93	0.91
3	2nd Preceding	0.86	0.81
4	3rd Preceding	0.79	0.72
5	4th Preceding	0.72	0.62
6	5th Preceding	0.65	0.53
7	6th Preceding	0.58	0.44
8	All Other	0.51	0.34

The current model year changes October 1, regardless of the actual date the models are introduced.

Waiver of Deductible Charges	Deductibles			
	\$300	\$500	\$1,000	\$2,000
Collision, Lim. Collision	\$9.00	\$12.00	\$17.00	\$24.00

**Deductible Charges**

Collision	\$38.00	base	0.713	0.571	< Add the \$300 deductible charges to the \$500 base premium.
Limited Collision	\$8.00	base	0.619	0.412	< Apply the \$1000/\$2000 factors to the \$500 deductible base premium.
Comprehensive	\$2.00	base	0.608	0.555	

Fire only: Charge 5% of the Commercial Motorcycle Comprehensive premium  
 Fire & Theft only: Charge 95% of the Commercial Motorcycle Comprehensive premium

Limit Per Person	MedPay Rate
\$500	\$132
\$750	\$140
\$1,000	\$147
\$2,000	\$176
\$5,000	\$245
\$10,000	\$333
\$15,000	\$383
\$20,000	\$422
\$25,000	\$455
\$50,000	\$581

Limit	U-1 Rate	U-2 Rate
20/40	\$35	\$0
20/50	\$35	\$2
25/50	\$41	\$8
35/80	\$44	\$24
50/100	\$50	\$47
100/300	\$56	\$125
250/500	\$60	\$452
500/500	\$75	\$819
500/1000	\$90	\$1,188

Substitute Transportation	Rate
\$15/day - \$450 max	68
\$30/day - \$900 max	135
\$45/day - \$1,350 max	251
\$100/day - \$3,000 max	519

Towing & Labor	Rate
\$50/day per disablement	12
\$100/day per disablement	24

**Electric Motorcycles:**

For Electric Motorcycles used for commercial purposes, use the commercial motorcycle rates specified for Vehicle Engine Size Group D.

**Commonwealth Automobile Reinsurers**  
**Commercial Automobile Insurance Manual**

**LIST OF CITIES AND TOWNS**

**ALPHABETICAL LIST OF**

- (1) Cities and Towns in Capital Letters.
- (2) Villages, Sections of Cities and Towns, and Local Designations in Small Type followed by the Name of the City or Town.

Counties are indicated by Code numbers as follows:

Left Hand Digit	County	Left Hand Digit	County
0	Barnstable	4	Franklin
	Dukes		Hampden
	Nantucket	5	Hampshire
	Plymouth	6	Middlesex
1	Berkshire	7	Norfolk
2	Bristol	8	Suffolk
3	Essex	9	Worcester

Sections of cities and towns designated "North," "East," "South" and "West" or with a prefix or suffix merely supplemental to the principal name (such as **West** Newton or Arlington **Heights**) are not separately listed (see principal designation).

In some instances (such as **North** Andover) there are distinct townships, Andover and North Andover, in which case both are listed.

**Commercial Automobile Insurance Manual**

**CITY OF BOSTON**

<b>Definition</b>	<b>Territory Schedule</b>	<b>Statistical Code</b>
BOSTON CENTRAL - (Zip Codes 0210-02111, 02113-02116, 02118, 02133, 02199, 02201, 02203, 02210, 02215, 02222, 02241)	07	821
BRIGHTON - (Zip Codes 02134, 02135, 02163)	08	822
CHARLESTOWN – EAST BOSTON - (Zip Codes 02128, 02129)	10	824
DORCHESTER - (North Dorchester and South Dorchester) - (Zip Codes 02122, 02124, 02125, 02126)	05*	819
EAST BOSTON – CHARLESTOWN - (Zip Codes 02128, 02129)	10	824
HYDE PARK - (Zip Codes 02136)	04	818
JAMAICA PLAIN - (Zip Code 02130)	03	817
ROSLINDALE - (Zip Code 02131)	02	816
ROXBURY - (Including parts of Dorchester) (Zip Codes 02119, 02120, 02121)	06	820
SOUTH BOSTON - (Zip Code 02127)	09	823
WEST ROXBURY (Zip Code 02132)	01	815

The following list contains subdivisions of Boston with territorial schedules and statistical codes:

<b>Name</b>	<b>Territory Schedule</b>	<b>Statistical Code</b>
Allston - (Brighton)	08	822
Mattapan - (Dorchester - North)	05	819
Readville - (Hyde Park)	04	818

\*A portion of postal zip code district 02126 falls in Hyde Park (Territory 04) and should be rated as such. The correct border between South Dorchester and Hyde Park is as follows:

Southeast, then East on Cummins Highway, Southwest on Rugby Road (1 block), Southeast on Greenfield Road, short stretch Southwest on River Street, Southeast on Mattakeeset St. to Neponset River. Border goes down the middle of these streets.

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>A</b>		
ABINGTON	14	010
ACTON	12	630
ACUSHNET	13	230
ADAMS	14	110
AGAWAM	12	420
ALFORD	16	170
AMESBURY	15	310
AMHERST	12	510
ANDOVER	14	311
ARLINGTON	17	610
ASHBURNHAM	14	930
ASHBY	13	670
ASHFIELD	14	470
ASHLAND	16	631
ATHOL	11	910
ATTLEBORO	12	210
AUBURN	15	931
AVON	17	730
AYER	11	632
<b>B</b>		
BARNSTABLE	11	021
BARRE	12	932
BECKET	16	171
BEDFORD	13	633
BELCHERTOWN	12	530
BELLINGHAM	15	731
BELMONT	17	611
BERKLEY	15	231
BERLIN	14	933
BERNARDSTON	12	471
BEVERLY	16	312
BILLERICA	15	634
BLACKSTONE	15	934
BLANDFORD	17	490
BOLTON	14	970

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>B</b>		
BOSTON CENTRAL	07	821
BOURNE	12	050
BOXBOROUGH	13	671
BOXFORD	16	370
BOYLSTON	14	971
BRAINTREE	18	710
BREWSTER	11	080
BRIDGEWATER	14	011
BRIGHTON	08	822
BRIMFIELD	14	491
BROCKTON	20	002
BROOKFIELD	14	935
BROOKLINE	20	702
BUCKLAND	16	430
BURLINGTON	16	635
<b>C</b>		
CAMBRIDGE	19	600
CANTON	17	711
CARLISLE	15	672
CARVER	16	030
CHARLEMONT	15	472
CHARLTON	12	936
CHATHAM	11	051
CHELMSFORD	13	612
CHELSEA	20	802
CHESHIRE	13	130
CHESTER	16	440
CHESTERFIELD	16	570
CHICOPEE	13	402
CHILMARK	15	081
CLARKSBURG	15	131
CAMBRIDGE	19	600

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>C</b>		
CLINTON	15	911
COHASSET	15	732
COLRAIN	16	431
CONCORD	14	613
CONWAY	16	473
CUMMINGTON	15	571
<b>D</b>		
DALTON	15	132
DANVERS	16	313
DARTMOUTH	12	211
DEDHAM	18	712
DEERFIELD	12	432
DENNIS	11	052
DIGHTON	15	232
DORCHESTER	05	819
DOUGLAS	13	937
DOVER	16	733
DRACUT	14	614
DUDLEY	12	938
DUNSTABLE	15	673
DUXBURY	13	031
<b>E</b>		
E BOSTON/CHARLESTOWN	10	824
E BRIDGEWATER	15	032
E BROOKFIELD	13	973
E LONGMEADOW	15	441
EASTHAM	12	082
EASTHAMPTON	12	511
EASTON	16	212
EDGARTOWN	13	053
EGREMONT	13	172
ERVING	14	433
ESSEX	12	330
EVERETT	19	602

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>F</b>		
FAIRHAVEN	15	213
FALL RIVER	17	201
FALMOUTH	11	054
FITCHBURG	12	902
FLORIDA	12	173
FOXBOROUGH	15	734
FRAMINGHAM	17	615
FRANKLIN	15	713
FREETOWN	12	233
<b>G</b>		
GARDNER	12	912
GAY HEAD	17	083
GEORGETOWN	13	331
GILL	11	474
GLOUCESTER	16	314
GOSHEN	12	573
GOSNOLD	11	084
GRAFTON	13	913
GRANBY	13	574
GRANVILLE	14	492
GREAT BARRINGTON	12	111
GREENFIELD	11	410
GROTON	13	636
GROVELAND	13	332
<b>H</b>		
HADLEY	13	531
HALIFAX	14	070
HAMILTON	13	333
HAMPDEN	14	493
HANCOCK	11	174
HANOVER	16	033
HANSON	14	034
HARDWICK	15	939
HARVARD	12	974
HARWICH	11	055
HATFIELD	14	532



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<b>H</b>		
HAVERHILL	16	302
HAWLEY	16	475
HEATH	15	476
HINGHAM	16	012
HINSDALE	15	133
HOLBROOK	15	735
HOLDEN	13	940
HOLLAND	14	494
HOLLISTON	15	637
HOLYOKE	13	403
HOPEDALE	15	941
HOPKINTON	15	638
HUBBARDSTON	16	942
HUDSON	13	616
HULL	17	035
HUNTINGTON	15	533
HYDE PARK	04	818
<b>I</b>		
IPSWICH	13	315
<b>J</b>		
JAMAICA PLAIN	03	817
<b>K</b>		
KINGSTON	16	036
<b>L</b>		
LAKEVILLE	14	037
LANCASTER	13	943
LANESBOROUGH	11	134
LAWRENCE	20	303
LEE	11	135
LEICESTER	14	944
LENOX	14	136
LEOMINSTER	11	914
LEVERETT	16	477
LEXINGTON	16	617

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>L</b>		
LEYDEN	13	478
LINCOLN	16	639
LITTLETON	13	640
LONGMEADOW	14	442
LOWELL	18	601
LUDLOW	11	421
LUNENBURG	13	945
LYNN	19	300
LYNNFIELD	17	334
<b>M</b>		
MALDEN	19	603
MANCHESTER	15	335
MANSFIELD	15	214
MARBLEHEAD	17	316
MARION	13	038
MARLBOROUGH	13	618
MARSHFIELD	16	039
MASHPEE	13	085
MATTAPOISETT	13	040
MAYNARD	15	620
MEDFIELD	14	736
MEDFORD	18	604
MEDWAY	13	737
MELROSE	19	619
MENDON	13	946
MERRIMAC	15	336
METHUEN	17	317
MIDDLEBOROUGH	12	013
MIDDLEFIELD	16	576
MIDDLETON	16	337
MILFORD	14	915
MILLBURY	16	916
MILLIS	11	738
MILLVILLE	16	947
MILTON	17	714
MONROE	15	479
MONSON	12	422

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<b>M</b>		
MONTAGUE	13	411
MONTEREY	15	175
MONTGOMERY	16	495
MT WASHINGTON	16	176
<b>N</b>		
NAHANT	16	338
NANTUCKET	11	056
NATICK	15	621
NEEDHAM	17	715
NEW ASHFORD	12	177
NEW BEDFORD	18	200
NEW BRAINTREE	11	975
NEW MARLBOROUGH	14	178
NEW SALEM	15	480
NEWBURY	13	339
NEWBURYPORT	13	318
NEWTON	18	605
NO ADAMS	11	112
NO ANDOVER	14	319
NO ATTLEBOROUGH	11	215
NO BROOKFIELD	12	948
NO READING	15	641
NORFOLK	15	739
NORTHAMPTON	13	512
NORTHBOROUGH	13	949
NORTHBRIDGE	12	917
NORTHFIELD	15	434
NORTON	15	234
NORWELL	15	041
NORWOOD	18	716
NAHANT	16	338
<b>O</b>		
OAK BLUFFS	13	057
OAKHAM	15	976
ORANGE	12	412

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<b>O</b>		
ORLEANS	11	058
OTIS	13	179
OXFORD	12	950
<b>P</b>		
PALMER	11	423
PAXTON	16	977
PEABODY	18	320
PELHAM	14	577
PEMBROKE	14	042
PEPPERELL	13	642
PERU	11	180
PETERSHAM	16	978
PHILLIPSTON	15	979
PITTSFIELD	11	102
PLAINFIELD	16	578
PLAINVILLE	12	740
PLYMOUTH	14	014
PLYMPTON	13	071
PRINCETON	14	980
PROVINCETOWN	14	059
<b>Q</b>		
QUINCY	19	703
<b>R</b>		
RANDOLPH	18	717
RAYNHAM	15	235
READING	17	622
REHOBOTH	12	236
REVERE	20	803
RICHMOND	16	181
ROCHESTER	12	043
ROCKLAND	18	015
ROCKPORT	15	340
ROSLINDALE	02	816
ROWE	11	481
ROWLEY	16	341

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<b>R</b>		
ROXBURY	06	820
ROYALSTON	16	981
RUSSELL	14	443
RUTLAND	13	951
<b>S</b>		
SALEM	16	304
SALISBURY	12	342
SANDISFIELD	13	182
SANDWICH	11	060
SAUGUS	18	321
SAVOY	17	183
SCITUATE	17	044
SEEKONK	12	237
SHARON	18	741
SHEFFIELD	13	137
SHELBURNE	15	435
SHERBORN	15	674
SHIRLEY	15	643
SHREWSBURY	14	918
SHUTESBURY	15	482
SOMERSET	15	238
SOMERVILLE	20	606
SOUTH BOSTON	09	823
SOUTH HADLEY	13	513
SOUTHAMPTON	12	580
SOUTHBOROUGH	15	952
SOUTHBRIDGE	13	919
SOUTHWICK	14	444
SPENCER	12	920
SPRINGFIELD	19	400
STERLING	12	953
STOCKBRIDGE	15	138
STONEHAM	17	623
STOUGHTON	18	718
STOW	15	644

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<b>S</b>		
STURBRIDGE	13	954
SUDBURY	12	645
SUNDERLAND	12	436
SUTTON	15	955
SWAMPSCOTT	17	322
SWANSEA	12	239
<b>T</b>		
TAUNTON	16	202
TEMPLETON	11	956
TEWKSBURY	17	646
TISBURY	11	061
TOLLAND	14	496
TOPSFIELD	16	371
TOWNSEND	13	647
TRURO	13	086
TYNGSBOROUGH	15	648
TYRINGHAM	12	184
<b>U</b>		
UPTON	13	957
UXBRIDGE	12	921
<b>W</b>		
WAKEFIELD	17	624
WALES	12	497
WALPOLE	14	719
WALTHAM	17	607
WARE	11	514
WAREHAM	14	016
WARREN	12	958
WARWICK	15	483
WASHINGTON	15	185
WATERTOWN	18	608
WAYLAND	16	649
WEBSTER	11	922
WELLESLEY	15	720
WELLFLEET	13	087

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<i>City or Town</i>	<i>Territorial Schedule</i>	<i>Statistical Code</i>
<b>W</b>		
WENDELL	14	484
WENHAM	15	343
WEST BOYLSTON	14	959
WEST BRIDGEWATER	16	045
WEST BROOKFIELD	12	960
WEST NEWBURY	14	344
WEST ROXBURY	01	815
WEST SPRINGFIELD	14	425
WEST STOCKBRIDGE	12	139
WEST TISBURY	14	088
WESTBOROUGH	14	923
WESTFIELD	11	424
WESTFORD	14	650
WESTHAMPTON	15	581
WESTMINSTER	14	961
WESTON	13	651
WESTPORT	12	240
WESTWOOD	16	742
WEYMOUTH	17	721
WHATELY	14	437
WHITMAN	15	017
WILBRAHAM	12	445
WILLIAMSBURG	12	534
WILLIAMSTOWN	15	140
WILMINGTON	17	652
WINCHENDON	12	924
WINCHESTER	17	625
WINDSOR	14	186
WINTHROP	18	810
WOBURN	16	626
WORCESTER	18	900
WORTHINGTON	13	582
WRENTHAM	13	743
<b>Y</b>		
YARMOUTH	11	062